

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

December	January	February			
	Tax Period				
	, 2001 – Febru				

			Moreh 2002			
Sales tax i	dentification number		March 2002 S M T W T F S 1 2 3 4 5 6 7 8 9	1202		
Legal name	(if no label, print legal name as it appears on the Certificate of Authority)		10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	<u> </u>		
dba (doing b	ousiness as) name	, a	31	_		
Number and	d street Place label he	16	20 W	ıe date: ednesday, arch 20, 2002		
City, state, 2	ZIP code		You will be penalty ar	e responsible for nd interest if your ot postmarked by		
No tax due?	Check the box to the right and complete Step 1; in Step 3 or You must file by the due date even if no tax is due. There is					
Multiple locations?	If you are reporting sales tax for more than one business lotted the right and attach a list of your locations.			e box to		
Final return?	Check the box to the right if you are discontinuing your bus your <i>Certificate of Authority</i> . Attach the <i>Certificate of Autho</i>					
Has your ad	dress or business information changed? If so, check the			in instructions.		
•	9 Gross sales and services	Enter total gross sales and service in box 1		.00		
Do not incl	ude sales tax in the gross sales and services amo	ount. See 4 in instructions.				
Step 2 of	9 Identify required schedules	Check the box(es) on the right below, to proceed to Step 3. Need to obtain sch				
Quarterly schedule	Description			Check the box for each schedule you are attaching		
SCHEDULE	Use Form ST-810.2, Quarterly Schedule A for Part-Qua food and drink (restaurant meals, takeout, etc.) and fro admissions, club dues, and cabaret charges in Niagara	m hotel occupancy in Nassau or Ni				
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 dies 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 clothing and footwear eligible for exemption from New York State and some local sales and use tax.					
SCHEDULE	Use Form ST-810.5, <i>Quarterly Schedule N for Part-Quarterly Schedule N for Part-Quarterly Filers</i> .					
SCHEDULE	Use Form ST-810.6, Quarterly Schedule P for Part-Que PrompTax payments of sales tax.	arterly Filers, only if you are a vendo	r registered to make			
SCHEDULE	Use Form ST-810.9, Quarterly Schedule Q for Part-Quor services to Qualified Empire Zone Enterprises (Cosome local sales and use tax.					
SCHEDULE	Use Form ST-810.8, Quarterly Schedule T for Part-Quarter answering services, and telegraph services imposed by report sales of these services made to QEZEs on Form ST	certain counties, school districts, and	cities. Reminder: You must			
	Schedules CT and NJ: For reciprocal tax agreement	ent filing requirements, see 5 in	instructions.			

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

FU 3532

OS 3542

6

.00

.00

.00

7

.00

.00

.00

7%

7%

8

Fulton (city)

Oswego (city)

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

Column A Taxing jurisdiction	Column B Jurisdiction code	Colum Taxable and serv	sales	Column E Purchases su to tax		Column E Tax rate	นอบ เฉม
Otsego County	OT 3603		.00		.00	7%	(C + D) x E
Putnam County	PU 3714		.00		.00		
Rensselaer County	RE 3875		.00		.00		
Rockland County	RO 3904		.00		.00		
St. Lawrence County	ST 4087		.00		.00		
Saratoga County	SA 4103		.00		.00		
Schenectady County	SC 4233		.00		.00		
Schoharie County	SC 4303		.00		.00		
Schuyler County	SC 4403		.00		.00		
Seneca County	SE 4512		.00		.00		
Steuben County (outside the following)	ST 4688		.00		.00		
Corning (city)	CO 4616		.00		.00		
	HO 4630		.00		.00.		
Hornell (city) Suffolk County	SU 4766					-	
			.00		.00		
Sullivan County	SU 4812		.00		.00		
Tioga County	TI 4903		.00		.00		
Tompkins County (outside the following)	TO 5096		.00		.00		
Ithaca (city)	IT 5013		.00		.00		
Ulster County	UL 5113		.00		.00	_	
Warren County (outside the following)	WA 5292		.00		.00		
Glens Falls (city)	GL 5212		.00		.00		
Washington County	WA 5302		.00		.00		
Wayne County	WA 5402		.00		.00		
Westchester County (outside the following)	WE 5503		.00		.00		
Mount Vernon (city)	MO 5513		.00		.00		
New Rochelle (city)	NE 6855		.00		.00		
White Plains (city)	WH 5555		.00		.00		
Yonkers (city)	YO 6578		.00		.00		
Wyoming County	WY 5605		.00		.00		
Yates County	YA 5702		.00		.00	7%	
Taxes in New York City [includes counties of Bronx, Kings Brooklyn), New York (Manhattan), Queens, and Richmond (Staten Island)]							
New York City/State combined tax	NE 8009		.00		.00		
New York State/MCTD (fuel and utilities)	NE 8040	9	.00		.00.		
New York City — local tax only (enter box 9 amount in Step 7B)	NE 8010		.00		.00	4%	
New York City — local tax only (transportation and delivery of gas and electricity) (enter box 9a amount in Step 7B)	NE 8013	9a	.00		.00	2%	
Column subtotals from page 2, boxes 6, 7, and 8:		10		11			12
Columnia Cubicitalo mom pago 2, boxes 0, 1, and 0.			.00		.00		
Colu	mn totals:	13	.00	14	.00		15
Credit summary — Enter the total amount of credits claim	ned in Step	3 above, and c	n any attao	ched schedule	s (see		
Step 4 of 9 Calculate special taxes		Internal	code	Column (Taxable rece		Column H Tax rate =	Column J Special taxes due (G × H)
Passenger car rentals		PA 00			.00		
nformation & entertainment services furnished via telephony and te	elegraphy	IN 70	09		.00		
				Total s	pecia	l taxes:	16
Step 5 of 9 Calculate tax credits and advance pa	yments					rnal code	Column K Credit amount
Credit for prepaid sales tax on cigarettes					L CF	R C8888	
						С	
Credits against sales or use tax (see 16 in instructions)		A				Α	
Credits against sales or use tax (see to in instructions) Advance payments (including ST-809 and PrompTax pages)	ayments) (see 🕡 in instr	uctions)			Α	
Credits against sales or use tax (see 16 in instructions)	ayments) (see 🕡 in instr	uctions)		UN	A N 7802	17

