



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

January 2006 Tax period January 1, 2006 - January 31, 2006

February 2006 calendar grid showing date 21 highlighted

1106

Due date: Tuesday, February 21, 2006. You will be responsible for penalty and interest if your return is not postmarked by this date.

Sales tax identification number, Legal name, DBA, Number and street, City, state, ZIP code

No tax due? If so, check 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, call the Business Tax Information Center (see Need help? on page 2) to update address information or check the box to the right and enter new mailing address on preprinted label 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: Long method of calculating tax due. Rows 1-12 including gross sales, taxable sales, purchases, sales tax, credit for prepaid sales tax, net tax due, credits, advance payments, and amount due.

Step 2 of 3 Short method of calculating tax due

Table for Step 2: Short method of calculating tax due. Rows 1-10 including comparable quarter of previous year, tax due, credit for prepaid sales tax, net tax due, credits, advance payments, and amount due.

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

Locality Adjustment \$

For office use only

Step 3 of 3 Sign and mail this return

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

Must be postmarked by **Tuesday, February 21, 2006**, to be considered filed on time. See below for complete mailing information.

Printed name of taxpayer _____ Title _____

Signature of taxpayer _____ Date _____ Daytime telephone () _____

Printed name of preparer, if other than taxpayer _____

Preparer's 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 19 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
JAF BUILDING
PO BOX 1208
NEW YORK NY 10116-1208

Address envelope to:

NYS SALES TAX PROCESSING
RECIPROCAL TAX AGREEMENT
JAF BUILDING
PO BOX 1209
NEW YORK NY 10116-1209

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

David Sample 100 Elm Street Albany, NY 12203	2971 DATE February 10, 2006
PAY TO THE ORDER OF New York State Sales Tax \$ X,XXX.XX	
(your payment amount) DOLLARS	
First State Bank	
00-0000000 ST-809 1/31/06	

David Sample

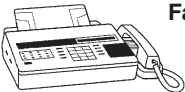
Don't forget to write your sales tax ID#, **ST-809**, and **1/31/06**.

Don't forget to sign your check.

Need help?



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



Fax-on-demand forms: Forms are available 24 hours a day, 7 days a week. 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
Business Tax Information Center: 1 800 972-1233
From areas outside the U.S. and outside Canada: (518) 485-6800



Hotline for the hearing and speech impaired:

If you have access to a telecommunications device for the deaf (TDD), contact us at 1 800 634-2110. 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 1 800 972-1233.