

Locality

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

Part-Quarterly							y (Monthly						y) ST-809					
						December 2011												
	\Box	I		П	I	П	П		Т	Τ	Π	П						
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		January 2012	
Sales tax identification number		S M T W T F S	
Legal name (print ID number and legal name as it appears on the Certification	ate 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 29 30 31	12
DBA (doing business as) name			
		Due date:	
Number and street		— Friday, January 20, 2012	
		You will be responsible for penalty and inter if your return and any payment due is not	est
City, state, ZIP code		electronically filed or postmarked by this da	te.
Mandate to use Sales Tax Web File — Most filers fall under this nev	v requirement; see Form ST-80	99-1.	
No tax due? Enter your gross sales and services in box 1 of Step 1 below; 6 There is a \$50 penalty for late filing of a no-tax-due return.		nust file by the due date even if no tax is due	
Has your address or If so, visit our Web site (see <i>Need help?</i> in F business information changed? or mark an <i>X</i> in the box to the right and enter			
Complete Step 1 or Step 2, but not both. See 3 in instruct	ions.		
Step 1 of 3 Long method of calculating tax due			
		1	
1 Enter total gross sales and services (to nearest dollar; see 4 in ins	structions)		00
	,	2	
2 Enter total taxable sales and services (to nearest dollar; see 5 in in	nstructions)		00
	,	3	
3 Enter total purchases subject to tax (to nearest dollar; see 6 in ins	structions)		00
4 Sales and use tax (see 7 in instructions)	4		
5 Credit for prepaid sales tax (see 8 in instructions)			
6 Net tax due (subtract box 5 amount from box 4 amount)		6	
7 Credits not identified (attachments required, see 9 in instructions)			
8 Advance payments (see 10 in instructions)			
9 Add box 7 amount to box 8 amount		9	
10 Sales and use tax due (subtract box 9 amount from box 6 amount)			
I1 Penalty and interest (see 11 in instructions)			
To raity and interest (see 11 in instituctions)		12	_
2 Amount due (add box 10 amount to box 11 amount; see 12 in instruc	tions) Pay this am		
Step 2 of 3 Short method of calculating tax due			
1 Comparable quarter of previous year (see 13 in instructions)*	1		
2 Tax due (one-third of box 1 amount)			
3 Credit for prepaid sales tax (see 14 in instructions)			
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		
7 Add box 5 amount to box 6 amount		7	
8 Sales and use tax due (subtract box 7 amount from box 4 amount)			_
9 Penalty and interest (see 17 in instructions)			_
J Gridity and interest (See Thin instructions)		10	_
0 Amount due (add box 8 amount to box 9 amount; see 18 in instruction	ons) Pav this am		
Include short method adjustment in box 1 (see Short method adjustme	in on page 3 of molluctions.)	i oi oilice use oiliy	

9000112110094 **ST-809** (12/11) **Page 1** of 2

Adjustment

Step 3 of 3 Sign and mail this return Please be sure to keep a completed copy for your records. Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes (complete the following) No Designee's name Designee's name Designee's phone number Personal identification number (PIN)	Pa	ige 2 of 2	ST-809 (12/11)	Sales tax identification	n number					1012	Part-Qu	arterly (Monthly)	
Third party designee Designee's phone number () Personal identification number (PIN) Designee's e-mail address Printed name of taxpayer Taxpayer's e-mail address Signature of taxpayer Designeer's firm (or yours if self-employed) Printed name of preparer's firm (or yours if self-employed) Preparer's address Preparer's e-mail address Preparer's Preparer's Preparer's														
Printed name of taxpayer			Do you want to allow a	nother person to discuss	th the Tax D	ept? (se	e instruction	s) Ye	es 🔲 (com	nplete the fol	lowing) No	$\overline{\Box}$		
Printed name of taxpayer		party	ŭ		Designee's pho	one number								
Taxpayer's e-mail address Signature of taxpayer Printed name of preparer's firm (or yours if self-employed) Preparer's address Preparer's e-mail address Signature of preparer, if other than taxpayer *See ② in instructions Where to mail your return and attachments Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see ③ in instructions for the correct address. Daytime telephone () Make check payable to New York State Sales Tax. Daytime telephone () Make check payable to New York State Sales Tax. Daytime telephone () Proparer's NYTPRIN* Daytime telephone () Make check payable to New York State Sales Tax. Pay To THE New York State Sales Tax SIX XXX XXX Quor payment amount Double New York State Sales Tax		designee	Designee's e-mail addre	SS										
Signature of taxpayer	Pri	Printed name of taxpayer Title												
Signature of taxpayer	Ta	xpayer's e-ma	il address											
Preparer's address Preparer's e-mail address Signature of preparer, if other than taxpayer *See ② in instructions Where to mail your return and attachments Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see ② in instructions for the correct address. Preparer's Preparer's PTIN* Preparer's Prepar	Signature of taxpayer Date telephone ()													
Preparer's address Preparer's e-mail address Signature of preparer, if other than taxpayer *See ② in instructions Where to mail your return and attachments Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see ② in instructions for the correct address. PTIN* Preparer's NYTPRIN* NYTPRIN* Daytime telephone () Make check payable to New York State Sales Tax. PAY TO THE New York State Sales Tax [Your payment amount] DOLLARS First State Bank O-00000000 ST-809 12/31/11 Don't forget to write your sales tax ID#, Don't forget to														
Preparer's e-mail address Signature of preparer, if other than taxpayer *See ② in instructions Where to mail your return and attachments Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see ② in instructions for the correct address. NYTPRIN* Daytime telephone () Make check payable to New York State Sales Tax. Daytime telephone () Make check payable to New York State Sales Tax. PAY TO THE New York State Sales Tax (your payment amount) DOLLARS First State Bank OO-00000000 ST-809 12/31/11 Don't forget to write your sales tax ID#, Don't forget to	Pr	Preparer's address PTIN* PTIN*												
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Where to mail your return and attachments Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see in instructions for the correct address. Date January 10, 2012 PAY TO THE ORDER OF New York State Sales Tax \$ X,XXX,XX [Your payment amount] Don't forget to write your sales tax ID#, Don't forget to	*5	See 20 in ins	tructions			1	Make chec	k payable	e to <i>New Y</i>	ork State	Sales Tax.			
Address envelope to: NYS SALES TAX PROCESSING PO BOX 15172 ALBANY NY 12212-5172 If using a private delivery service rather than the U.S. Postal Service, see in instructions for the correct address. PAYTO THE ORDER OF New York State Sales Tax \$\(\) \(ৰে <mark>টি</mark> w	here to mail you	chments		10	100 Elm Street							
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Need help?

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