

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

March 2002	
Tax period	
, 2002 - March 3	1, 2002

			1 11 2222
Sales tax identification number		1 1 1 1 1	April 2002 S M T W T F S 1 2 3 4 5 6 0103
Legal name (if no label, print legal name as it appears	on the Certificate of Authority)		7 8 9 10 11 12 13 14 15 16 17 18 19 20
dba (doing business as) name			21 22 23 24 25 26 27 28
	label here		Due date:
Number and street	Place label here		20 Monday,
Other state 7ID and a			April 22, 2002 You will be responsible for
City, state, ZIP code			penalty and interest if your
			I return is not postmarked by this date.
	gross sales in box 1 of Step 1 beloven if no tax is due. See 1 in ins		3.
Has your address or business information	on changed? If so, enter new mailing	address on preprinted label above. So	ee 2 in instructions.
Complete Step 1 or Step 2, but not	both. See 3 in instruction	ons.	
Step 1 of 3 Long method of a	alculating tax due		
			1
1 Enter total gross sales and services	(to nearest dollar: see 🖪 in instru	uctions)	
3	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	2
2 Enter total taxable sales and service	s (to nearest dollar; see 5 in inst	tructions)	
			3
3 Enter total purchases subject to tax			
4 Sales and use tax (see 7 in instruction 5 Credit for prepaid sales tax (see 8) in	ns)	5	
5 Credit for prepaid sales tax (see 8 in6 Net tax due (subtract box 5 amount fron	i indiractions)		6
7 Credits not identified (attachments req	•		
8 Advance payments (see 11) in instruction	ons)		
9 Add box 7 amount to box 8 amount.	0,10,		9
10 Sales and use tax due (subtract box 9			
11 Interest and penalty (see 11 in instruct			
			12
12 Amount due (add box 10 amount to l	box 11 amount; see 😰 in instruc	ctions) Pay this a	mount
Step 2 of 3 Short method of o	calculating tax due		
1 Comparable quarter of previous year	(see 13) in instructions)*	1	
2 Tax due (1/3 of box 1 amount)		2	
3 Credit for prepaid sales tax (see 14 ii	n instructions)	3	
4 Net tax due (subtract box 3 amount from	n box 2 amount)		4
5 Credits (attachments required, see 15 in	n instructions)	5	
6 Advance payments (see 16 in instruct		-	
7 Add box 5 amount to box 6 amount.			
8 Sales and use tax due (subtract box 7	· · · · · · · · · · · · · · · · · · ·		
9 Interest and penalty (see 17 in instruc	tions)		10
10 Amount due (add box 8 amount to be	ox 9 amount: see 🔞 in instruction	ons) Pav this a	
*Include short method adjustment in box	-		For office use only
Locality	Adjustment	on at mondonons.	1 of office age offig
Locality	\$		
	Ψ		

Step 3 of 3 Sign and mail this return Please be sure to keep a completed copy for your records. Must be postmarked by Monday, April 22, 2002, to filed on time. See below for complete mailing inform				dered
Printed name of taxpayer			Title	
Signature of taxpayer		Date	Daytime telephone)
Printed name of preparer, if othe	r than taxpayer			
Preparer's address				
Signature of preparer, if other that	an taxpayer		Daytime telephone _()
ca l			Make check payable to Ne	w York State Sales Tax.
Where to mail your return and	Do you participate in the New Jersey/New York or the Connecticut/New York Reciprocal Tax Agreement?		David Sample 100 Elm Street Albany, NY 12203	2971 DATE April 10, 2002
attachments If using a private delivery	No	Yes	ORDER OF New York State Sales One Thousand and 00/100	1
instructions for the correct address.	NYS SALES TAX PROCESSING 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	First State Bank	DOLLARS DOLLARS
			Don't forget to write your Sales Tax ID#, ST-809, and 3/31/02	Don't forget to sign your check

Need help?



Telephone assistance is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday.

For business tax information, call the New York State Business Tax Information Center: 1 800 972-1233 For general information: 1 800 225-5829 To order forms and publications: 1 800 462-8100 From areas outside the U.S. and outside Canada: (518) 485-6800



Fax-on-demand forms: Forms are available 24 hours a day, 7 days a week. 1 800 748-3676



Internet access: www.tax.state.ny.us



Hotline for the hearing and speech impaired:

1 800 634-2110 from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use.



Persons with disabilities: In compliance with the Americans with 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 CONTACT CENTER
W A HARRIMAN CAMPUS
ALBANY NY 12227