



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

Calendar for January 2009 showing tax period from January 1, 2009 to January 31, 2009.

Calendar for February 2009 showing the due date on Friday, February 20, 2009.

1109

Due date: Friday, February 20, 2009

You will be responsible for penalty and interest if your return is not postmarked by this date.

Form fields for Sales tax identification number, Legal name, DBA, Number and street, and City, state, ZIP code.

No tax due? If so, mark an X in the box to the right and enter your gross sales and services in box 1 of Step 1 below; enter none in boxes 2 and 3. You must file by the due date even if no tax is due. There is a \$50 penalty for late filing of a no-tax-due return. See 1 in instructions.

Has your address or business information changed? If so, you can update your address online. Visit our Web site at www.nystax.gov and see the change my address option for further instructions, or mark an X in the box to the right and enter new mailing address above. See 2 in instructions.

Complete Step 1 or Step 2, but not both. See 3 in instructions.

Step 1 of 3 Long method of calculating tax due

Table for Step 1 of 3 Long method of calculating tax due, including rows for gross sales, taxable sales, purchases, sales and use tax, credit for prepaid sales tax, net tax due, credits not identified, advance payments, and amount due.

Step 2 of 3 Short method of calculating tax due

Table for Step 2 of 3 Short method of calculating tax due, including rows for comparable quarter of previous year, tax due, credit for prepaid sales tax, net tax due, credits not identified, advance payments, and amount due.

\*Include short method adjustment in box 1 (see Short method adjustment on page 3 of instructions.)

For office use only

Locality Adjustment \$

**Step 3 of 3 Sign and mail this return**

Must be postmarked by **Friday, February 20, 2009**, to be considered filed on time.  
See below for complete mailing information.

*Please be sure to keep a completed copy for your records.*

<b>Third – party designee</b>	Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes <input type="checkbox"/> (complete the following) No <input type="checkbox"/>	
	Designee's name	Designee's phone number ( )
	Designee's e-mail address	

Personal identification number (PIN)

Printed name of taxpayer \_\_\_\_\_ Title \_\_\_\_\_

Taxpayer's e-mail address \_\_\_\_\_

Signature of taxpayer \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Daytime telephone (\_\_\_\_) \_\_\_\_\_

Printed name of preparer, if other than taxpayer \_\_\_\_\_ Preparer identification number

Preparer's address \_\_\_\_\_

Preparer's e-mail address \_\_\_\_\_

Signature of preparer, if other than taxpayer \_\_\_\_\_ Daytime telephone (\_\_\_\_) \_\_\_\_\_



**Where to mail your return and attachments**

*If using a private delivery service rather than the U.S. Postal Service, see 20 in instructions for the correct address.*

Do you participate in the New Jersey/New York or the Connecticut/New York reciprocal tax agreement?

No

Yes

**Address envelope to:**

NYS SALES TAX PROCESSING  
PO BOX 15172  
ALBANY NY 12212-5172

**Address envelope to:**

NYS SALES TAX PROCESSING  
RECIPROCAL TAX AGREEMENT  
PO BOX 15173  
ALBANY NY 12212-5173

Make check payable to **New York State Sales Tax.**

David Sample 100 Elm Street Albany, NY 12203	DATE <b>February 10, 2009</b>	2971
PAY TO THE ORDER OF <b>New York State Sales Tax</b>		\$ <b>X.XXX.XX</b>
(your payment amount)		DOLLARS
<b>First State Bank</b>		
00-0000000	ST-809	1/31/09

*David Sample*

Don't forget to write your sales tax ID#, **ST-809**, and **1/31/09**.

Don't forget to sign your check

**Need help?**

See Form ST-809-I, *Instructions for Form ST-809*.