	NEW	Department of Taxation and Finance					Annual ST-101				
2	YORK STATE	-	v York State and Jual Sales and U			Marcl	h 1, 20	Tax period)23 – Februar	y 29, 2024		
		AIII	iual Sales allu U	Se lax Netulli		Due: V	Vednes	sday, March 20,	2024		
Sales	tax identification nun	nber						iles Tax Web Fil his requirement.	e		
Legal name (Print ID number and legal name as it appears on the Certificate of Authority)						See Form ST-101-I, Instructions for Form ST-101.					
DBA (do	ing business as) name				Has	your ad		or business	A24		
Number	and street				Mark		he box if	the address			
City, sta	te, ZIP code							anged u have no taxable s			
					purch Step 2	ases, or	credits t enter no	o report for this per one in boxes 12, 13	iod, complete		
final ro busino any ta	eturn with the applic ess or change in sta ax collected on asset	able infor tus. The r ts that you	mation completed in Step 2 eturn should include the ta u sell. Mark an X in the box	siness, or change the form of your 2 below. You must file your final re x due from business operations to t if this is your final return.	turn w the la	vithin 2 ast day	0 days of bus	of the last day siness, as well	/ of as		
-				schedules? (Mark an X in the box.)							
				ete Form ST-101-ATT <i>(see</i> Are you					.00		
Step	,						1				
Step	1 Return summ (see instructions		1 Gross sales and ser	vices					.00		
			- 1a Nontavahle sales				1a		.00		
									.00		
-	0										
Step	2 Final return in	nformati	on (see instructions)								
		propriate 	box if your business has be								
	Sold Inse	olvent	Owner deceased	Dissolved 0	Other						
	in the ordinary cours	se of busi	ness, you must give each p	ousiness assets, including tangible prospective purchaser a copy of F t also provide us with the following	orm T	P-153,	Notic				
	Last day of business		Date of sale	Sale price		In w	hole	In pa			
	Name and address of pu	ırchaser									
	Name and address of bu	isiness									
	Location of property										
	Was sales tax collec	cted on ar	ny taxable items (furniture,	fixtures, etc.) included in the sale	?			Yes 🗌	No 🗌		
в	Business form cha	anged (for	r example, a sole proprieto	r to a partnership or a partnership	toa	ornora	tion)				
	In addition to filing a	i final retu		a new Certificate of Authority		Joipoie	luon)				
			-		Г		Fc	or office use only			
								.			
L											
				Proceed to Step 3, page 2							



Step 3 Calculate sales and use taxes (see instructions)		Column C Taxable sales and services	Column D Purchases subject to tax	Column E	Column F Sales and use tax (C + D) × E
Enter the total from Schedule FR, page 4, Step any) in box 2	6, box 18 (if			2	
Enter the total paper bag fee from Schedule E, box 1 (2	a	
Enter the sum of any totals from Schedules A, B, H, N		.00 4	.00	5	
Column A Taxing jurisdiction	Column B Jurisdiction code		00		
New York State only	NE 0021	.00	.00	4%	
Albany County	AL 0181	.00	.00	8%	
Allegany County	AL 0221	.00	.00	81/2%	
Broome County	BR 0321	.00	.00	8%	
Cattaraugus County (outside the following)	CA 0481	.00	.00	8%	
Olean (city)	OL 0441	.00	.00	8%	
Salamanca (city)	SA 0431	.00	.00	8%	
Cayuga County (outside the following)	CA 0511	.00	.00	8%	
Auburn (city)	AU 0561	.00	.00	8%	
Chautauqua County	CH 0651	.00	.00	8%	
Chemung County	CH 0711	.00	.00	8%	
Chenango County (outside the following)	CH 0861	.00	.00	8%	
Norwich (city)	NO 0831	.00	.00	8%	
Clinton County	CL 0921	.00	.00	8%	
Columbia County	CO 1021	.00	.00	8%	
