

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

	January 2003	
	Tax period	
1 1 1 1 1 1	2003 - Januar	y 31, 2003

Le	gal name (if no label, print legal name as it appears on the Certificate of Authority) a (doing business as) name		February 2003 S M T W T F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	1103			
Nu	mber and street Place label here	Due of Thurs					
Cit	y, state, ZIP code		this date.				
No to	Check the box to the right and enter your gross sales and service You must file by the due date even if no tax is due. There is a \$5 0			structions.			
Has	your address or business information changed? If so, check the box to the rig	ht and enter new mailing address on	preprinted label above. See 2 in i	instructions.			
Со	mplete Step 1 or Step 2, but not both. See 3 in instruction	ns.					
Ste	ep 1 of 3 Long method of calculating tax due						
1	Enter total gross sales and services (to nearest dollar; see 4 in instru	uctions)	1 2	.00			
2	Enter total taxable sales and services (to nearest dollar; see 5 in inst	ructions)	3	.00			
	Enter total purchases subject to tax (to nearest dollar; see 6 in instru			.00			
	Sales and use tax (see 7 in instructions)						
	Credit for prepaid sales tax (see 8 in instructions)		<u> </u>				
1	Net tax due (subtract box 5 amount from box 4 amount)		6				
7	Credits not identified (attachments required, see 9 in instructions)	7					
	Advance payments (see 10 in instructions)						
	Add box 7 amount to box 8 amount						
	Sales and use tax due (subtract box 9 amount from box 6 amount)						
11	Interest and penalty (see 11 in instructions)						
12	Amount due (add box 10 amount to box 11 amount; see 12 in instruc	tions) Pay this am	nount				
Step 2 of 3 Short method of calculating tax due							
1	Comparable quarter of previous year (see ${\bf 13}$ in instructions)*	1					
2	Tax due (one-third of box 1 amount)						
3	Credit for prepaid sales tax (see 14 in instructions)	3					
4	Net tax due (subtract box 3 amount from box 2 amount)		4				
	Credits (attachments required, see 15 in instructions)						
6	Advance payments (see 16 in instructions)	6					
	Add box 5 amount to box 6 amount						
	Sales and use tax due (subtract box 7 amount from box 4 amount)						
9	Interest and penalty (see 17 in instructions)						
10	Amount due (add box 8 amount to box 9 amount; see 18 in instruction	ns) Pay this am	nount				
*In	iclude short method adjustment in box 1 (see Short method adjustment	t on page 3 of instructions.)	For office use	only			
	<u>Locality</u> <u>Adjustment</u> \$						
	·						

Must be postmarked by Thursday, February 20, 2003, to be considered Step 3 of 3 Sign and mail this return filed on time. See below for complete mailing information. Please be sure to keep a completed copy for your records. _____ Title _____ Printed name of taxpayer _ _____ Date ______ Daytime telephone ____(_____) Signature of taxpayer ___ Printed name of preparer, if other than taxpayer _____ Preparer's address ___ Daytime telephone (Signature of preparer, if other than taxpayer _____ ✓ Make check payable to New York State Sales Tax. Do you participate in the New Jersey/New York or the David Sample 100 Elm Street Where to mail DATE February 10, 2003 Connecticut/New York Reciprocal Tax Agreement? Albany, NY 12203 your return and attachments PAY TO THE ORDER OF New York State Sales Tax \$1000 No Yes If using a private delivery One Thousand and 00/100 service rather than the Ú.S. Address envelope to: Address envelope to: First State Bank Postal Service, see 19 in instructions for NYS SALES TAX PROCESSING NYS SALES TAX PROCESSING 00-0000000 ST-809 1/31/03 the correct address. JAF BUILDING RECIPROCAL TAX AGREEMENT

JAF BUILDING

PO BOX 1209

NEW YORK NY 10116-1209

Need help?



Telephone assistance is available from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday.

PO BOX 1208

NEW YORK NY 10116-1208

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:

Don't forget to write your sales tax ID#,

ST-809, and 1/31/03

Don't forget to

sign your check

1 800 634-2110 from 8 a.m. to 5:55 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