

New York State and Local Sales and Use Tax Return



PART—QUARTERLY

M

0287 Use this form to report only transactions for the period:
July 1, 1986 — July 31, 1986

If incorrect on label, please enter correct information below. Check box to indicate whether address change is for:
 actual business location
 mailing address other than actual business location.

Use labeled form and return envelope for filing your return

ID Number	
Name	
Number and Street	
City	
State	ZIP

Type of business

If you are reporting sales tax on this return for more than one business location, check here.

Summary of Tax Due — Complete “Long” or “Short” section below, not both. (See instructions)

LONG	Summary of Business Activities	A	B	C
		Gross sales and services (to nearest dollar)	Taxable sales and services (to nearest dollar)	Purchases subject to use tax (to nearest dollar)
	1. Sales and use taxes (see instructions)			\$
	2a. Credits not identified (attachments required)(see instructions)	\$		
	b. Advance Payments (attach ST-330's)	\$		
	c. Total of lines 2a and 2b			\$
	3. Sales and use taxes due (line 1 less line 2c)			
	4. Late filing charge (Penalty-See Page 2 for Penalty Computation Instructions Interest-Rate pursuant to Part 603 of the Tax Regulations)			
	5. Amount due including late filing charge (line 3 plus line 4)			\$
				PAY THIS AMOUNT

SHORT	1a. Comparable quarter-prior year (see instructions)*	\$		
	b. Tax due (1/3 of line 1a)			
	c. Credit for prepaid sales tax on motor fuel (see instructions)			
	d. Net tax due (line 1b less line 1c)			
	2a. Credits (attachments required)	\$		
	b. Advance Payments (attach ST-330's)	\$		
	c. Total of lines 2a and 2b			\$
	3. Sales and use taxes due (line 1d less line 2c)			
	4. Late filing charge (Penalty-See Page 2 for Penalty Computation Instructions Interest-Rate pursuant to Part 603 of the Tax Regulations)			
	5. Amount due including late filing charge (line 3 plus line 4)			\$
				PAY THIS AMOUNT

- Attach check or money order payable to “New York State Sales Tax.”
- Mail in the enclosed envelope to the applicable P.O. Box on or before:

For office use only

AUGUST 20, 1986

* Adjustments: Include on line 1a, “SHORT”

Locality	Adjustment
	\$

Signature of vendor	Telephone number ()
Title	Date
Signature of preparer (if other than vendor)	Telephone number ()
Preparer's address	Date

The following penalty computation is effective for taxes required to be paid or returns required to be filed on or after September 1, 1985.

PENALTY COMPUTATION

- A. For failure to file a return on time, even if **no tax is due**, the penalty is \$50.00.
- B. For failure to file a return on time **with tax due**, if the return is:
 - 1-60 days late**, the penalty is 10% of the tax due for the first month plus 1% of the tax due for each month thereafter, but in no instance less than \$50.00, or
 - 61 or more days late**, the penalty is the greatest of the following:
 - i) 10% of the tax due for the first month plus 1% of the tax due for each month thereafter not to exceed 30% or
 - ii) the lesser of \$100.00 or 100% of the tax due, or
 - iii) \$50.00

RETURN ADDRESSES

If you are participating in the New York/New Jersey Reciprocal Tax Agreement, attach Schedule NJ to your return			MAIL RETURN TO: P.O. Box 688 Albany, NY 12201
If you are NOT participating in the New York/New Jersey Reciprocal Tax Agreement and your place of business is located in the county of:			MAIL RETURN TO:
ALBANY BROOME CHEMUNG CHENANGO CLINTON COLUMBIA DELAWARE DUTCHESS ESSEX FRANKLIN	FULTON GREENE HAMILTON HERKIMER JEFFERSON LEWIS MONTGOMERY ONEIDA OTSEGO RENSSELAER	SARATOGA SCHENECTADY SCHOHARIE SCHUYLER STEUBEN ST. LAWRENCE TIOGA TOMPKINS ULSTER WARREN WASHINGTON	P. O. Box 688 Albany, NY 12201
BRONX ORANGE	PUTNAM ROCKLAND	SULLIVAN WESTCHESTER	P. O. Box 3000 White Plains, NY 10602
NEW YORK COUNTY with ZIP CODES 10001-10019 RICHMOND			P. O. Box 2058 Church Street Station New York, NY 10008
KINGS NEW YORK COUNTY with ZIP CODES 10020-10040 QUEENS			G. P. O. Box 5464 New York, NY 10087
NASSAU	SUFFOLK		P. O. Box 1866 Hicksville, NY 11802
CAYUGA CORTLAND LIVINGSTON MADISON	MONROE ONONDAGA ONTARIO ORLEANS	OSWEGO SENECA WAYNE YATES	P. O. Box 4777 Syracuse, NY 13221
ALLEGANY CATTARAUGUS	CHAUTAUQUA ERIE	GENESEE NIAGARA WYOMING	All filers in these counties except Schedule R filers (motor fuel retailers): P. O. Box 194 Buffalo, NY 14240 Schedule R filers in these counties must mail this return to: P. O. Box 4777 Syracuse, NY 13221
If you are a vendor located out-of-state			MAIL RETURN TO: P. O. Box 688 Albany, NY 12201

PHONE For forms or publications

from within New York State, call toll free 1-800-462-8100
from outside New York State, call 1-518-438-1073

For information

from within New York State, call toll free 1-800-342-3536
from outside New York State, call 1-518-438-8581

Telephone assistance is available from 8 a.m. to 5 p.m. Monday through Friday.

WRITE If you need to write, address your letter to:

New York State Tax Department
Taxpayer Assistance Bureau
W. A. Harriman Campus
Albany, New York 12227