



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

**1199**

Use this form to report transactions for the period **January 1, 1999, through January 31, 1999, only.**

Sales tax vendor identification number  	Business telephone number (   ) (   )	Daytime telephone number (   ) (   )
Legal name		
<b>Place Label Here</b>		
DBA		
Street		
City, state, ZIP code		

**Change of Business Information**  
If your mailing address is incorrect on the label and you have not previously notified us, enter your correct mailing address next to your preprinted address. If your mail is forwarded to a paid preparer or you have any other change (name, ID#, physical address or owner/officer responsible person information) complete Form DTF-95.1s, *Change of Business Information for Vendors* found in the ST-809 instructions, or Form DTF-95, *Change of Business Information*. To request Form DTF-95, call the Business Tax Information Center (See telephone number listed to the left).

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 **February 20, 1999**. If you need the **instructions for Form ST-809**, call the Business Tax Information Center toll free 1 800 972-1233, or call 1 800 462-8100. From areas outside the U.S. and Canada, call (518) 485-6800.

Type of business	Check here if you are reporting sales tax on this return for more than one business location <input type="checkbox"/> If you checked this box and your identification number does not have a C suffix, attach a list of your locations.
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**Summary of Tax Due — Complete *Long Method* or *Short Method* section below, not both (see instructions).**

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

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

— 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.

*For office use only*

\* **Adjustments:** Include on line 1a. (See *Short Method Adjustment* on page 3 of the instructions.)

Locality                      Adjustment \$

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

## Where to mail your return and attachments

All vendors, except those who participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, including those located outside New York State, mail your completed return and attachments to:

NYS SALES TAX PROCESSING  
GENERAL POST OFFICE  
PO BOX 1208  
NEW YORK NY 10116-1208

Vendors who participate in the New Jersey/New York or Connecticut/New York Reciprocal Tax Agreement, mail your completed return and attachments to:

NYS SALES TAX PROCESSING  
RECIPROCAL TAX AGREEMENT  
GENERAL POST OFFICE  
PO BOX 1209  
NEW YORK NY 10116-1209

If you are using a private delivery service, address the return envelope to: The CHASE MANHATTAN BANK, NYS GOVERNMENT TAX PROCESSING, 12 CORPORATE WOODS BLVD., 4th FLOOR, ALBANY, NY 12211

For a listing of designated delivery services, see Technical Services Memorandum TSB-M-97(10)S.

## Need Help?

**Telephone Assistance** is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday. **For business tax information and forms**, call the Business Tax Information Center at 1 800 972-1233. **For general information**, call toll free 1 800 225-5829. **To order forms and publications**, call toll free 1 800 462-8100. **From areas outside the U.S. and outside Canada**, call (518) 485-6800.

**Fax-on-Demand Forms Ordering System** - Most forms are available by fax 24 hours a day, 7 days a week. Call toll free from the U.S. and Canada 1 800 748-3676. You must use a Touch Tone phone to order by fax. A fax code is used to identify each form.

**Internet Access** - <http://www.tax.state.ny.us>

Access our website for forms, publications, and information.

**Hotline for the Hearing and Speech Impaired** - If you 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 U.S. and Canada 1 800 634-2110. Assistance is available from 8:30 a.m. to 4:15 p.m. (eastern time), 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.

**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 numbers listed above.

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