

## New York State and Local Quarterly Sales and Use Tax Return

| Quarterly                    |               |                  |                  |           |                      |  |  |  |
|------------------------------|---------------|------------------|------------------|-----------|----------------------|--|--|--|
| Apr                          | il            | May              |                  |           |                      |  |  |  |
| $\Pi\Pi$                     | ++            | Ŧ                | +                | $\exists$ | +                    |  |  |  |
| Tax pe                       | riod          | $\top$           | $\pm \pm$        |           | 土                    |  |  |  |
| March 1, 2004 – May 31, 2004 |               |                  |                  |           |                      |  |  |  |
| ֡                            | Apr<br>Hax pe | April Tax period | April Tax period | April Ma  | April May Tax period |  |  |  |

| Sales tax id   | dentification number  | 1 1 1   |   | 1 1                               | S M T W T F  | = s   |  |  |
|--|---|---|---|-----------------------------------|--|---|--|--|
| Legal name (if no label, print legal name as it appears on the Certificate of Authority)  Legal name (if no label, print legal name as it appears on the Certificate of Authority)  105  105  107  108  108  108  108  108  108  108 |   |   |   |                                   |  |   |  |  |
| dba (doing b   | usiness as) name  |   |   |                                   | 27 28 29 30  |   |  |  |
| Number and   | street  |   |   |                                   | 21   | Due date:<br>Monday,                              |  |  |
| City, state, Z   |   |   |   |                                   | You w<br>penal<br>return<br>this d                   |   |  |  |
| lo tax due?  | Check the box to the right and comp<br>You <b>must</b> file by the due date even if   | no tax is due. <b>There is</b>                | a \$50 penalty for late                               | e filing of a no-tax              | -due return. See 1 in                                | instructions                                      |  |  |
| Aultiple<br>ocations?  | If you are reporting sales tax for mo<br>the right and attach a list of your loo  |   |   |                                   |  | ck the box to                                     |  |  |
| inal return?   | Check the box to the right if you are your <i>Certificate of Authority</i> . Attach   |   |   |                                   |  |   |  |  |
| las your addr  | ress or business information change   | ed? If so, check the box to                   | the right and enter new I                             | mailing address on pre            | printed label above. See <b>3</b>                    | in instructions.                                  |  |  |
| Step 1 of  | 9 Gross sales and service   | es  | Enter total <b>gross</b> in box 1                     |                                   | vices 1  | .00   |  |  |
| Do not include sales tax in the gross sales and services amount. See 4 in instructions.  |   |   |   |                                   |  |   |  |  |
| Step 2 of  | f 9 Identify required schedule  | es Check the box(e<br>proceed to Step         | es) on the right bel<br>3. <b>Need to obtair</b>      | ow, then comple<br>n schedules? S | ete the schedule(s) if<br>ee <i>Need help?</i> on pa | necessary and age 4 of this form.                 |  |  |
| Quarterly schedule   |   | Descr   | iption  |                                   |  | Check the box for each schedule you are attaching |  |  |
| SCHEDULE   | Use Form ST-100.2, <i>Quarterly</i> (restaurant meals, takeout, etc.) well as admissions, club dues, a  | ) and from hotel/mote                         | el room occupancy                                     | in Nassau or N                    |  |   |  |  |
| SCHEDULE   | Use Form ST-100.3, Quarterly scounties where school districts subject to local taxes. Reminder these nonresidential utility servi   | or cities impose tax,<br>r: Use Form ST-100.3 | and on <b>residentia</b><br>3-ATT, <i>Quarterly S</i> | I energy source                   | es and services                                      |   |  |  |
| SCHEDULE FR  | Use Form ST-100.10, <i>Quarterly Schedule FR</i> , to report <b>retail sales of motor fuel or diesel motor fuel</b> , and fuel taken from inventory, as explained in the schedule's instructions.   |   |   |                                   |  |   |  |  |
| SCHEDULE   | Form ST-100.7, Quarterly Schedule H, (used to report sales of clothing and footwear eligible for exemption) is <b>not applicable for the quarterly period March 1, 2004, through May 31, 2004.</b> For this period, vendors must collect and remit the total New York State and local sales and use taxes on sales of clothing, footwear, and items used to make or repair such clothing, regardless of the price, and must report these sales on the appropriate jurisdiction line on Form ST-100. |   |   |                                   |  |   |  |  |
| SCHEDULE   | Use Form ST-100.5, <i>Quarterly Schedule N</i> , to report taxes due and sales of certain <b>services in</b> New York City. Reminder: Use Form ST-100.5-ATT, <i>Quarterly Schedule N-ATT</i> , if you are a provider of parking services in New York City.  |   |   |                                   |  |   |  |  |
| SCHEDULE   | Use Form ST-100.9, <i>Quarterly Schedule Q</i> , to report sales of tangible personal property or services to Qualified Empire Zone Enterprises (QEZEs) eligible for exemption from New York State and some local sales and use tax.  |   |   |                                   |  |   |  |  |
| SCHEDULE   | Use Form ST-100.8, Quarterly sanswering services, and telegrammer: Use Form ST-100.8-QEZEs.   | graph services impo                           | sed by certain cou                                    | inties, school dis                | stricts, and cities.                                 |   |  |  |
|  | Schedules CT and NJ: For red  | ciprocal tax agreem                           | ent filing requiren                                   | nents, see <b>5</b> in            | instructions.  |   |  |  |
|  | Refer to instructions (Form S<br>Please be sure to keep a co  |   |   |                                   | For office   | e use only  |  |  |

