

New York State and Local Quarterly Sales and Use Tax Return

Tax period: 3rd Quarter September 1, 2020 - November 30, 2020

Due: Monday, December 21, 2020

Calco tax lacintinoation namber	Mandate to use Sales Tax Web File						
Legal harne (Finit ID number and legal harne as it appears on the Certificate of Authority)	Most filers fall under this requirement. See Form ST-100-I, <i>Instructions for</i>						
DBA (doing business as) name	Form ST-100. 321						
Number and street	Has your address or business information changed?						
	Mark an X in the box if the address listed is new or has changed						
	No tax due? – If you have no taxable sales,						
If a different entity files the corporation tax, partnership, or personal income tax return to report income from this business, enter that entity's federal employer identification number (EIN) or	taxable purchases, or credits to report for this period, complete Step 1 below; enter <i>none</i> in boxes 12, 13, and 14, and complete Step 9.						
Social Security number (SSN). Leave this field blank if the same entity files this sales tax return $\;\;\;$ $\;$	ID number						
example, NYS governmental entities).							
Is this your final return? – If you sell or discontinue your business, or change the form of your bus return with the applicable information completed in Step 2 below. You must file your final return with or change in status. The return should include the tax due from business operations to the last day collected on assets that you sell. Mark an X in the box if this is your final return.	nin 20 days of the last day of business of business, as well as any tax						
Are you claiming any credits in Step 3 on this return or any schedules? (Mark an X in the box.)							
If Yes, enter the total amounts of credits claimed and complete Form ST-100-ATT (see Are you claim							
credits? in instructions)	.00						
Step 1 Return summary	1						
(see instructions) 1 Gross sales and services							
,	1a						
1a Nontaxable sales							
1b Marketplace providers only: Enter the dollar amount of sales of tangible personal property facilitated for market							
sellers (see instructions)	•						
Step 2 Final return information (see instructions)							
A Business sold or discontinued							
Mark an X in the appropriate box if your business has been sold or discontinued.							
Sold Insolvent Owner deceased Dissolved Oth	er						
Note: If you intend to call your hyginess or any of your hyginess goods, including tangible, in	stangible, or real property, other than						
Note: If you intend to sell your business or any of your business assets, including tangible, in the ordinary course of business, you must give each prospective purchaser a copy of Forr	m TP-153, <i>Notice to Prospective</i>						
Purchasers of a Business or Business Assets. You must also provide us with the following in	formation:						
Last day of business Date of sale Sale price							
Name and address of purchaser	In whole In part In pa						
Name and address of business							
Location of property							
Was sales tax collected on any taxable items (furniture, fixtures, etc.) included in the sale?	Yes L No L						
B Business form changed (sole proprietor to partnership, partnership to corporation, etc.)							
In addition to filing a final return, you must also apply for a new Certificate of Authority							
for the new entity. (see Business form changed in instructions)	For office use only						
	_						

OT

3621

6

.00

.00

7

.00

.00

8%

8

Column subtotals; also enter on page 3, boxes 9, 10, and 11:

Otsego County

Sales tax identification number

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Column A Taxing jurisdiction	Column B Jurisdiction code	Ta	Column C ixable sales nd services	 + Pu	Column D rchases subje to tax	ct :	Column E * Tax rate =		e tax
Putnam County	PU 3731		.00.			.00	83/8%*		
Rensselaer County	RE 3881		.00			.00	8%		
Rockland County	RO 3921		.00			.00	83/8%*		+
St. Lawrence County	ST 4091		.00			.00	8%		
Saratoga County (outside the following)	SA 4111		.00			.00	7%		
Saratoga Springs (city)	SA 4131		.00			.00	7%		
Schenectady County	SC 4241		.00			.00	8%		
Schoharie County	SC 4321		.00				8%		
Schuyler County	SC 4411		.00			.00.	8%		
Seneca County	SE 4511		.00			.00	8%		
Steuben County	ST 4691		.00			.00	8%		
Suffolk County	SU 4711		.00			.00	85/8%*		
Sullivan County	SU 4821		.00			.00	8%		
Tioga County	TI 4921		.00			.00	8%		+
Tompkins County (outside the following)	TO 5081		.00.			.00	8%		+
Ithaca (city)	IT 5021		.00.			.00	8%		-
Ulster County	UL 5111		.00.			.00	8%		
							7%		
Warren County (outside the following)	WA 5281		.00			.00			
Glens Falls (city)	GL 5211		.00			.00	7%		
Washington County	WA 5311		.00			.00	7%		\perp
Wayne County	WA 5421		.00			.00	8%		
Westchester County (outside the following)	WE 5581		.00			.00	83/8%*		
Mount Vernon (city)	MO 5521		.00			.00	83/8%*		
New Rochelle (city)	NE 6861		.00			.00	8%%*		
White Plains (city)	WH 6513		.00			.00	8%%*		
Yonkers (city)	YO 6511		.00			.00	81/8%*		
Wyoming County	WY 5621		.00			.00	8%		
Yates County	YA 5721		.00			.00	8%		
New York City/State combined tax [New York City includes counties of Bronx, Kings (Brooklyn), New York (Manhattan), Queens, and Richmond (Staten Island)]	NE 8081		.00			.00	81/8%*		
New York State/MCTD	NE 8061		.00			.00	43/8%*		
New York City - local tax only	NE 8091		.00			.00	41/2%		
			.00			.00			
			.00			.00			
Column subtotals from page 2, boxes 6	5, 7, and 8:	9	.00	10		.00		11	
If the total of box 12 + box 13 = \$300,000 or more.				13				14	
see page 1 of instructions. Colu	mn totals:		.00			.00			
Step 4 Calculate special taxes (see instruct	ions)	lr Ir	nternal code	т	Column G axable receipts	;	Column H Tax rate	Column J Special taxes (G × H)	
Passenger car rentals (outside the MCTD)			PA 0012			.00	12%		
Passenger car rentals (within the MCTD)			PA 0030			.00	12%		
Information & entertainment services furnished via telephony a	nd telegraphy		IN 7009			.00	5%		
Vapor products		,	VA 7060			.00	20%		
					Total sp	ecia	taxes:	15	
Step 5 Other tax credits and advance pay	ments (se	e instruc	tions)			Inter	nal code	Column K Credit amou	
	(30		-/			-	00000		
Credit for prepaid sales tax on cigarettes					CR	C8888		+	
Overpayment being carried forward from a prior pe						C		\perp	
Advance payments (made with Form ST-330)							Α		\perp
	Total tax	credits	, advance pay					16	
			*43/8% = (0.0437	5; 83/8% = 5; 85/8% =			roceed to Step	6,

