January 2018



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

	cember 2	

Tax period

December 1, 2017 - December 31, 2017

Sales	s tax identification number			S M	T	W T	F S			
Legal name (print ID number and legal name as it appears on the Certificate of Authority)					9 16 23 30	10 11 17 18 24 25 31	5 6 12 13 19 20 26 27		1018	
DBA ((doing business as) name			t.		_		J		
Numb	per and street		_	4	Mond	-	-	, 22, 2018	v	
City, state, ZIP code			a p	You will be responsible for penalty and interest if your return and any payment due is not electronically filed or postmarked by this date.						
Mand	late to use Sales Tax Web File - Most filers fall under this require	ement; see Form ST-809-I.				•				
No ta	x due? Enter your gross sales and services in box 1 of Step 1 below; en There is a \$50 penalty for late filing of a no-tax-due re	nter <i>none</i> in boxes 2 and 3. You eturn. See instructions.	ı must fi	le by	the	due da	ite eve	en if no tax	is due.	
	our address or If so, visit our website (see Need help? in ness information changed? If so, visit our website (see Need help? in or mark an X in the box to the right and er									
Com	plete Step 1 or Step 2, but not both.									
Step	p 1 Long method of calculating tax due (see ii	nstructions)								
1	Enter total gross sales and services (to nearest dollar)			1					.00	
1	Enter total taxable sales and services (to nearest dollar)								.00	
	Enter total purchases subject to tax (to nearest dollar)			3					.00	
	Sales and use tax			_						
	Credit for prepaid sales tax			6						
	Net tax due (subtract box 5 amount from box 4 amount)		·····							
ν 2	Credits not identified (attachments required)	8		-						
	Add box 7 amount to box 8 amount			9						
	10 Sales and use tax due (subtract box 9 amount from box 6 amount)								+	
	Penalty and interest			-					+	
	Amount due (add box 10 amount to box 11 amount)			12a					$\overline{}$	
12b	Amount paid			12b						
Step	p 2 Short method of calculating tax due (see i	instructions)								
1	Comparable quarter of previous year	1								
	Tax due (one-third of box 1 amount)	2								
3	Credit for prepaid sales tax	3		Ц,						
	Net tax due (subtract box 3 amount from box 2 amount)			4					\perp	
5	Credits not identified (attachments required)	5		-						
6	Advance payments	6		7						
_	Add box 5 amount to box 6 amount								+	
_	8 Sales and use tax due (subtract box 7 amount from box 4 amount)								+	
9 Penalty and interest				9 10a					+-	
1	Amount paid			10b						
*Inclu	de short method adjustment in box 1 (see <i>Short method adjustment</i> Locality Adjustment S	t on page 3 of instructions.)	For c	ffic	e us	e onl	'y			



Page 2 of 2	ST-809 (12/17)	Sales tax identificati	ion number		10	018	Part-Quarterly (Monthly)	
Step 3 Sign and mail this return Please be sure to keep a completed copy for your records. Must be postmarked by Monday, January 22, 2018, to be considered filed on to See below for complete mailing information.								
	Do you want to allow another	person to discus	s this return with the Tax De	x Dept? (see instructions) Yes (complete the following) No				
Third – party	Designee's name		Designee's phone number ()		Personal ider number (PIN		n	
designee	Designee's e-mail address							
Printed name of taxpayerTitle								
Taxpayer's e-n	nail address						_	
Signature of taxpayer Date Date telephone ()								
l F						ber*		
Preparer's add	dress				Prepare PTIN*			
Preparer's e-m	nail address					NYTPRIN excl. code		
Signature of preparer, if other than taxpayer Daytime telephone ()								
*See Paid preparer's responsibilities in instructions Make check payable to New York State Sales Tax.								
Whe	ere to file your return	ments	David Sample 100 Elm Street			2971		
Web	File your return at www.tax.r	y.gov (see instruc	ctions).	Albany, NY 12203		DAT	_E January 10, 2018	
(If you are not required to Web File, mail your attachments to: NYS Sales Tax Processing, Po Albany NY 12212-5172)			rn and ox 15172,	PAY TO THE ORDER OF New	ovnt) DOLLARS			
	ng a private delivery service r ce, see Publication 55, <i>Desig</i> ces.			00-0000000 S			Mid Sample	
				Don't forget ST-809, and	to write your s	ales tax	ID#, Don't forget to sign your check	

Need help?

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