Proceed to Step 3, page 2

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| Quarterly 105   | Caluman D                  | Column C                            | Caluman D                         |        |  | (3/04) Page 3             | 01       |
|---|----------------------------|-------------------------------------|-----------------------------------|--------|--|---------------------------|----------|
| Column A<br><b>Taxing jurisdiction</b>                                  | Column B Jurisdiction code | Column C Taxable sales and services | Column D Purchases subject to tax | t ;    | │ Column E<br><mark>★ Tax rate :</mark><br>│ |                           |          |
| Otsego County   | OT 3611                    | .00                                 |                                   | .00    | 81/4%  | ,                         | Г        |
| Putnam County   | PU 3701                    | .00                                 |                                   | .00    |  |                           | T        |
| Rensselaer County   | RE 3871                    | .00                                 |                                   | .00    | 81/4%  |                           |          |
| Rockland County   | RO 3901                    | .00                                 |                                   | .00    | 81/8%*                                       |                           | Г        |
| St. Lawrence County   | ST 4081                    | .00                                 |                                   | .00    | 71/4%  |                           |          |
| Saratoga County (outside the following)                                 | SA 4101                    | .00                                 |                                   | .00    | 71/4%  |                           |          |
| Saratoga Springs (city)   | SA 4121                    | .00                                 |                                   | .00    | 71/4%  |                           |          |
| Schenectady County  | SC 4231                    | .00                                 |                                   | .00    | 81/4%  |                           |          |
| Schoharie County  | SC 4301                    | .00                                 |                                   | .00    | 71/4%  |                           |          |
| Schuyler County   | SC 4401                    | .00                                 |                                   | .00    | 81/4%  |                           |          |
| Seneca County   | SE 4501                    | .00                                 |                                   | .00    |  |                           |          |
| Steuben County (outside the following)                                  | ST 4681                    | .00                                 |                                   | .00    | 81/4%  |                           |          |
| Corning (city)  | CO 4601                    | .00                                 |                                   | .00    | 81/4%  |                           |          |
| Hornell (city)  | HO 4631                    | .00                                 |                                   | .00    | 81/4%  |                           | L        |
| Suffolk County  | SU 4701                    | .00                                 |                                   | .00    |  |                           | L        |
| Sullivan County   | SU 4801                    | .00                                 |                                   | .00    |  |                           | L        |
| Tioga County  | TI 4911                    | .00                                 |                                   | .00    |  |                           | L        |
| Tompkins County (outside the following)                                 | TO 5091                    | .00                                 |                                   | .00    |  |                           | L        |
| Ithaca (city)   | IT 5011                    | .00                                 |                                   | .00    |  |                           | L        |
| Ulster County   | UL 5101                    | .00                                 |                                   | .00    |  |                           | L        |
| Warren County (outside the following)                                   | WA 5291                    | .00                                 |                                   | .00    |  |                           | L        |
| Glens Falls (city)  | GL 5201                    | .00                                 |                                   | .00    |  |                           | L        |
| Washington County   | WA 5301                    | .00                                 |                                   | .00    |  |                           | ┡        |
| Wayne County  | WA 5411                    | .00                                 |                                   | .00    |  |                           | ┝        |
| Westchester County (outside the following)                              | WE 5591                    | .00                                 |                                   | .00    |  |                           | ┝        |
| Mount Vernon (city)   | MO 5511                    | .00                                 |                                   | .00    |  |                           | ┝        |
| New Rochelle (city)   | NE 6851                    | .00                                 |                                   | .00    |  |                           | ⊢        |
