New York State Department of Taxation and Finance

New York State and Local Sales and Use Tax Return

0290 **Part—Quarterly**

ST-809 (7/89)

M

Sales tax vendor identification number	Business telephone number ( )
Name	
DBA	
Street	
City, state, ZIP code	

Change of Business Information

If there have been any changes in your business' name, ID number, mailing address, business address, telephone number or owner/officer/responsible person information, complete Form DTF-95, *Change of Business Information*. If no form is enclosed, call 1 800 462-8100 (from out of state (518) 438-1073) to request one.

Use labeled form and return envelope for filing your return.

Use this form to report only transactions for the period **July 1, 1989 — July 31, 1989**

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 Gross sales and services (to nearest dollar)	B Taxable sales and services (to nearest dollar)	C Purchases subject to use tax (to nearest dollar)

1a.	Sales and use taxes *(see instructions)*	$	
b.	Credit for prepaid sales tax *(see instructions)*		
c.	Net tax due *(line 1a less line 1b)*		
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 1c 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 (⅓ of line 1a)		
c.	Credit for prepaid sales tax *(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:**

August 20, 1989

For office use only

* **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

PENALTY COMPUTATION

A. For failure to file a return on time, with **no tax due**, the penalty is **$50.00.**

B. For failure to file a return on time **with tax due,** the penalty is:

1-60 days late, 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

61 or more days late, 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 NOT participating in the New Jersey/New York or Connecticut/New York 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 FR filers (motor fuel and diesel motor fuel retailers):** P. O. Box 194 Buffalo, NY 14240 **Schedule FR filers in these counties must mail this return to:** P. O. Box 4777 Syracuse, NY 13221
If you are participating in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, or both, attach the appropriate schedule or schedules to your return			**MAIL RETURN TO:** **P.O. Box 688** **Albany, NY 12201**
If you are a vendor located out-of-state			**MAIL RETURN TO:** **P. O. Box 688** **Albany, NY 12201**

IF YOU NEED HELP. . .

PHONE

For forms or publications

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

For information

from within New York State, call toll free 1 800 CALL TAX (1 800 225-5829)
from outside New York State, call 518 438-8581

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

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