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Step 6	Calc	ulate taxes due	Add Sa taxes (payme	ales and use tax of box 15) and subti ents, and overpayi	total (box 14) to tal tax credits, ad (box 16). Enter re	Total special vance sult in box 17.		Taxes	s due			
Box 14 amount \$_			Box 15 amount \$			Box 16 amount	\$	=	17			
		culate vendor collecti ty and interest (see in		STOP) f	f you are filing this re full amount of tax due collection credit. If you	, STOP	! You are not eligible	for the vendor				
1 E 2 E 3 S	Enter Enter Subtr	the box 14 amount the amount from Schedu act line 2 from line 1 the box 15 amount	ule E, box 1	\$			\$					
		ines 3 and 4										
6 E	Inter inst Ent	the amount from Schedule (tructed on the schedule (ter this amount as a posit	ule FR as (if any). tive number	\$								
		ines 5 and 6					-		Vendor collection cred VE 7706			
8 Credit rate (multiply line 7 by 5% (.05))								18				
OR Pay penalty and interest if you are filing late									L	Penalty ar	nd interes	st
7B Penalty and interest are calculated on the amount in box 17, <i>Taxes due</i> .									19			
Step 8 Calculate total amount due (see instructions) Make check or money order payable to New York State Sale: Tax. Write on your check your sales tax identification number, ST-100, and 11/30/20.								Total amount due				
8A	Am				tion credit? Subtract box 18 from box 17. nterest? Add box 19 to box 17.					20		
8B Amount paid: Enter your payment amount. This amount should match your amount due in box 20.								21				
Step 9 S	Sign	and mail this return to keep a completed copy	(see instr.) for your recor	I	oe postmarked by elow for complete			, 2020 , to be co	nside	red filed or	n time.	
		Do you want to allow anothe	er person to disc	cuss this re	s this return with the Tax Dept? (see instructions) Ye					the following	<i>j)</i> No 🗆]
Third – party Designee's name				Design(Designee's phone number Personal iden number (PIN)					ation		
designe	e [Designee's email address										
Signature of authorized person						Official	title					
person	- I	Email address of authorized per		Telephone			ne number		Date			
Paid	Firm'	s name (or yours if self-employed)					Firm's EIN)	Prepa	arer's PTIN	or SSN	
preparer - use	Signa	ature of individual preparing this	return	Address			City		S	state ZIP c	ode	
only (see instr.)	Emai	l address of individual preparing	g this return	Telephone (number		Preparer's NYTPRI	N NYTPF excl. co		Date		
Where to file your return and attachmed Web File your return at www.tax.ny.gov (see Highlight				hlights <i>in ii</i>	,		David Sample 100 Elm Street Albany, NY 12203 PAY TO THE ORDER OF New You	ecember 10	297	1		
(If you are not required to Web File, mail your return NYS Sales Tax Processing, PO Box 15168, Albany N If using a private delivery service rather than the U.S Service, see Publication 55, Designated Private Deliv				ny NY 122 U.S. Posta	12-5168) al		(your payment amount) First State Bank 00-0000000 ST-100 11/30/20 Don't forget to write your sales tax ID number, ST-100, and 11/30/20. Don't forget to sign your check					