

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

| March | April      | May |  |  |  |  |  |  |
|-------|------------|-----|--|--|--|--|--|--|
|       | Tax period |     |  |  |  |  |  |  |
|       | 2003 – May |     |  |  |  |  |  |  |

ST-810

| Sales tax i            | identification number   |                  | ı         | ı          | ı        |          |           | 1       | 1                             | 1         | ,        |          | S N      |        | W T<br>4 5                       | F S 6 7               |                                   |                       | -   |
|------------------------|---|------------------|-----------|------------|----------|----------|-----------|---------|-------------------------------|-----------|----------|----------|----------|--------|----------------------------------|-----------------------|-----------------------------------|-----------------------|-----|
| Legal name             | (if no label, print legal name as it  | appears on       | the Certi | ificate of | Authorit | ty)      |           |         |                               |           |          |          | 8 9      | 9 10   | 11 12<br>18 19 <b> </b><br>25 26 | 13 14<br><b>20</b> 21 |                                   | 03                    | 04  |
| dba (doing l           | business as) name   |                  |           |            |          |          |           |         |                               |           |          |          | 29 30    | )      |                                  |                       |                                   |                       |     |
| Number and             | d street  |                  |           |            |          |          |           |         |                               |           |          |          |          |        | 20                               | ) F                   | ue date<br>riday,<br>une 20,      |                       |     |
| City, state, 2         | ZIP code  |                  |           |            |          |          |           |         |                               |           |          |          |          |        | pena<br>retui                    | will be<br>alty and   | respons<br>d interest<br>t postma | ible for<br>t if your |     |
| No tax due?            | Check the box to the rig<br>You <b>must</b> file by the due   |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   | ons                   |     |
| Multiple<br>locations? | If you are reporting sale<br>the right and attach a lis   |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  | neck th               | e box to                          | 0                     |     |
| Final return?          | Check the box to the rig<br>your <i>Certificate of Autho</i>  |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| Has your add           | ress or business informa  | tion cha         | nged?     | lf so, ch  | neck the | box to t |           |         |                               |           |          |          | label    | above. | See 3                            | in inst               | ructions.                         |                       |     |
| Step 1 of              | 9 Gross sales and s   | services         | \$        |            |          |          | 1         | _       | oss sal                       |           |          |          | <b>→</b> | 1      |                                  |                       |                                   |                       | .00 |
| Do not inc             | lude sales tax in the g   | gross sa         | les a     | nd se      | rvice    | s amo    |           | _       |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| Step 2 of              | 9 Identify required   | schedu           | les       |            |          |          |           |         | (es) on t<br>p 3. <b>Ne</b> e |           |          |          |          |        |                                  |                       |                                   |                       |     |
| Quarterly schedule     | Description   |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  | ,                     | Check the<br>schedule yo          |                       |     |
| SCHEDULE               | Use Form ST-810.2, of food and drink (restau County, as well as ac  | ırant mea        | als, tak  | eout,      | etc.) a  | and fro  | m hotel/i | motel r | oom oc                        | cupano    |          |          |          |        |                                  | s of                  |                                   |                       |     |
| SCHEDULE:              |   |                  |           |            |          |          |           |         | tion                          |           |          |          |          |        |                                  |                       |                                   |                       |     |
| SCHEDULE<br>FR         |   |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| SCHEDULE               | Use Form ST-810.7, <i>Quarterly Schedule H for Part-Quarterly Filers</i> , to report <b>sales of clothing and footwear eligible for exemption</b> from New York State and some local sales and use tax. |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| SCHEDULE               | E CAPUICAE IN NAM YORK LITH RAMINGAY LICA FORM S L-XIII 6-/XII LILIARTAYIN SCHAQUIA IXI-XII LICA PART-LILIARTAYIN   |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| SCHEDULE               | Use Form ST-810.6, <i>Quarterly Schedule P for Part-Quarterly Filers</i> , only if you are a vendor registered to make PrompTax payments of sales and use tax.  |                  |           |            |          |          |           |         |                               |           |          |          |          |        |                                  |                       |                                   |                       |     |
| SCHEDULE               | Use Form ST-810.9, 0 or services to Qualif some local sales and   | ied Emp          |           |            |          |          |           |         |                               |           |          |          |          |        |                                  | erty                  |                                   |                       |     |
| SCHEDULE               | Use Form ST-810.8, <i>Quanswering services, a</i> Form ST-810.8-ATT, <i>Qu</i>  | and teleg        | raph s    | ervice     | es imp   | osed b   | y certain | counti  | es, scho                      | ol distri | cts, and | dicities | s. Re    | minde  | er: Use                          |                       |                                   |                       |     |
|                        | Schedules CT and N  | <b>J:</b> For re | ecipro    | cal ta     | ax agr   | eeme     | nt filing | regui   | remen                         | ts, see   | in i     | instr    | uctio    | ons.   |                                  |                       |                                   |                       |     |

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.

