

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

Part	-Quarterly	y ST-809							
	January 2009								
	Tax period	 							
January 1, 2009 – January 31, 2009									

	Sales tax identification number		February 2009 S M T W T F S
	Legal name (print ID number and legal name as it appears on the Certificate	e of Authority)	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
	DBA (doing business as) name	Due date:	
	Number and street	Friday, February 20, 2009 You will be responsible for penalty and interes	
	City, state, ZIP code	if your return is not postmarked by this date.	
	Only, State, 211 code		
No	tax due? If so, mark an X in the box to the right and enter your gross sale You must file by the due date even if no tax is due. There is a \$5		
	s your address or If so, you can update your address online. Vis siness information changed?		
Co	emplete Step 1 or Step 2, but not both. See 3 in instruction	ons.	
St	ep 1 of 3 Long method of calculating tax due		
			1
1	Enter total gross sales and services (to nearest dollar; see 4 in instr	ructions)	
_			2
2	Enter total taxable sales and services (to nearest dollar; see 5 in ins	structions)	
2	Enter total purchases subject to tay the provest dellar, and the instru	vuotiona)	
	Enter total purchases subject to tax (to nearest dollar; see 6 in instructions)		
5	Sales and use tax (see 7 in instructions)	5	
	Net tax due (subtract box 5 amount from box 4 amount)		6
	Credits not identified (attachments required, see 9 in instructions)		
Ω	Advance payments (see 10 in instructions)	8	
	Add box 7 amount to box 8 amount		9
	Sales and use tax due (subtract box 9 amount from box 6 amount)		
	Penalty and interest (see 11 in instructions)		
• •	Tenally and interest (see with instructions)		12
12	Amount due (add box 10 amount to box 11 amount; see 12 in instruction	ons) Pay this amo	
	ep 2 of 3 Short method of calculating tax due	•	
1	Comparable quarter of previous year (see 13 in instructions)*	. 1	
	Tax due (one-third of box 1 amount)	. 2	
3	Credit for prepaid sales tax (see 14 in instructions)	. 3	
4	Net tax due (subtract box 3 amount from box 2 amount)		4
5	Credits not identified (attachments required, see 15 in instructions)	5	
6	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
10	Amount due (add box 8 amount to box 9 amount; see 18 in instruction	ns) Pay this amo	ount

*Include short method adjustment in box 1 (see Short method adjustment on page 3 of instructions.) | For office use only Adjustment Locality

9000101090094

Page 2 of 2	ST-809 (1/09)	Sales tax id	entification number				1109	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 Friday, February 20, 2009, to be considered filed on time. See below for complete mailing information.										
	Do you want to	allow another person to	discuss this return with the	Tax Dept	? (see instruction	ons) Yes	(complete the t	iollowing) No 🔲		
Third – party	Designee's nam	е	Designee's phone nu	ımber		Personal in	dentification IN)			
designe	Designee's e-ma	ail address								
Printed name of taxpayer Title										
Taxpayer's e-m	ail address									
Signature of ta	xpaver		Dat	e /	/ [laytime elephone ()			
Signature of taxpayer Date/ Daytime telephone () Printed name of preparer, if other than taxpayer identification number										
Preparer's add	ress									
Preparer's e-m	ail address									
Preparer's e-mail address										
△ ↑		Do you participate in the	New Jersey/New York or the		✓ Make che	ck payable to	New York State	Sales Tax.		
Connecticut/New York reciprocal tax a			,		David Sample 100 Elm Street		- 1	2971		
Where to	mail	No	Yes		Albany, NY 122	03	DATE Febru	lary 10, 2009		
your retu			The second second		PAY TO THE NORDER OF	ew York State Sa	ıles Tax	\$ X,XXX.XX		
attachme	e nts ivate delivery	Address envelope to:	Address envelope to:		<u> </u>	(your paymer	it amount)	DOLLARS		
	er than the U.S.	NYS SALES TAX PROCESS PO BOX 15172	SING NYS SALES TAX PROCES RECIPROCAL TAX AGRE		First Sta	te Bank	1/0	1/1		
Postal Servi		ALBANY NY 12212-5172	PO BOX 15173 ALBANY NY 12212-5173			ST-809 1/31/0	h fles	Dangle		
instructions the correct a			ALBANY NY 12212-5173		00-000000	31-009 1/31/0	<u> </u>			
						rget to write you and 1/31/09.	r sales tax ID#,	Don't forget to sign your check		

Need help?

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