

New York State and Local Sales and Use Tax Return **Quarterly for Part-Quarterly Filers**

September	October	November			
	Tax Period	1			
September 1					

Sales tax i	dentification number	S M T W T F S			
Legal name	(if no label, print legal name as it appears on the Certificate of Authority)	2 3 4 5 6 7 8 9 10 11 12 13 14 18 16 17 18 19 20 21 22 23 24 25 26 27 28 28	2		
dba (doing l	ousiness as) name	30 31			
Number and	I street a label here		ue date:		
Number and	I street Place label here		hursday, ecember 20, 2001		
City, state, 2	ZIP code	You will b penalty a	e responsible for nd interest if your not postmarked by		
No tax due?	Check the box to the right and complete Step 1; in Step 3 on page 3, enter <i>none</i> in boxes 13, 1 You must file by the due date even if no tax is due. There is a \$50 penalty for late filing of a n	4, and 15; and complete Step			
Multiple locations?	If you are reporting sales tax for more than one business location and your identification numb the right and attach a list of your locations.		ne box to		
Final return?	Check the box to the right if you are discontinuing your business and this is your final return; of your Certificate of Authority. Attach the Certificate of Authority to the return. See 2 in instruction		ack of		
Has your ad	dress or business information changed? If so, check the box to the right and enter new mailing addre		in instructions.		
Step 1 of	9 Gross sales and services Enter total gross sales and servin box 1		.00		
Do not inc	ude sales tax in the gross sales and services amount. See 4 in instructions.				
Step 2 of	9 Identify required schedules Check the box(es) on the right below proceed to Step 3. Need to obtain s				
Quarterly schedule	Description		Check the box for each schedule you are attaching		
SCHEDULE	Use Form ST-810.2, Quarterly Schedule A for Part-Quarterly Filers, to report tax and taxa food and drink (restaurant meals, takeout, etc.) and from hotel occupancy in Nassau or admissions, club dues, and cabaret charges in Niagara County.				
SCHEDULE B	Use Form ST-810.3, Quarterly Schedule B for Part-Quarterly Filers, to report tax due on utilities (residential/nonresidential), transportation and delivery of gas and electricity, and residential energy sources and services, including school district utility taxes. Reminder: You must report sales of nonresidential utility services made to QEZEs on Form ST-810.3-ATT, Quarterly Schedule B-ATT for Part-Quarterly Filers.				
SCHEDULE FR	Use Form ST-810.10, Quarterly Schedule FR for Part-Quarterly Filers, to report retail sales of motor fuel or diesel motor fuel, and fuel taken from inventory, as explained in the schedule's instructions.				
SCHEDULE	Use Form ST-810.7, Quarterly Schedule H for Part-Quarterly Filers, to report sales of cleigible for exemption from New York State and some local sales and use tax.	lothing and footwear			
SCHEDULE	Use Form ST-810.5, Quarterly Schedule N for Part-Quarterly Filers, to report taxes due services in New York City. Reminder: Providers of parking services must also file Form Schedule N-ATT for Part-Quarterly Filers.				
SCHEDULE	Use Form ST-810.6, Quarterly Schedule P for Part-Quarterly Filers, only if you are a vendor registered to make PrompTax payments of sales tax.				
SCHEDULE					
SCHEDULE	Use Form ST-810.8, Quarterly Schedule T for Part-Quarterly Filers, to report taxes due on tele answering services, and telegraph services imposed by certain counties, school districts, ar report sales of these services made to QEZEs on Form ST-810.8-ATT, Quarterly Schedule T-A	nd cities. Reminder: You must			
	Schedules CT and N.I. For reciprocal tax agreement filing requirements, see 5	in inetructions			

Refer to instructions (Form ST-810-I) if you have questions or need help. Please be sure to keep a completed copy of your return for your records. See the bottom of page 4 for informational telephone numbers.

For office use only

6

Column subtotals (also enter on page 3, boxes 10, 11, and 12):

