



# Seller's Report of Sales Tax Due on a Casual Sale

**ST-131**  
(11/15)

Use this form to report and remit sales tax on sales of taxable items. **Do not use** this form if you are required to register as a vendor with the New York State Tax Department or are reporting the sale of a motor vehicle, trailer, all-terrain vehicle, vessel, or snowmobile that must be registered with or titled by the New York State Department of Motor Vehicles.

Type or print clearly				For Tax Department use only	
Seller's name		Social security number		Tax jurisdiction code _____	
Seller's address (number and street or rural route)		Federal identification number (if any)		Location code _____	
City	County	State	ZIP code	Taxable sales _____	
				Sales tax _____	

- 1 Date item(s) was sold (see instructions) \_\_\_\_\_
- 2 Description of item(s) sold (see instructions) \_\_\_\_\_
- 3 Location where item(s) was sold or delivered, if different from address above (see instructions)

Number and street or rural route			
City	County	State	ZIP code

4 Amount subject to sales tax (see instructions) .....	<b>4</b>		
5 Tax rate (see instructions) .....	<b>5</b>		%
6 Tax due (multiply amount on line 4 by rate on line 5) .....	<b>6</b>		
7 Penalty and interest if you are filing or paying late (see instructions) .....	<b>7</b>		
8 Total amount due (add lines 6 and 7) .....	<b>8</b>		
9 Amount paid (enter your payment amount; this amount should match the amount due on line 8). Attach check or money order payable in U.S. funds to: <b>New York State Sales Tax</b> .....	<b>9</b>		

**Certification:** I certify that the above statements are true and correct, and I make these statements with the knowledge that willfully issuing a false or fraudulent document with the intent to evade tax may constitute a felony under New York State Tax Law, punishable by a substantial fine and a possible jail sentence. I also understand that the Tax Department is authorized to investigate the validity or the accuracy of any information entered on this document.

Seller's signature	Date	Telephone number of seller ( )	
Printed name of preparer (if other than seller)		Preparer's PTIN	
Preparer's address		Preparer's NYTPRIN	Excl. code
Preparer's signature (if other than seller)		Preparer's telephone number ( )	

Mail this report and remittance to:

**NYS TAX DEPARTMENT  
TDAB – CASUAL SALES UNIT  
W A HARRIMAN CAMPUS  
ALBANY NY 12227-0931**

See Publication 55, *Designated Private Delivery Services*, if not using U.S. Mail.

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