



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

0101

Use this form to report transactions for the period March 1, 2000, through March 31, 2000, only.

Form fields for Sales tax vendor identification number, Business telephone number, Daytime telephone number, Legal name, DBA, Street, City, state, ZIP code.

Change of business information

If your mailing address is incorrect on the label and you have not previously notified us, enter your correct mailing address next to your preprinted address.

Complete labeled form and mail it in the enclosed envelope to the applicable PO box listed on the back of this form on or before April 20, 2000.

Type of business field with a checkbox for reporting sales tax on this return for more than one business location.

Summary of tax due — Complete Long method or Short method section below, not both (see instructions).

Table for Long method summary of tax due with columns A (Gross sales), B (Taxable sales), and C (Purchases subject to use tax).

Table for Short method summary of tax due with columns 1a (Comparable quarter), 1b (Tax due), 1c (Credit for prepaid sales tax), 1d (Net tax due), 2a (Credits), 2b (Advance payments), 2c (Add lines), 3 (Sales and use taxes due), 4 (Interest and penalties), 5 (Amount due).

— Attach check or money order payable to New York State Sales Tax. — Include on the check or money order your identification number, Form ST-809, and the period you are reporting.

For office use only

* Adjustments: Include on line 1a. (See Short method adjustment on page 3 of the instructions.)

Signature and telephone number fields for vendor and preparer.

Locality Adjustment \$

Where to mail your return and attachments

All vendors, except those who participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, including those located outside New York State, mail your completed return and attachments to:

NYS SALES TAX PROCESSING
PO BOX 1208
NEW YORK NY 10116-1208

Vendors who participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, mail your completed return and attachments to:

NYS SALES TAX PROCESSING
RECIPROCAL TAX AGREEMENT
PO BOX 1209
NEW YORK NY 10116-1209

If you are enrolled in the PrompTax Program, please use the preaddressed envelope provided.

If you are using a private delivery service, address the return envelope to: The Chase Manhattan Bank, NYS Government Tax Processing, 12 Corporate Woods Blvd., 4th Floor Albany NY 12211

For a listing of designated delivery services, see Publication 55, *Designated Private Delivery Services*.

Need help?



Telephone assistance is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday.

For business tax information, call the New York State Business Tax Information Center: 1 800 972-1233

For general information: 1 800 225-5829

To order forms and publications: 1 800 462-8100

From areas outside the U.S. and outside Canada: (518) 485-6800



Fax-on-demand forms: Forms are available 24 hours a day, 7 days a week. 1 800 748-3676



Internet access: <http://www.tax.state.ny.us>



Hotline for the hearing and speech impaired:

1 800 634-2110 from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use.



Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 225-5829.



If you need to write, address your letter to:

NYS TAX DEPARTMENT
TAXPAYER ASSISTANCE BUREAU
TAXPAYER CORRESPONDENCE
W A HARRIMAN CAMPUS
ALBANY NY 12227