Cortland County	CO 1021	.00	.00	8%	
Delaware County	DE 1221	.00	.00	8%	
Dutchess County	DU 1311	.00	.00	81/8% *	
	ER 1451	.00	.00	8 ³ / ₄ %	
Erie County					
Essex County	ES 1521	.00	.00	8% 8%	
Franklin County	FR 1621 FU 1791	.00	.00	8%	
Fulton County (outside the following)	GL 1741	.00	.00	8%	
Gloversville (city)	JO 1751				
Johnstown (city)		.00	.00	8%	
Genesee County	GE 1811	.00	.00	8%	
Greene County	GR 1911	.00	.00	8%	
Hamilton County	HA 2011	.00	.00	8%	
Herkimer County	HE 2121	.00	.00	81/4%	
Jefferson County	JE 2221	.00	.00	8%	
_ewis County	LE 2321	.00	.00	8%	
_ivingston County	LI 2411	.00	.00	8%	
Madison County (outside the following)	MA 2511	.00	.00	8%	
Oneida (city)	ON 2541	.00	.00	8%	
Monroe County	MO 2611	.00	.00	8%	
Montgomery County	MO 2781	.00	.00	8%	
Nassau County	NA 2811	.00	.00	8 5⁄8% *	
Niagara County	NI 2911	.00	.00	8%	
Oneida County (outside the following)	ON 3010	.00	.00	8¾%	
Rome (city)	RO 3015	.00	.00	8¾%	
Utica (city)	UT 3018	.00	.00	8¾%	
Onondaga County	ON 3121	.00	.00	8%	
Ontario County	ON 3211	.00	.00	71⁄2%	
Orange County	OR 3321	.00	.00	81%%*	
Orleans County	OR 3481	.00	.00	8%	
Oswego County (outside the following)	OS 3501	.00	.00	8%	
Oswego (city)	OS 3561	.00	.00	8%	
	6	7			3



Column A	Column B	Column C	Column D	C	olumn E	Column F
Taxing jurisdiction	Jurisdiction		 Purchases subject to tax 		ax rate =	Sales and use tax (C + D) × E
Otsego County	OT 3621	.00)	.00	8%	
Putnam County	PU 3731	.00)		31/8%*	
Rensselaer County	RE 3881	.00		.00	8%	
Rockland County	RO 3921	.00			33/8%*	
St. Lawrence County (outside the following)	ST 4091	.00		.00	8%	
Ogdensburg (city)	OG 4012	.00		.00	8%	
Saratoga County (outside the following)	SA 4111	.00		.00	7%	
Saratoga Springs (city)	SA 4131	.00		.00	7%	
Schenectady County	SC 4241	.00		.00	8%	
Schoharie County	SC 4321	.00		.00	8%	
Schuyler County	SC 4411	.00		.00	8%	
Seneca County	SE 4511	.00		.00	8%	
Steuben County	ST 4691	.00		.00	8%	
Suffolk County	SU 4711	.00			3 ⁵ / ₈ %*	
Sullivan County	SU 4711 SU 4821	.00		.00 0	8%	
					-	
Tioga County	TI 4921	.00		.00	8%	
Tompkins County (outside the following)	TO 5081	.00		.00	8%	
Ithaca (city)	IT 5021	.00		.00	8%	
Ulster County	UL 5111	.00		.00	8%	
Warren County (outside the following)	WA 5281	.00		.00	7%	
Glens Falls (city)	GL 5211	.00		.00	7%	
Washington County	WA 5311	.00		.00	7%	
Wayne County	WA 5421	.00		.00	8%	
Westchester County (outside the following)	WE 5581	.00			3 ³ /8 %*	
Mount Vernon (city)	MO 5521	.00)		31/8%*	
New Rochelle (city)	NE 6861	.00)		3 ³ /8 %*	
White Plains (city)	WH 6513	.00)		3 ³ /8 %*	
Yonkers (city)	YO 6511	.00)	.00 8	37⁄8%*	
Wyoming County	WY 5621	.00)	.00	8%	
Yates County	YA 5721	.00)	.00	8%	
New York City/State combined tax [New York City includes counties of Bronx, Kings (Brooklyn),						
New York (Manhattan), Queens, and Richmond (Staten Island)	NE 8081	.00		.00 8	3 ⁷ /8%*	
New York State/MCTD	NE 8061	.00		.00 4	3/8%*	
New York City - local tax only	NE 8091	.00)	.00	41⁄2%	
i		.00)	.00		
		.00)	.00		
Column subtotals from page 2, boxe	s 6, 7, and 8:) 10	.00	11	
STOP If box 14 is more than \$3,000, see instruction		12	13		14	
	olumn totals:	.00		.00		
Step 4 Calculate special taxes (see inst		Internal code	Column G Taxable receipts	Co	olumn H ax rate = S	Column J Special taxes du (G × H)
Passenger car rentals (outside the MCTD)		PA 0012		.00	12%	()
Passenger car rentals (outside the MCTD)		PA 0012 PA 0030			12%	
Passenger car rentals (within the MCTD)					6%	