| White Plains (city)   | WH 5551                    | .00                                 |                                   | .00    |  |                           | ⊢        |
| Yonkers (city)  | YO 6501                    | .00                                 |                                   | .00    |  |                           | ⊢        |
| Wyoming County  | WY 5601                    | .00                                 |                                   | .00    |  |                           | ⊢        |
| Yates County Taxes in New York City [includes counties of Bronx, Kings  | YA 5711                    | .00                                 |                                   | .00    | 81/4%  |                           | ⊢        |
| (Brooklyn), New York (Manhattan), Queens, and Richmond (Staten Island)] |                            |                                     |                                   |        |  |                           |          |
| New York City/State combined tax  | NE 8011                    | .00                                 |                                   | .00    | 85/8%*                                       |                           |          |
| New York State/MCTD (fuel and utilities)                                | NE 8041                    | .00                                 | +                                 | .00    | 1  |                           | H        |
| New York City - local tax only (enter box 9 amount in Step 7B)          | NE 8021                    |                                     | +                                 | .00    |  |                           | H        |
| 14CW 10TK Oily Total tax only letter box 3 amount in olep 15)           | 110 0021                   | .00                                 | +                                 | .00    | 7/0/0  |                           | H        |
|   |                            | 10                                  | 11                                | .00    |  | 12                        | H        |
| Column subtotals from page 2, boxes 6                                   | 6, 7, and 8:               | .00                                 |                                   | .00    |  |                           |          |
| If the total of box 13 + box 14 = \$300,000 or m                        |                            | 13                                  | 14                                |        |  | 15                        | Т        |
| ISHIPI  | mn totals:                 |                                     |                                   | .00    |  | _                         |          |
| Credit summary — Enter the total amount of credits                      |                            |                                     | y attached schedule               | es (se | e <b>12</b> c).                              |                           | _        |
| Step 4 of 9 Calculate special taxes                                     |                            | Internal code                       | Column G<br>Taxable receipts      |        | Column H<br>X Tax rate                       |                           | е        |
| Passenger car rentals   |                            | PA 0003                             |                                   | .00    | 5%   | (3)                       | Г        |
| Information & entertainment services furnished via telephony an         | nd telegraphy              | IN 7009                             |                                   | .00    | 5%   |                           | $\vdash$ |
| 7.  | 3 47 7                     |                                     | Total sp                          | acia   | l tayes:                                     | 16                        | Т        |
| Step 5 of 9 Calculate tax credits and advance                           | oo novee                   | nte                                 | 10181 5                           |        | rnal code                                    | Column K<br>Credit amount | _        |
| <u> </u>  | ce paymer                  | າເວ                                 |                                   |        |  | oreun amount              | _        |
| Credit for prepaid sales tax on cigarettes                              |                            |                                     |                                   | CR     | C8888  |                           | $\perp$  |
| Credits against sales or use tax (see 16 in instruction                 | ns)                        |                                     |                                   |        | C  |                           | $\perp$  |
| Advance payments (made with Form ST-330)                                |                            |                                     |                                   |        | Α  |                           | $\perp$  |
| Unclaimed vendor collection credit (attach Form TR-912)                 |                            |                                     |                                   | UN     | l 7804                                       | 4-                        | L        |
|   |                            | Total tay are                       | dits and advance                  | o nov  | monte:                                       | 17                        |          |
|   |                            | iolai lax cre                       | uits and advance                  | e pay  | mems.  |                           |          |

