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## New York State and Local

## Part-Quarterly ST-809 December 2008

Sales and Use Tax I for Part-Quarterly F	December 1, 2008 – December 31, 200	
Sales tax identification number		January 2009 S M T W T F S 1 2 3 4 5 6 7 8 9 10 1 4 5 45 45 45 10 100
Legal name (print ID number and legal name as it appears on the Certific	cate of Authority)	11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31
DBA (doing business as) name		20 Due date: Tuesday January 20, 2009
Number and street		You will be responsible for penalty and intere
City, state, ZIP code		if your return is not postmarked by this date.
	<b>\$50 penalty for late filing</b> Visit our Web site at <i>www.nys</i>	of a no-tax-due return. See ① in instructions.
• · · · · · · · · · · · · · · · · · · ·	-	ailing address above. See 2 in instructions.
Complete Step 1 or Step 2, but not both. See 3 in instruc		
Step 1 of 3 Long method of calculating tax due	9	1
1 Enter total gross sales and services (to nearest dollar; see 4 in ir	nstructions)	
2 Enter total taxable sales and services (to nearest dollar; see 5 in	instructions)	
3 Enter total purchases subject to tax (to nearest dollar; see 6 in ir		
<ul> <li>4 Sales and use tax (see 7 in instructions)</li> <li>5 Credit for prepaid sales tax (see 8 in instructions)</li> </ul>	4	
6 Net tax due (subtract box 5 amount from box 4 amount)		
7 Credits not identified (attachments required, see 9 in instructions)	7	
8 Advance payments (see 10 in instructions)	8	
9 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)		
12 Amount due (add hav 10 amount to hav 11 amount and () in instru	rationa) Day t	12
12 Amount due (add box 10 amount to box 11 amount; see 12 in instru Step 2 of 3 Short method of calculating tax due		
1 Comparable quarter of previous year (see 13 in instructions)*	····· —	
2 Tax due (one-third of box 1 amount)	·····	
3 Credit for prepaid sales tax (see 14 in instructions)		4
4 Net tax due (subtract box 3 amount from box 2 amount)		
<b>5</b> Credits not identified (attachments required, see <b>15</b> in instructions)		
6 Advance payments (see 16 in instructions)		7
<ul><li>7 Add box 5 amount to box 6 amount</li><li>8 Sales and use tax due (subtract box 7 amount from box 4 amount)</li></ul>		
<ul> <li>9 Penalty and interest (see 17 in instructions)</li></ul>		
		10
10 Amount due (add box 8 amount to box 9 amount; see 🔞 in instruct		
Include short method adjustment in box 1 (see Short method adjustm	nent on page 3 of instruction	ns.) For office use only
Locality Adjustment		

Page 2 of 2 ST-809 (7	2/08) Sales tax identifi	cation number		10	09 Part-Quarterly			
Step 3 of 3 Sign and mail this return Please be sure to keep a completed copy for your records.Must be postmarked by Tuesday, January 20, 2009, to be considered filed on time. See below for complete mailing information.								
	ant to allow another person to dis	cuss this return with the Tax De	pt? (see instructions,	) Yes (complete th	he following) No			
Third – Designee party		Designee's phone number (  )		Personal identification number (PIN)				
designee Designee	s e-mail address							
Printed name of taxpayer _		Title	9					
Taxpayer's e-mail address								
Signature of taxpayer		Date	/ / Dayt telep	ime hone ()				
Printed name of preparer, if other than taxpayer identification number								
Preparer's address								
Preparer's e-mail address _								
Signature of preparer, if othe	er than taxpayer		Dayl	ime hone ()				
	Do you participate in the New	w Jersey/New York or the	Make check	payable to New York St.	ate Sales Tax.			
		Do you participate in the New Jersey/New York or the Connecticut/New York reciprocal tax agreement?		David Sample 2971 100 Elm Street Lonuory 10, 2000				
Where to mail	No	Yes	Albany, NY 12203	DATE Ja	nuary 10, 2009			
your return and	Address envelope to:	Address envelope to:	PAY TO THE New	York State Sales Tax	\$ X.XXX.XX			
attachments If using a private deliver				(your payment amount) 💧	DOLLARS			
service rather than the		NYS SALES TAX PROCESSING RECIPROCAL TAX AGREEMENT	First State	Bank /				
Postal Service, see 20 il	n ALBANY NY 12212-5172	PO BOX 15173	00-0000000 S	k 1//	LO Dande			
instructions for the correct address.		ALBANY NY 12212-5173	00-000000 S		▲ /			
Don't forget to write your sales tax ID#, Don't forget to sign your check								

Need help? See Form ST-809-I, Instructions for Form ST-809.