

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

January 2025

December 2024

Tax period

1025

.00 .00 .00

December 1, 2024 - December 31, 2024

Sale	s tax identification number	S M T W T F S 1 2 3 4	
Legal	name (print ID number and legal name as it appears on the Certifica	<b>5</b> 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25	
DBA	(doing business as) name	26 27 28 29 30 31	
Num	per and street	21 Due date: Tuesday, January 21, 2025 You will be responsible for penalty	
City, s	state, ZIP code	and interest if your return and any payment due is not electronically filed of postmarked by this date.	
Mand	ate to use Sales Tax Web File - Most filers fall under this re	quirement. See Form S	ST-809-I, Instructions for Form ST-809.
No ta	x due? Enter your gross sales and services in box 1 of Step 1 belo There is a \$50 penalty for late filing of a no-tax-d	w; enter <i>none</i> in boxes 2 l <b>ue return</b> . See instruc	and 3. You <b>must</b> file by the due date even if no tax is du tions.
busir	ess information changed? or mark an X in the box to the right a	and enter new mailing addre	the change my address option for further instructions, ess above. See instructions
Ste	p 1: Calculate tax due (complete Part 1 or Part	rt 2, but not both)	
Part	1: Long method of calculating tax due (see instruction	ons)	
	Gross sales and services (enter total amount to nearest dollar)	-	1
2			
	Purchases subject to tax (enter total amount to nearest dollar).		
4			
5		5	
6	Net tax due (subtract box 5 amount from box 4 amount)		6
7	Credits not identified (attachments required)		
8	Advance payments	8	
9	Add box 7 amount to box 8 amount		
10			
_	Penalty and interest		
1	Amount due (add box 10 amount to box 11 amount)		
	Amount paid (see instructions)		
	2: Short method of calculating tax due (see instructi		
	Same quarter of previous year*		
	Tax due (one-third of box 1 amount)		
	Credit for prepaid sales tax		
1	Net tax due (subtract box 3 amount from box 2 amount)		4
5	Credits not identified (attachments required)		
6	Advance payments	6	
7	Add box 5 amount to box 6 amount		7
8			
-	Penalty and interest		
	Amount due (add box 8 amount to box 9 amount)		
	Amount paid (see instructions)		
		<u></u>	
*Inclu	de short method adjustment in box 1 <i>(see Part 2,</i> Box 1: Same qu Locality Adjustment \$		nstructions). For office use only



Page 2 of 2 ST-809 (12/24)

Sales tax identification number

1025 Part-Quarterly (Monthly)

Step 2: Please be s	Si sure	gn and mail this return (see in to keep a completed copy for your record	str.) ds.	Must be postmarked by <b>Tuesday, January 21, 2025,</b> to be considered filed on time.							
		Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes (complete the following) No							llowing) No 🗌		
Third - party		Designee's name	Designee's phone number (  )			Personal number (	identificatio PIN)	n			
designe	e	Designee's email address									
Authoriz	ed				fficial title						
person		Email address of authorized person			Telephone number Date			Date			
Paid	Firm	's name (or yours if self-employed)			Firm's	EIN	F	reparer's	PTIN or SSN		
preparer use	Signature of individual preparing this return Address		Address		I	I	State ZIP code				
only (see instr.)			Telephone number ()		Preparer's	NYTPRIN	NYTPRI excl. code		Date		

For complete mailing information, see Where to file your return and attachments in the instructions.

## Need help?

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

