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

| Part-Quarterly | | | | | / (| ' (Monthly | | | | | y) ST-809 | | | | | | |
|----------------|--|--|--|--|------------|------------|----|----|----|--|-----------|--|--|--|--|--|--|
| | | | | | , | Ju | ne | 20 | 13 | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

Tax period June 1, 2013 - June 30, 2013 1 1

July 2013

Due date:

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| Sales tax identification number | | | | | | | | | I | I | |
|---|--|--|--|--|--|--|--|--|---|---|--|
| Legal name (print ID number and legal name as it appears on the Certificate of Authority) | | | | | | | | | | | |
| DBA (doing business as) name | | | | | | | | | | | |
| Number and street | | | | | | | | | | | |

22 Monday, July 22, 2013 You will be responsible for penalty and interest if your return and any payment due is not electronically filed or postmarked by this date.

0414

City, state, ZIP code

Mandate to use Sales Tax Web File - Most filers fall under this requirement; see Form ST-809-I.

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. No tax due? There is a \$50 penalty for late filing of a no-tax-due return. See 1 in instructions.

| Has your address or If so, visit our Web site (see <i>Need help</i> ? in Form ST-809-I) 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. | | | | | | | | |
|--|---|---------------------------------------|----------|----------------|-----|--|--|--|
| Co | mplete Step 1 or Step 2, but not both. See 3 in instructio | · · · · · · · · · · · · · · · · · · · | • | | | | | |
| 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 instru | | | .00 | | | | |
| | | 2 | | | | | | |
| 2 | Enter total taxable sales and services (to nearest dollar; see 5 in inst | | 3 | .00 | | | | |
| 2 | Enter total purchases subject to tax (to nearest dollar; see 6 in instru | | <u> </u> | .00 | | | | |
| | | | | | .00 | | | |
| 5 | Sales and use tax (see 7 in instructions) Credit for prepaid sales tax (see 8 in instructions) | 5 | | | | | | |
| | Net tax due (subtract box 5 amount from box 4 amount) | | | 6 | | | | |
| | Credits not identified (attachments required, see 9 in instructions) | | | | | | | |
| 8 | Advance payments (see 10 in instructions) | 8 | | | | | | |
| - | Add box 7 amount to box 8 amount | | | 9 | | | | |
| 1 | Sales and use tax due (subtract box 9 amount from box 6 amount) | | | 10 | | | | |
| 11 | Penalty and interest (see 11 in instructions) | | | 11 | | | | |
| 12 | Amount due (add box 10 amount to box 11 amount; see 12 in instructio | nc) Pay this ar | nount | 12 | | | | |
| | | | nount | | | | | |
| St | ep 2 of 3 Short method of calculating tax due | | | | | | | |
| 1 | Comparable quarter of previous year (see 13 in instructions)* | 1 | | | | | | |
| 1 | Tax due (one-third of box 1 amount) | | | | | | | |
| 1 | Credit for prepaid sales tax (see []4 in instructions) | | | | | | | |
| 1 | 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) | 0 | | 7 | | | | |
| 1 | Add box 5 amount to box 6 amount Sales and use tax due (subtract box 7 amount from box 4 amount) | | | 8 | | | | |
| | Penalty and interest (see 17 in instructions) | | | 9 | | | | |
| 3 | י בוימונץ מויט ווונכובא (אבר שיווי וואנוטכווטוא) | | | 10 | | | | |
| 10 | Amount due (add box 8 amount to box 9 amount; see 🔞 in instructions | s) Pay this ar | nount | | | | | |
| *Inc | lude short method adjustment in box 1 (see Short method adjustment | on page 3 of instructions.) | For o | ffice use only | | | | |
| | Locality Adjustment | - / | | - | | | | |

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| Page 2 of 2 | ST-809 (6/13) | Sales tax identification | number | | | | | | | 0414 | Part-G | uarterl | y (Month | ıly) |
|------------------------|---|--------------------------------|----------|---------|---------------------|---------|----------|--------------------|-------------------------------|--------------------------------|---------------------|-----------------------|------------------|------|
| Step 3 of Please be su | 3 Sign and mail this return re to keep a completed copy for | 'n your records. | | | narked b complet | , | | | 13, to b | e consider | ed filed o | n time. | | |
| | Do you want to allow another | person to discuss | this ret | urn wit | h the Tax | Dept? | (see ins | tructions) | Ye | es 🗌 (cor | nplete the | following) | No 🗌 | |
| Third – party | Designee's name | Designee's phone numbe () | | | | | | | | mber (PIN) | | | | |
| designee | Designee's e-mail address | | | | | | | | | | | | | |
| Printed name of | taxpayer | | | | | Title _ | | | | | | | | _ |
| Taxpayer's e-ma | il address | | | | | | | | | | | | | _ |
| Signature of tax | payer | | | | _ Date _ | _ | _ | Dayt telep | ime hone (_ |) | | | | |
| Printed name of | preparer's firm <i>(or yours if self-employ</i> | red) | | | | | | Firm iden | 's emplo tification Pro | yer number* eparer's | | | | |
| Preparer's addre | ess | | | | | | | | | IN* | | | | |
| Preparer's e-ma | il address | | | | | | | | | Preparer's NYTPRIN ' | | | | |
| Signature of pre | parer, if other than taxpayer | | | | | | | Dayt telep | ime hone (|) | | | | _ |
| *See 2 in ins | structions | | | | | | Mak | e check | payable | e to New Y | ork State | e Sales 1 | | a |
| | /here to file your return | n and attach | ment | ts | | | | Street NY 12203 | | | _{ate} July | 10, 2013 | 2971 | |
| W | eb File your return at <i>www.tax</i> | <i>ny.gov</i> (see inst | ructions | s). | | | ORDER | | | te Sales Tax | | \$ | (,XXX.XX | |
| àt | you are not required to Web F tachments to: NYS Sales Tax F bany NY 12212-5168) | | | | | | | State | Bank | yment amour | TI Des | 15 | DOLLARS ZNOJE | |
| | using a private delivery service ervice, see 🛛 in instructions fo | | | ostal | | | Do | | to write | your sales t | ax ID#, | Don't for sign you | | |

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