



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

	October 2007										
	Tax period										
October 1, 2007 – October 31, 2007											

				November 2007	
Sa	ales tax identification number	1 1 1	1 1	S M T W T F S 1 2 3	0000
Leg	al name (if no label, print legal name as it appears on the Certificate of Authority)			4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	8080
DB	A (doing business as) name			25 26 27 28 29 30	
				- Duo data	
Nur	mber and street			Due date: Tuesday, November 20,	2007
				You will be responsible for penalty a	
City	y, state, ZIP code			if your return is not postmarked by t	his date.
No	tax due? If so, mark an X in the box to the right and enter your gross sal				
	You must file by the due date even if no tax is due. There is a \$	\$50 penalty for	late filing of	a no-tax-due return. See 1 in instruction	ns.
	s your address or If so, call the Sales Tax Information Center to new mailing address on preprinted label a				er 🗌
Со	mplete Step 1 or Step 2, but not both. See 3 in instructi	ions.			
Sto	ep 1 of 3 Long method of calculating tax due				
	<u> </u>			1	
1	Enter total gross sales and services (to nearest dollar; see 4 in ins	structions)			.00
				2	
2	Enter total taxable sales and services (to nearest dollar; see 5 in ir	nstructions)			.00
				3	
	Enter total purchases subject to tax (to nearest dollar; see 6 in ins				.00
4	Sales and use tax (see 7 in instructions)	4			
	Credit for prepaid sales tax (see 8 in instructions)			_	
	Net tax due (subtract box 5 amount from box 4 amount)			6	
	Credits not identified (attachments required, see in instructions)	7			
8	Advance payments (see 10 in instructions)	8			
	Add box 7 amount to box 8 amount				
10	Sales and use tax due (subtract box 9 amount from box 6 amount)				
11	Penalty and interest (see 11 in instructions)			11	
	_			12	
12	Amount due (add box 10 amount to box 11 amount; see 12 in instruct	tions)	Pay this	s amount	
St	ep 2 of 3 Short method of calculating tax due				
1	Comparable quarter of previous year (see 13 in instructions)*	1			
l .	Tax due (one-third of box 1 amount)	1 - 1			
	Credit for prepaid sales tax (see 14 in instructions)				
l .	Net tax due (subtract box 3 amount from box 2 amount)			4	
l .	Credits not identified (attachments required, see 15 in instructions)	5			,
	Advance payments (see 16 in instructions)	6			
	Add box 5 amount to box 6 amount			7	
	Sales and use tax due (subtract box 7 amount from box 4 amount)				
	Penalty and interest (see 17 in instructions)				
				10	\neg
10	Amount due (add box 8 amount to box 9 amount; see 18 in instruction	ons)	Pay thi	s amount	
*In	clude short method adjustment in box 1 (see Short method adjustment	ent on page 3	of instruction	ns.) For office use only	

Locality Adjustment

Page 2 of 2	ST-809 (10/07)	8	sales tax identifi	cation ni	umber									080	8	Part-	Qu	arterly
Step 3 of Please be st	f 3 Sign and ma	ail this return leted copy for ye	our records			ostmarked for comp					20, 20	007 , t	to be co	nsidere	ed file	d on tir	ne.	
Do you want to allow another person to discuss this return with the Tax Dept? (see										uctions)	Y	'es	(com	plete th	e follo	wing) N	lo l	\Box
Third party	Designee's nam		Designee's phone number ()						Personal identification number (PIN)									
design	Designee's e-ma	ail address																
Printed name	of taxpayer						Title	e										
Taxpayer's e-n	nail address																	
Signature of ta	axpayer					Date		/	/	Dayt _ telep	ime hone ()					
Signature of taxpayer Date/																		
Preparer's address																		
Preparer's e-m	nail address																	
Signature of p	reparer, if other than	taxpayer								Dayt _ telep	ime hone ()					
Do you participate in the New Jersey/New York or the																		
Connecticut/New York reciprocal					, I				David Sample 100 Elm Street Alhany NY 12203 DATE November 10, 2007									971
Where to		No)			Yes			Albany, NY				<u>D</u>	ATE NO	vembe	r 10, 2	007	
your retu		Address envelo		1	ress enve	lana (a)			PAY TO THE ORDER OF	New	York St	ate S	ales Tax			\$ X.	XXX.	XX
attachm	ents rivate delivery			Ш		•							nt amoun	t) /			DOL	
	ner than the U.S.	NYS SALES TAX F	PROCESSING			X PROCES TAX AGREE			First S	State	Bank			1/2	. /			7
	rice, see 20 in	PO BOX 1208		JAF	BUILDING									Ille	<i>S</i> (1)	2	M	2
instructions the correct		NEW YORK NY 10	116-1208		30X 1209 / YORK NY	′ 10116-120s	9		00-00000	00 S	-809 1	0/31/0	<u> </u>	<u> </u>	<u> </u>		<u>/</u>	
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									31-0	alic	10/31/	, o , .			SIY	ii youl C	i icci	

Need help?

See Form ST-809-I, Instructions for Form ST-809.