Peer-to-peer car sharing (outside the MCTD)		PE 0015		.00		
Peer-to-peer car sharing (within the MCTD)	u and tala	PE 0035		.00	6%	
Information & entertainment services furnished via telephon	IN 7009		.00	5%		
Vapor products		VA 7060	Tatal		20%	
		Internal code	Column K	C	axes: 15a	Column M
Step 4A Calculate fees (see instructions)	M/A 0047	Number of items subject to fee	, p	ee due = er item	Fees due (K × L)	
Waste tire management fee		WA 0017			\$2.25	
				Iotal	fees: 15b	
		Total special taxes	s and fees (box 1	5a + hov	15c	



Page 4 of 4 ST-101 (2/2	24) Sales tax identified	cation number				A24	Annual		
Step 5 Other tax c	Interna	l code	code Column K Credit amount						
Credit for prepaid sales tax on cigarettes CR C8									
Overpayment being carried forward from a prior period C									
Advance payments (made with Form ST-330) A									
	T	otal tax credits, adva				16			
Step 6 Calculate ta	axes due	Add Sales and use tax taxes and fees (box 150 payments, and overpay	column total (box 14)) and subtract <i>Total</i> ; <i>ments</i> (box 16). Ente	to <i>Total special</i> tax credits, advanc r result in box 17.	e	Taxes due)		
Box 14 amount \$	+ Box 15c amount \$		Box 16 amount \$	=	= 17				
	vendor collection credit nterest (see instructions)	STOP amount of tax due, S	eturn after the due date an TOP! You are not eligible eligible, enter 0 in box 18	for the vendor collection					
7A Vendor collecti									
1 Enter the box 1	4 amount	\$							
2 Enter the amou	Int from Schedule E, box 1	\$							
3 Subtract line 2	from line 1		\$						
4 Enter the box 1	5c amount	\$							
	14								
			ψ						
-	Int from Schedule FR as I the schedule (if any).								
	nount as a positive number	\$							
	16								
					Ven	dor collection VE 7706	n credit		
	(multiply line 7 by 5% (.05))		\$		18	VL //00			
Enter the in	e 8 amount or \$200, which	ever is less, in box 16.							
OR Pay penalty and	Pe	Penalty and interest							
ZD Develop and inte	waat awa aalay latad ay tha d	manutin hav 47 Tava			19	19			
7B Penalty and inte	rest are calculated on the a	amount in box 17, Taxes	s aue.						
Step 8 Calculate to (see instructio			Make check or money order payable to New York State Sales Tax. Write on your check your sales tax identification number, ST-101, and FY 2024 .						
8A Amount due		ction credit? Subtract b interest? Add box 19 to			20				
8B Amount paid: Enter your payment amount. This amount should match your amount due in box 20.									
Step 9 Sign and ma Be sure to keep a complet	ail this return (see instruct ted copy for your records.		l by Wednesday, Ma complete mailing info		e conside	ered filed on t	ime.		
Do you wa	nt to allow another person to disc	cuss this return with the Tax	Dept? (see instruction	s) Yes 🗌 (co	mplete the	following) No			
Third – Designee's party	name	Designee's phone numbe ()				nal identification er (PIN)			
designee Designee's	Designee's email address								
Signature of Authorized	authorized person		Official title						
person Email addres	Email address of authorized person Telephone number ()								
Paid Firm's name (or y	Firm's name (or yours if self-employed)						N		
use	Signature of individual preparing this return Address City						State ZIP code		
only Email address of (see instr.)	individual preparing this return	Telephone number ()	lephone number Preparer's NYTPRIN)			YTPRIN Date			
Need help? See Form ST-101-I, Insti	ructions for Form ST-101.								