Page 4 of 4 ST-810 (2/02)				1202	Quarterly	\$1-810
Step 6 of 9 Calculate t	taxes due		nn total (box 15) to <i>Total special ta</i> tax credits and advance payments		Taxes due	
Box 15 amount \$	Box 16 + amount \$	Box — amo	17 punt \$	= 18		
Step 7 of 9 Calculate v		You are eligible for vendor co	ollection credit ONLY if you file by the full amount due with the return			
7A If you are not required start at the asterisk (*) Schedule B, Part 4, box Schedule B, Part 4, box Schedule B-ATT Schedule H Schedule N Schedule Q Schedule T-ATT Total adjustment	4 . —	Schedule FR, Part 3, box 7 * Form ST-810, Step 3, box Total adjustment from 7A Form ST-810, Step 3, box 9 Form ST-810, Step 3, box 9 Eligible sales amount (mo	-			
\$Schedule B, Part 4, box 6 from \$	X 4% = (subtotal a) X 2% = (subtotal b) (add subtotals		Credit rate X 3½% = \$	**	Vendor collection VE 7702	credit
Call 1 800 972-1233 or	nterest if you are filing lat access our Web site at www.tax.s. unt shown in box 18, Taxes due.	tate.ny.us/salespi/salespi.asp for a Enter this amount in box 20. Make check or money order	n estimate of the penalty and payable to <i>New York State Sales</i>		Penalty and inte	
Final calculation:	Taking vendor collec	tion credit? Subtract box nterest? Add box 20 to bo			Total amount	aue
Step 9 of 9 Sign and m			Vednesday, March 20, 2002, to complete mailing information		sidered	
Printed name of taxpayer			Title			
Signature of taxpayer		Date	Daytime telephone ()		
	r than taxpayer					
Signature of preparer, if other the	Do you participate in the Ne Connecticut/New York Recip		Make check payable to A David Sample 100 Elm Street			. 2971
your return and attachments	No	Yes	Albany, NY 12203 PAY TO THE ORDER OF New York State Sale		March 10, 2002 \$1	1000
If using a private delivery service rather than the U.S. Postal Service, see 4 in instructions for the correct address.	JAF BUILDING PO BOX 1208 NEW YORK NY 10116-1208	Address envelope to: NYS SALES TAX PROCESSING RECIPROCAL TAX AGREEMENT JAF BUILDING PO BOX 1209 NEW YORK NY 10116-1209	One Thousand and 00/100 First State Bank 00-0000000 ST-810 2/28/02 Don't forget to write your s ST-810, and 2/28/02.	-D	and Sample	
	ed in the PrompTax pr	ogram, please use the	preaddressed envelo	pe prov	rided.	
Need help? Telephone assistance is av (eastern time), Monday thro Business Tax information: 1 800	vailable from 8:30 a.m. to 4:25 pough Friday.	p.m. Pers	rnet access: www.tax.state.ny sons with disabilities: In comabilities Act. we will ensure that	npliance w	rith the Americans	s 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)

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.

mmunications device for the deaf (8:30 a.m. to 4:25 p.m., eastern time)

Refer to the instructions (Form ST-810-I) if you have questions or need further help.