2nd Quarter

New York State Department of Taxation and Finance

Taxes on Parking Services in New York City

Quarterly Schedule N-ATT for Part-Quarterly Filers

File as an attachment to Quarterly Schedule N

N-ATT

Include with *Quarterly Schedule N for Part-Quarterly Filers* (Form ST-810.5)

For tax period:
June 1, 2006, through August 31, 2006

Due date:
Wednesday, September 20, 2006 0607

Sales tax identification number	Legal name *(Print ID number and name as shown on Form ST-810 or* Certificate of Authority*)*

• ☐ If you are an **exempt organization,** check here and complete Section A only.

Section A	Section B
Complete Section A for each facility you operate. Any address listed must include a ZIP code.	**Complete Section B for each facility located within Manhattan. Attach additional photocopied sheets or forms, if needed.**

Location I • ☐ Check here if **outside** Manhattan

• Address

• ZIP code

Maximum daily rate •

Licensed vehicle capacity •

Enter below all license numbers for this facility

• •

• •

• •

Month	Column A **Weekday*** 18 3/8%	Column B **Weekend**** 18 3/8%	Column C **Monthly** 18 3/8%	Column D **Manhattan residents** 10 3/8%
1	.00	.00	.00	.00
2	.00	.00	.00	.00
3	.00	.00	.00	.00
Total	• .00	• .00	• .00	• .00

Location II • ☐ Check here if **outside** Manhattan

• Address

• ZIP code

Maximum daily rate •

Licensed vehicle capacity •

Enter below all license numbers for this facility

• •

• •

• •

Month	Column A **Weekday*** 18 3/8%	Column B **Weekend**** 18 3/8%	Column C **Monthly** 18 3/8%	Column D **Manhattan residents** 10 3/8%
1	.00	.00	.00	.00
2	.00	.00	.00	.00
3	.00	.00	.00	.00
Total	• .00	• .00	• .00	• .00

Location III • ☐ Check here if **outside** Manhattan

• Address

• ZIP code

Maximum daily rate •

Licensed vehicle capacity •

Enter below all license numbers for this facility

• •

• •

• •

Month	Column A **Weekday*** 18 3/8%	Column B **Weekend**** 18 3/8%	Column C **Monthly** 18 3/8%	Column D **Manhattan residents** 10 3/8%
1	.00	.00	.00	.00
2	.00	.00	.00	.00
3	.00	.00	.00	.00
Total	• .00	• .00	• .00	• .00

Location IV • ☐ Check here if **outside** Manhattan

• Address

• ZIP code

Maximum daily rate •

Licensed vehicle capacity •

Enter below all license numbers for this facility

• •

• •

• •

Month	Column A **Weekday*** 18 3/8%	Column B **Weekend**** 18 3/8%	Column C **Monthly** 18 3/8%	Column D **Manhattan residents** 10 3/8%
1	.00	.00	.00	.00
2	.00	.00	.00	.00
3	.00	.00	.00	.00
Total	• .00	• .00	• .00	• .00

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

Quarterly Schedule N-ATT for Part-Quarterly Filers Instructions

Taxes on Parking Services in New York City

Report transactions for the period June 1, 2006, through August 31, 2006.

Who must file

Complete Form ST-810.5-ATT, *Quarterly Schedule N-ATT for Part-Quarterly Filers*, and Form ST-810.5, *Quarterly Schedule N for Part-Quarterly Filers,* if you are required to collect tax on the services of parking, garaging, or storing of motor vehicles in New York City.

All exempt organizations and vendors whose facilities are located outside Manhattan must complete only *Section A* of Form ST-810.5-ATT. Vendors conducting business in Manhattan must complete both Sections A and B of Form ST-810.5-ATT.

Specific instructions

Identification number and name — Print the sales tax identification number and legal name as shown on Form ST-810, *New York State and Local Quarterly Sales and Use Tax Return for Part-Quarterly Filers*, or on your business's *Certificate of Authority* for sales and use tax.

Exempt organizations — Check the box beneath the identification number and name boxes, and complete *Section A*.

Other parking providers — There are spaces for four different locations to be listed in both Sections A and B. If you need to report for more than four facilities, photocopy this form or request additional copies (see *Need help?* below if you need to obtain forms).

Section A — All New York City locations

The *maximum daily rate* indicated 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 the 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, whether the facility is located inside or outside Manhattan. Check the box in *Section A* if your facility is 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* if your facility is located **in Manhattan**, but complete the remainder of *Section A* and all of *Section B.* You **must** complete *Section B* if your facility is located in Manhattan.

Section B — Manhattan locations

Complete *Section B* if your facility is located in Manhattan. You must report the Manhattan parking receipts separately by category and tax rate for each facility (weekday sales, weekend sales, monthly sales, and Manhattan resident sales).

Enter in Column A the total weekday (Monday through Friday) receipts taxed at 18⅜% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in Column A.

Enter in Column B the total weekend (Saturday and Sunday) receipts taxed at 18⅜% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in Column B.

Enter in Column C the total monthly receipts for **nonresident** parking purchased on a monthly (or longer term) basis taxed at 18⅜% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in Column C.

Enter in Column D the total monthly receipts for **Manhattan residents** parking taxed at 10⅜% for each month of the quarter. Add the three monthly totals and enter the quarterly total on the total line in Column D.

The total receipts reported in Columns A, B, and C represent the Manhattan receipts subject to tax at 18⅜%. Report the Manhattan receipts subject to tax at 10⅜% in Column D.

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 1, Column C, box 2.

The grand total from Column D in *Section B* for all locations must equal the amount reported on Form ST-810.5, Part 1, Column C, box 3.

Filing this schedule

File a completed Form ST-810.5-ATT with Form ST-810.5 and any other attachments to Form ST-810 by the due date. Please be sure to keep a copy of your completed return for your records.

A parking facility operator's regular sales and compensating use tax return will be deemed incomplete and not filed unless a properly completed Form ST-810.5-ATT is submitted for each separate parking facility. **Any address listed on Form ST-810.5-ATT 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).

Need help?

Internet access: *www.nystax.gov* (for information, forms, and publications)

Fax-on-demand forms: 1 800 748-3676

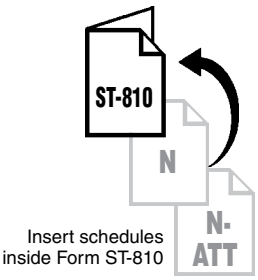
Telephone assistance is available from 8:00 A.M. to 5:00 P.M. (eastern time), Monday through Friday.

To order forms and publications:	1 800 462-8100
Sales Tax Information Center:	1 800 698-2909
From areas outside the U.S. and outside Canada:	(518) 485-6800
Hearing and speech impaired (telecommunications device for the deaf (TDD) callers only):	1 800 634-2110

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 1 800 972-1233.

Privacy notification

See Form ST-810-I, *Instructions for Form ST-810,* page 4.



Insert schedules inside Form ST-810