



Quarterly Schedule N-ATT For Part-Quarterly Filers



Taxes on Parking Services in New York City

Attach this form to Form ST-810.5, Quarterly Schedule N for Part - Quarterly Filers

Instructions

Vendor collection credit

The vendor collection credit does not apply to sales reported on this schedule. (These sales are transferred to Schedule N.)

Vendors who are required to collect tax on the services of parking, garaging, or storing motor vehicles in New York City must complete both Form ST-810.5, *Quarterly Schedule N for Part-Quarterly Filers*, and *Section A* or *Sections A* and *B* of Form ST-810.5-ATT, *Quarterly Schedule N-ATT for Part-Quarterly Filers*.

All exempt organizations and vendors whose facilities are located outside Manhattan must complete only *Section A*. Vendors conducting business in Manhattan must complete both Sections A and B.

A vendor who reports parking for more than five facilities in New York City must also report the required information for each additional facility at which the vendor provides parking. A vendor who needs additional space to report may make photocopies of this form or request forms by calling our Business Tax Information Center at 1 800 972-1233 (see Form ST-810 or its instructions for further assistance).

Enter the beginning and ending date of the period being reported. Print your name, address and identification number as they appear on your Form ST-810.

If you are an exempt organization, check the box indicated.

Section A — All New York City Locations

The maximum daily rate in Section A refers to the cost of keeping a vehicle in a garage all day, not including overnight, as on file with the New York City Department of Consumer Affairs (DCA). The licensed vehicle capacity refers to the capacity most recently authorized by DCA. The license number refers to the license the DCA issued for the facility. If the DCA has issued more than one license for the facility, the vendor must list every license number issued for that location. If the facility is **not required** to be licensed, this area should be left blank, but vehicle capacity **must** be shown.

Complete the information requested in *Section A* for every New York City facility you operate, regardless of whether the facility is located in or outside Manhattan. Check the box in *Section A* for each facility located **outside** Manhattan and fill in the complete address, including the ZIP code. If your facility is not required to be licensed by the DCA, complete the rest of Section A, and enter your vehicle capacity in the section marked *licensed vehicle capacity*.

Do **not** check the box in *Section A* for facilities located in Manhattan, but complete the remainder of *Section A* and all of *Section B*. *Section B* **must be completed for all Manhattan locations.**

Section B — Manhattan Locations

Complete Section B for all facilities located in Manhattan. The Manhattan parking receipts must be reported separately by category and tax rate for each facility (weekday sales, weekend sales, monthly sales, and Manhattan resident sales.)

A parking facility operator's regular sales and compensating use tax return will be deemed incomplete and not filed unless a properly completed Schedule N-Attachment (Form ST-810.5-ATT) is submitted for each separate parking facility. (Any address listed on Schedule N-Attachments must include a ZIP code.)

If the operator's return is deemed not filed, the statute of limitations that limits the time to assess additional sales and compensating use tax does not begin to run (that is, additional taxes for the period may be assessed at any time).

For **each** facility listed in Section A that is in Manhattan, complete the following:

Enter in column (a) the total weekday* receipts taxed at 181/4% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in column (a) for **that** location (facility).

Enter in column (b) the total weekend** receipts taxed at 181/4% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in column (b) for **that** location (facility).

Enter in column (c) the total monthly receipts for **nonresident** parking purchased on a monthly (or longer term) basis taxed at 181/4%. Add the three monthly totals and enter the quarterly totals on the total line in column (c) for **that** location (facility).

Enter in column (d) the total monthly receipts for **Manhattan resident** parking taxed at 101/4%. Add the three monthly totals and enter the quarterly totals on the total line in column (d) for **that** location (facility).

Enter in column (e) the total monthly receipts for parking purchased on a monthly (or longer term) basis taxed at 14% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in column (e) for that location (facility).

Enter in column (f) the total monthly receipts for Manhattan resident parking taxed at 6% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in column (f) for that location (facility).

The total receipts reported in column (a), (b), and (c) represent the Manhattan receipts subject to tax at $18\frac{1}{4}$ %. The Manhattan receipts subject to tax at $10\frac{1}{4}$ % are reported in column (d). The receipts reported in column (e), represent the Manhattan receipts subject to tax at 14%. The Manhattan receipts subject to tax at 6% are reported in column (f).

The combined totals for columns (a), (b), and (c) in Section B for all locations must equal the taxable receipts reported on Form ST-810.5, Part I, line 3, column(c).

The grand total from column (d) in Section B for all locations must equal the amount reported on Form ST-810.5, Part I, line 5, column (c).

The grand total from column (e) in Section B from all locations must equal the taxable receipts reported on Form ST-810.5, Part I, line 4, column (c).

The grand total from column (f) in Section B from all locations must equal the amount reported on Form ST-810.5, Part I, line 6, column (c).

- * Weekday means Monday through Friday.
- ** Weekend means Saturday and Sunday.

For the period		, 19	9 , through _	, 19	.
Print name, address, and identification number as shown on					pefore completing this schedule
Name			Identification number		
Street address			City	State	ZIP code
● ☐ Check here if you are an exempt organization. Comp		plete Se	ction A only.		
Section A		Section B			
Complete Section A for each facility you operate		Complete Section B for each facility located within Manhattan (to the nearest dollar)			
Location I • Check here if outside Manhattan		Month	(a) Weekday 181/4%	(b) Weekend 181/4%	(c) Monthly 181/4%
	nere if outside Mannattan	1	(a) Weekday 1674%	(b) Weekend 1674%	(C) MOHUITY 167476
Address	• ZIP code	2			
Maximum daily rate	•	3			
Licensed vehicle capacity	•	Total	•	•	•
License numbers for this facil	ity	Month	(d) Residents 101/4%	(e) Monthly 14%	(f) Residents 6%
•	•	1		, ,	
•	•	2			
•	•	3			
		Total	•	•	•
Location II • □ Chec	ck here if outside Manhattan	Month	(a) Weekday 181/4%	(b) Weekend 181/4%	(c) Monthly 181/4%
Address		1			
	• ZIP code	2			
Maximum daily rate	•	3			
Licensed vehicle capacity	•	Total		•	•
License numbers for this facility		Month	(d) Residents 101/4%	(e) Monthly 14%	(f) Residents 6%
•	•	1			
•	•	2			
•	•	3		•	•
		Total	•	•	
Location III ● ☐ Check here if outside Manhattan		Month	(a) Weekday 181/4%	(b) Weekend 181/4%	(c) Monthly 181/4%
		1	(a) Wookday 107470	(b) Weekend 107470	(b) Worlding 107470
Address	• ZIP code	2			
Maximum daily rate	•	3			
Licensed vehicle capacity	•	Total	•	•	•
License numbers for this facility		Month	(d) Residents 101/4%	(e) Monthly 14%	(f) Residents 6%
•	•	1	,	,	
•	•	2			
•	•	3			
		Total	•	•	•
Location IV ● ☐ Check here if outside Manhattan		Month	(a) Weekday 181/4%	(b) Weekend 181/4%	(c) Monthly 181/4%
Address		1			
	• ZIP code	2			
Maximum daily rate	•	3			
Licensed vehicle capacity	•	Total		•	•
License numbers for this facil	·	Month	(d) Residents 101/4%	(e) Monthly 14%	(f) Residents 6%
•	•	1			
•	•	2			
•	•	3	_		1
		Total	•	•	•