| Page 4 of 4 ST-100 (3/04)  | Sales tax identificati   | on number   |   | 105 Quarterly   |
|--|--|---|---|---|
| Step 6 of 9 Calculate  | taxes due  | Add Sales and use tax co taxes (box 16) and subtrapayments (box 17).  | lumn total (box 15) to <i>Total special</i><br>act <i>Total tax credits and advance</i>   | Taxes due   |
| Box 15 amount \$   | <b>+</b> Box 16 amount \$  | _   | 3ox 17<br>amount \$=  | 18  |
| Step 7 of 9 Calculate or pay pe  | vendor collection credinalty and interest  | June 21, 2004, and you p  | or collection credit ONLY if you file by pay the full amount due with the return. er "0" in box 19 and go to 7D.                      |   |
| 7A If you are not required start at the asterisk (** Schedule B, Part 4, box Schedule B-ATT Schedule N Schedule Q Schedule T-ATT  Total adjustment |  | Schedule FR, Step 3, box *Form ST-100, page 3, b  Total adjustment from 7, Form ST-100, page 3, box  Eligible sales amount (r | ox 13 +<br>A  |   |
| Fligible sales amount from 7B above  | State tax rate  * 41/4% = \$   |   | dit rate  **  | Vendor collection credit<br>VE 7704                         |
|  |  | amount calculated, but not mor  |   | 19  |
| OR Pay penalty and   | Penalty and interest   |   |   |   |
| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  | •  |   | ue. See 🥝 on page 3 in the  | 20  |
| Step 8 of 9 Calculate  | Total amount due   |   |   |   |
| Final calculation:   | ~  | ction credit? Subtract bo   |   |   |
| Step 9 of 9 Sign and Please be sure to keep a com  | mail this return   | Must be postmarked by <b>Mo</b>   | nday, June 21, 2004, to be considered complete mailing information.   | Please enter NAICS code below (see instructions).           |
| Printed name of taxpayer Signature of taxpayer Printed name of preparer, if other  |  | Date  | Daytime<br>telephone ()   | North American Industry<br>Classification System<br>(NAICS) |
|  |  |   |   |   |
| Signature of preparer, if other than   | n taxpayer   |   | Daytime<br>telephone ()   |   |
| Where to mail  | Do you participate in the New<br>Connecticut/New York Recipro                                  |   | Make check payable to New Young David Sample 100 Elm Street Albany, NY 12203  | OATE June 10, 2004  |
| your return and  | No   | Yes   | PAY TO THE ORDER OF New York State Sales Tax  | \$ 1,050.32   |
| attachments If using a private delivery service rather than the U.S. Postal Service, see 24 in instructions for the correct address.               | Address envelope to:  NYS SALES TAX PROCESSING JAF BUILDING PO BOX 1205 NEW YORK NY 10116-1205 | Address envelope to:  NYS SALES TAX PROCESSING RECIPROCAL TAX AGREEMENT JAF BUILDING PO BOX 1209 NEW YORK NY 10116-1209       | One thousand fifty and 32/100  First State Bank  00-0000000 ST-100 5/31/04  Don't forget to write your sales tax  ST-100, and 5/31/04 | ID#, Don't forget to sign your check                        |
| Need help? Internet access: www.nys (for information, forms,   |  | callers   | g and speech impaired (telecommunicat<br>only): 1 800 634-2110 (8:00 A.M. to 5:00<br>Persons with disabilities: In compliance v       | ions device for the deaf (TDD)<br>P.M. eastern time).       |

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

Telephone assistance is available from 8:00 A.M. to 5:00 P.M. (eastern time), Monday through Friday. To order forms and publications: 1 800 Business Tax Information Center: 1 800 From areas outside the U.S. and outside Canada: (518)

1 800 462-8100 1 800 972-1233 (518) 485-6800



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 1 800 972-1233.



If you need to write, address your letter to: NYS Tax Department, Business Tax Information Center, W A Harriman Campus, Albany NY 12227.