New York State Department of Taxation and Finance

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

ST-809
(4/95)
1195

Use this form to report transactions for the period **April 1, 1995** through **April 30, 1995, only.**

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

Change of Business Information

☐ Check here if you have changed your business location and have not previously notified us. Enter this new address in the space next to your preprinted address. You must report this or any other change (name, identification number, mailing address or owner/officer/responsible person information) on either Form DTF-95.1, found in the ST-809 Instructions, or Form DTF-95, *Change of Business Information.* To request Form DTF-95, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State call (518) 438-1073.

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 **May 20, 1995.**

Type of business

Check here if you are reporting sales tax on this return for more than one business location. ☐
If you checked this box and your identification number does not have a ***C*** suffix, attach a list of your locations.

Summary of Tax Due — Complete *Long Method* or *Short Method* section below, not both *(see instructions).*

Long Method

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)*	1a		
b Credit for prepaid sales tax *(see instructions)*	1b		
c Net tax due *(subtract line 1b from 1a)*			1c •
2a Credits not identified *(attachments required; see instructions)*	2a •		
b Advance payments *(including PrompTax payment)*	2b •		
c Add lines 2a and 2b			2c
3 Sales and use taxes due *(subtract line 2c from line 1c)*			3 •
4 Interest and penalties *(see instructions on back)*			4 •
5 Amount due *(add lines 3 and 4)* **Pay this amount**			5 •

Short Method

1a Comparable quarter of the prior year *(see instructions)**	1a •		
b Tax due *(1/3 of line 1a)*	1b		
c Credit for prepaid sales tax *(see instructions)*	1c		
d Net tax due *(subtract line 1c from line 1b)*			1d •
2a Credits *(attachments required)*	2a •		
b Advance payments *(including PrompTax payment)*	2b •		
c Add lines 2a and 2b			2c
3 Sales and use taxes due *(subtract line 2c from line 1d)*			3
4 Interest and penalties *(see instructions on back)*			4 •
5 Amount due *(add lines 3 and 4)* **Pay this amount**			5 •

— 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.

* **Adjustments:** Include on line 1a, "Short"

Locality	Adjustment
	$

For office use only

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

Return Addresses

If you are in the PrompTax program and do not participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, mail your return to:

NYS PROMPTAX-SALES TAX
P O BOX 1506
CHURCH STREET STATION
NEW YORK NY 10008-1506

If you participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement or you are located outside New York State or your place of business is located in the following counties, mail your return to:

Albany	Franklin	Orange	Steuben	
Broome	Fulton	Otsego	St. Lawrence	
Chemung	Greene	Putnam	Sullivan	
Chenango	Hamilton	Rensselaer	Tioga	
Clinton	Herkimer	Rockland	Tompkins	
Columbia	Jefferson	Saratoga	Ulster	
Delaware	Lewis	Schenectady	Warren	P O BOX 917
Dutchess	Montgomery	Schoharie	Washington	ALBANY NY 12201-0917
Essex	Oneida	Schuyler		

All other vendors whose place of business is located in any of the following counties mail your return to the address listed on the right.

New York Counties with ZIP codes 10001-10019				P O BOX 2058
Richmond				CHURCH STREET STATION
				NEW YORK NY 10008-2058
Bronx	Queens			
Kings	Westchester			
New York County with ZIP codes 10020-10285				G P O BOX 5464
				NEW YORK NY 10087-5464
Nassau	Suffolk			P O BOX 1866
				HICKSVILLE NY 11802-1866
Cayuga	Madison	Ontario	Seneca	
Cortland	Monroe	Orleans	Wayne	
Livingston	Onondaga	Oswego	Yates	P O BOX 4777
				SYRACUSE NY 13221-4777
Allegany	Chautauqua	Genesee	Wyoming	P O BOX 194
Cattaraugus	Erie	Niagara		BUFFALO NY 14240-0194

Need Help?

For forms or publications, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State, call (518) 438-1073.

For information, call the Business Tax Information Center toll free (from the continental U.S. only) 1 800 972-1233. You can also call toll free (from New York State only) 1 800 CALL TAX (1 800 225-5829). From areas outside New York State, call (518) 438-8581.

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

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 the information and assistance numbers listed above.

Hotline for the Hearing and Speech Impaired - If you have a hearing or speech impairment and have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll free (from the continental U.S.) 1 800 634-2110. Hours of operation are from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.