For office use only

| Column A  | Column B          | _ Column C                    | Column D                 | . 1              | Column E   | Column F                  |
|---|-------------------|-------------------------------|--------------------------|------------------|------------|---------------------------|
| Taxing jurisdiction   | Jurisdiction code | Taxable sales<br>and services | Purchases subject to tax | t ×              | Tax rate   |                           |
| Otsego County   | OT 3603           | .00                           |                          | .00              | 7%         | (C + D) x E               |
| Putnam County   | PU 3714           | .00                           |                          | .00              | 71/4%      |                           |
| Rensselaer County   | RE 3875           | .00                           |                          | .00              | 8%         |                           |
| Rockland County   | RO 3915           | .00                           |                          | .00              | 7%%        |                           |
| St. Lawrence County   | ST 4087           | .00                           |                          | .00              | 7%         |                           |
| Saratoga County (outside the following)                                 | SA 4133           | .00                           |                          | .00              | 7%         |                           |
| Saratoga Springs (city)   | SA 4133           | .00                           |                          | .00              | 7%         |                           |
| Schenectady County  | SC 4233           | .00                           |                          | .00              | 71/2%      |                           |
| Schoharie County  | SC 4233           | .00                           |                          | .00              | 7%         |                           |
| Schuyler County   | SC 4303           | .00                           |                          | .00              | 8%         |                           |
| · · · · · · · · · · · · · · · · · · ·                                   | SE 4518           |                               |                          | _                |            |                           |
| Seneca County   |                   | .00.                          |                          | .00              | 8%         |                           |
| Steuben County (outside the following)                                  | ST 4688           | .00.                          |                          | .00              | 8%         |                           |
| Corning (city)  | CO 4616           | .00                           |                          | .00              | 8%         |                           |
| Hornell (city)  | HO 4630           | .00                           |                          | .00              | 8%         |                           |
| Suffolk County  | SU 4766           | .00                           |                          | .00              | 8½%        |                           |
| Sullivan County   | SU 4812           | .00                           |                          | .00              | 7%         |                           |
| Tioga County  | TI 4903           | .00                           |                          | .00              | 7½%        |                           |
| Tompkins County (outside the following)                                 | TO 5096           | .00.                          |                          | .00              | 8%         |                           |
| Ithaca (city)   | IT 5013           | .00                           |                          | .00              | 8%         |                           |
| Ulster County   | UL 5130           | .00                           |                          | .00              | 8%         |                           |
| Warren County (outside the following)                                   | WA 5292           | .00                           |                          | .00              | 7%         |                           |
| Glens Falls (city)  | GL 5212           | .00                           |                          | .00              | 7%         |                           |
| Washington County   | WA 5302           | .00                           |                          | .00              | 7%         |                           |
| Wayne County  | WA 5402           | .00                           |                          | .00              | 7%         |                           |
| Westchester County (outside the following)                              | WE 5503           | .00                           |                          | .00              | 63/4%      |                           |
| Mount Vernon (city)   | MO 5513           | .00                           |                          | .00              | 81/4%      |                           |
| New Rochelle (city)   | NE 6855           | .00                           |                          | .00              | 81/4%      |                           |
| White Plains (city)   | WH 5555           | .00                           |                          | .00              | 73/4%      |                           |
| Yonkers (city)  | YO 6578           | .00                           |                          | .00              | 81/4%      |                           |
| Wyoming County  | WY 5605           | .00                           |                          | .00              | 8%         |                           |
| 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              | 81/4%      |                           |
| New York State/MCTD (fuel and utilities)                                | NE 8040           | .00                           |                          | .00              | 41/4%      |                           |
|   |                   | 9                             |                          |                  |            |                           |
| 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             |                   | 9a                            |                          |                  |            |                           |
| of gas and electricity) (enter box 9a amount in Step 7B)                | NE 8016           | .00                           |                          | .00              | 1%         |                           |
|   |                   |                               |                          |                  |            |                           |
|   |                   | 10                            | 11                       |                  |            | 12                        |
| Column subtotals from page 2, boxes 6                                   | , 7, and 8:       | .00                           |                          | .00              |            |                           |
|   |                   | 13                            | 14                       |                  |            | 15                        |
| Colu  | mn totals:        | .00                           |                          | .00              |            |                           |
| Credit summary — Enter the total amount of credits clain                | ned in Step       | 3 above, and on any attac     | ched schedules (s        | see 1            | 2 c).      |                           |
|   |                   | Internal code                 | Column G                 |                  | Column H   | Column J                  |
| Step 4 of 9 Calculate special taxes                                     |                   |                               | Taxable receipts         |                  | Tax rate : | Special taxes due         |
| Passenger car rentals   |                   | PA 0003                       |                          | .00              | 5%         |                           |
| information & entertainment services furnished via telephony and        | d telegraphy      | IN 7009                       |                          | .00              | 5%         |                           |
|   |                   |                               | Total spe                | cial             | taxes:     | 16                        |
| Step 5 of 9 Calculate tax credits and advance pa                        | yments            |                               |                          | Intern           | nal code   | Column K<br>Credit amount |
| Credit for prepaid sales tax on cigarettes                              |                   |                               | C8888                    | - J. Carr amount |            |                           |
| Credits against sales or use tax (see thin instructions)                |                   |                               |                          |                  | С          |                           |
| Advance payments (including ST-809 and PrompTax pa                      |                   |                               | A                        |                  |            |                           |
| Unclaimed vendor collection credit (attach Form TR-912;                 |                   | HI                            | 7802                     |                  |            |                           |
|   |                   | ,                             |                          |                  |            | 17                        |
|   |                   | Total tax credits a           | nd advance na            | wm               | ents:      |                           |

