



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

January 2010 Tax period January 1, 2010 - January 31, 2010

February 2010 calendar grid showing date 22 highlighted

1110

Due date: Monday, February 22, 2010

You will be responsible for penalty and interest if your return is not postmarked by this date.

Form fields for Sales tax identification number, Legal name, DBA, Number and street, City, state, ZIP code

No tax due? Enter your gross sales and services in box 1 of Step 1 below; enter none in boxes 2 and 3. 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 instructions.

Has your address or business information changed? If so, visit our Web site at www.nystax.gov and see the change my address option for further instructions, or mark an X in the box to the right and enter new mailing address above. See 2 in instructions.

Complete Step 1 or Step 2, but not both. See 3 in instructions.

Step 1 of 3 Long method of calculating tax due

Table for Step 1: Long method of calculating tax due. Rows 1-12 for sales, taxable sales, purchases, taxes, net tax due, credits, advance payments, and amount due.

Step 2 of 3 Short method of calculating tax due

Table for Step 2: Short method of calculating tax due. Rows 1-10 for comparable quarter, tax due, prepaid sales tax, net tax due, credits, advance payments, and amount due.

*Include short method adjustment in box 1 (see Short method adjustment on page 3 of instructions.)

For office use only

Locality Adjustment \$

Sales tax identification number

1110

Step 3 of 3 Sign and mail this return

Please be sure to keep a completed copy for your records.

Must be postmarked by **Monday, February 22, 2010**, to be considered filed on time.

See below for complete mailing information.

| | | |
|-------------------------------|--|-----------------------------|
| Third – party designee | Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes <input type="checkbox"/> (complete the following) No <input type="checkbox"/> | |
| | Designee's name | Designee's phone number () |
| | Designee's e-mail address | |

Personal identification number (PIN)

Printed name of taxpayer _____ Title _____

Taxpayer's e-mail address _____

Signature of taxpayer _____ Date ____/____/____ Daytime telephone (____) _____

Printed name of preparer, if other than taxpayer _____ Preparer identification number

Preparer's address _____

Preparer's e-mail address _____

Signature of preparer, if other than taxpayer _____ Daytime telephone (____) _____



Where to mail your return and attachments

If using a private delivery service rather than the U.S. Postal Service, see 20 in instructions for the correct address.

Do you participate in the New Jersey/New York reciprocal tax agreement?

No

Yes

Address envelope to:
 NYS SALES TAX PROCESSING
 PO BOX 15172
 ALBANY NY 12212-5172

Address envelope to:
 NYS SALES TAX PROCESSING
 RECIPROCAL TAX AGREEMENT
 PO BOX 15173
 ALBANY NY 12212-5173

Make check payable to **New York State Sales Tax.**

| | | |
|---|-------------------------------|--|
| David Sample 100 Elm Street Albany, NY 12203 | DATE February 10, 2010 | 2971 |
| PAY TO THE ORDER OF New York State Sales Tax | | \$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| (your payment amount) | | DOLLARS |
| First State Bank | | |
| 00-0000000 ST-809 1/31/10 | <i>David Sample</i> | |

Don't forget to write your sales tax ID#, **ST-809**, and **1/31/10**.

Don't forget to sign your check

Need help?

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