7

.00

8

.00

Column A Taxing jurisdiction	Column B Jurisdiction code	Column C Taxable sales and services	Column D Purchases subject to tax	Column E Tax rate	Sales and	of
Otsego County	OT 3603	.00	.0	0 7%	(C + D) x E	_
Putnam County	PU 3714	.00	.0			
Rensselaer County	RE 3875	.00	.0			
Rockland County	RO 3904	.00	.0	_		
St. Lawrence County	ST 4087	.00	.0	_		
Saratoga County	SA 4103	.00	.0			
Schenectady County	SC 4233	.00	.0			
Schoharie County	SC 4303	.00	.0			
Schuyler County	SC 4403	.00	.0			
Seneca County	SE 4512	.00	.0			
Steuben County (outside the following)	ST 4688	.00	.0			_
Hornell (city)	HO 4630	.00	.0			
Corning (city)	CO 4616	.00	.0			L
Suffolk County	SU 4766	.00	.0			
Sullivan County	SU 4812	.00	.0			
Tioga County	TI 4903	.00	.0			
Tompkins County (outside the following)	TO 5096	.00	.0			L
Ithaca (city)	IT 5013	.00	.0	0 8%		L
Ulster County	UL 5113	.00	.0	0 73/4%		
Warren County (outside the following)	WA 5292	.00	.0	0 7%		
Glens Falls (city)	GL 5212	.00	.0	0 7%		
Washington County	WA 5302	.00	.0	0 7%		
Wayne County	WA 5402	.00	.0	0 7%		
Westchester County (outside the following)	WE 5503	.00	.0	0 634%		
Mount Vernon (city)	MO 5513	.00	.0			
New Rochelle (city)	NE 6855	.00	.0	_		
White Plains (city)	WH 5555	.00	.0	_		
Yonkers (city)	YO 6578	.00	.0	_		
Wyoming County	WY 5605	.00	.0			
Yates County	YA 5702	.00	.0			
Taxes in New York City [includes counties of Bronx, Kings	1710702	.00	.0	7 70		
(Brooklyn), New York (Manhattan), Queens, and Richmond (Staten Island)]	NE 0000	00		01/0/		
New York City/State combined tax	NE 8009	.00	.0			-
New York State/MCTD (fuel and utilities)	NE 8040	.00. 9	.0			
New York City — local tax only (enter box 9 amount in Step 7B) New York City — local tax only (transportation and delivery of gas and electric services) (enter box 9a amount in Step 7B)	NE 8010 NE 8013	.00 9a	.0			
Column subtotals from page 2, boxes 6, 7, and 8:		.00	.0	0	12	
		.00	.0		15	
Colui Credit summary — Enter the total amount of credits claim	mn totals: led in Step			///////////////////////////////////////		.00
Step 4 of 9 Calculate special taxes		Internal code	Column G Taxable receipts	Column H		
Passenger car rentals		PA 0003	.00	0 5%	 	
Information & entertainment services furnished via telephony and te	elegraphy	IN 7009	.0		_	
information a official information of via tolephony and to	лодгартту	114 7 000	Total speci			
Step 5 of 9 Calculate tax credits and advance pa	yments			iternal code	Column K Credit amount	
Credit for prepaid sales tax on cigarettes				CR C8888	Si cuit amount	П
Credits against sales or use tax (see to in instructions)			(///			\vdash
Advance payments (including ST-809 and PrompTax payments)			<u> </u>			t
Unclaimed vendor collection credit (attach Form PR-912)	,		V////	JN 7802		\vdash
			'		17	\vdash
		-	nd advance pay			1

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Step 6 of 9 Calculate to	axes due		n total (box 15) to <i>Total special</i> ax credits and advance payment		Taxes due	
Box 15 amount \$	+ Box 16 amount \$	Box amo	17 unt \$	=	18	
Step 7 of 9 Calculate ve or pay pena	endor collection credit	You are eligible for vendor co December 20, 2001, and you If you are not eligible, enter '	llection credit ONLY if you file by pay the full amount due with the r '0" in box 19 and go to 7D .	eturn.		
OR Pay penalty and in:	above State tax rate + +		Credit rate X 3½% = \$	**	Vendor collection credit VE 7702 19 Penalty and interest 20	
	ccess our Web site at www.tax.sta nt shown in box 18, Taxes due. En otal amount due	ter this amount in box 20. Make check or money order	payable to <i>New York State Sale</i> s		Total amount due	
Final calculation:	Taking vendor collecti	Write on your check your ID on credit? Subtract box erest? Add box 20 to box	19 from box 18.		I otal alliount uue	
Step 9 of 9 Sign and ma			hursday, December 20, 200 or complete mailing informati		considered	
Printed name of taxpayer			Title			
	than taxpayer		Daytime telephone (_)	-
	, -					_
Signature of preparer, if other than Where to mail	Do you participate in the New Connecticut/New York Recipr	Jersey/New York or the	Daytime telephone Make check payable to David Sample 100 Elm Street Albany, NY 12203		ork State Sales Tax. 2971 TE December 10, 2001	
your return and attachments If using a private delivery service rather than the U.S. Postal Service, see in instructions for the correct address.	NYS SALES TAX PROCESSING JAF BUILDING PO BOX 1208 NEW YORK NY 10116-1208	Yes ddress envelope to: YS SALES TAX PROCESSING ECIPROCAL TAX AGREEMENT AF BUILDING 0 BOX 1209 EW YORK NY 10116-1209 dram. please use the	PAY TO THE ORDER OF New York State Sa One Thousand and 00/100 First State Bank 00-0000000 ST-810 11/30/01 Don't forget to write your ST-810, and 11/30/01.	Iles Tax	Don't forget to sign your check	65
Need help?	an and i rompias pro		rnet access: www.tax.state.i		140 AI	_
	ailable from 8:30 a.m. to 4:25 p. ugh Friday.	m 🚍	sons with disabilities: In colbilities Act we will ensure the	•	with the Americans with	

Business Tax information: 1 800 972-1233
Forms and publications: 1 800 462-8100
From outside the U.S. and outside Canada: (518) 485-6800

Fax-on-demand forms: 1 800 748-3676

Hearing and speech impaired (telecommunications device for the deaf (TDD) callers only): 1 800 634-2110 (8:30 a.m. to 4:25 p.m., eastern time)

Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 225-5829.

If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.