| Page 4 of 4 ST-810 (5/03)   |  |  |   | 0304 Quarterl   |  |  |
|---|--|--|---|---|--|--|
| Step 6 of 9 Calculate t   | axes due   | Add Sales and use tax colutaxes (box 16) and subtract payments (box 17).   | Taxes due   |   |  |  |
| Box 15 amount \$  | Box 16<br>   |  | ox 17 mount \$  | = 18  |  |  |
| Step 7 of 9 Calculate v   | rendor collection cred   | June 20, 2003, <b>and</b> you pay  | collection credit ONLY if you file by the full amount due with the return.  r "0" in box 19 and go to 7D. |   |  |  |
| Schedule B-ATT Schedule H Schedule N Schedule Q Schedule T-ATT Total adjustment             | ## Above State tax rate    X 1% = (subtotal b)   (add subtotal b)                              | * Form ST-810, page 3, box  Total adjustment from 7A  Form ST-810, page 3, box  Form ST-810, page 3, box  Eligible sales amount (m | Ox 13 +   | -   |  |  |
| OR Pay penalty and ir   | **In box 19, enter the a   |  | than \$150  | Penalty and interest                                  |  |  |
| 7D Penalty and interest are   | 20   |  |   |   |  |  |
| Step 8 of 9 Calculate   | Taking vendor colle  | -  |   | Total amount due                                      |  |  |
| Step 9 of 9 Sign and ma   | ail this return  | Must be postmarked by Frid   | ay, June 20, 2003, to be considered file  | New: Please enter code below (see instructions).      |  |  |
| Printed name of taxpayer  |  | Title  | Dautima   | _   |  |  |
| Signature of taxpayer Printed name of preparer, if other                                    | than taxpayer  |  | Daytime telephone ()  | North American Industry Classification System (NAICS) |  |  |
| Preparer's address Signature of preparer, if other than                                     | ı taxpayer   |  | Daytime telephone ()  | - <u>                                    </u>         |  |  |
|   | Do you participate in the New  |  | Make check payable to New   | York State Sales Tax.                                 |  |  |
| Where to mail your return and   | Connecticut/New York Recipro   |  | David Sample<br>100 Elm Street<br>Alberry, NY 12203   | DATE June 10, 2003                                    |  |  |
| attachments If using a private delivery   | No   | Yes  | One Thousand fifty and 32/100   |   |  |  |
| service rather than the U.S. Postal Service, see 4 in instructions for the correct address. | Address envelope to:  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  00-0000000  | sign your check                                       |  |  |
|   | ed in the PrompTax p   |  | e preaddressed envelope   | -   |  |  |
| Need help?  Telephone assistance is (eastern time). Monday the                              | s available from 8 a.m. to 5:55  | . =  | ersons with disabilities: In complia  | nce with the Americans with                           |  |  |

(eastern time), Monday through Friday.
Business tax information: 1 800 972-1233
Forms and publications: 1 800 462-8100
From areas 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 a.m. to 5:55 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 Contact Center, W A Harriman Campus, Albany NY 12227.