



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

July 2017						
Tax period						
July 1, 2017 – July 31, 2017						

August 2017						
S	M	T	W	T	F	S
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		

0518

21 Due date:
Monday, August 21, 2017

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

Sales tax identification number	
Legal name (print ID number and legal name as it appears on the Certificate of Authority)	
DBA (doing business as) name	
Number and street	
City, state, ZIP code	

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

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 instructions.

Has your address or business information changed? If so, visit our website (see *Need help?* in instructions) 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 instructions. ☐

Complete Step 1 or Step 2, but not both.

Step 1 of 3 Long method of calculating tax due (see instructions)

1 Enter total gross sales and services (to nearest dollar)	1		.00
2 Enter total taxable sales and services (to nearest dollar)	2		.00
3 Enter total purchases subject to tax (to nearest dollar)	3		.00
4 Sales and use tax	4		
5 Credit for prepaid sales tax	5		
6 Net tax due (subtract box 5 amount from box 4 amount)	6		
7 Credits not identified (attachments required)	7		
8 Advance payments	8		
9 Add box 7 amount to box 8 amount	9		
10 Sales and use tax due (subtract box 9 amount from box 6 amount)	10		
11 Penalty and interest	11		
12a Amount due (add box 10 amount to box 11 amount)	12a		
12b Amount paid	12b		

Step 2 of 3 Short method of calculating tax due (see instructions)

1 Comparable quarter of previous year	1		
2 Tax due (one-third of box 1 amount)	2		
3 Credit for prepaid sales tax	3		
4 Net tax due (subtract box 3 amount from box 2 amount)	4		
5 Credits not identified (attachments required)	5		
6 Advance payments	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)	8		
9 Penalty and interest	9		
10a Amount due (add box 8 amount to box 9 amount)	10a		
10b Amount paid	10b		

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

Locality

Adjustment
\$

For office use only

90000107170094



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, August 21, 2017**, 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 ☐ (complete the following) No ☐		
	Designee's name	Designee's phone number ()	Personal identification number (PIN)
	Designee's e-mail address		

Printed name of taxpayer _____ Title _____

Taxpayer's e-mail address _____

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

Printed name of preparer's firm (or yours if self-employed) _____ Firm's employer identification number* _____

Preparer's address _____ Preparer's PTIN* _____

Preparer's e-mail address _____ Preparer's NYTPRIN* _____ NYTPRIN excl. code _____

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

*See *Paid preparer's responsibilities* in instructions**Where to file your return and attachments****Web File** your return at www.tax.ny.gov (see instructions).

(If you are not required to Web File, mail your return and attachments 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 Publication 55, *Designated Private Delivery Services*.☒ Make check payable to **New York State Sales Tax**.

David Sample 100 Elm Street Albany, NY 12203		2971
DATE August 10, 2017		
PAY TO THE ORDER OF	New York State Sales Tax	\$X.XXX.XX
(your payment amount)		DOLLARS
First State Bank		
00-0000000	ST-809	7/31/17

Don't forget to write your sales tax ID#, **ST-809**, and **7/31/17**.

Don't forget to sign your check

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