



NYC UNINCORPORATED BUSINESS TAX RETURN FOR INDIVIDUALS, ESTATES AND TRUSTS

DO NOT WRITE IN THIS SPACE - FOR OFFICIAL USE ONLY

2005

For CALENDAR YEAR 2005 or FISCAL YEAR beginning _____, 2005 and ending _____

Amended return [] Final return [] - Check box if you have ceased operations. Attach copy of your entire federal Form 1040 and statement showing disposition of business property.

Check "yes" if you claim any 9/11/01-related federal tax benefits (see inst.) [] YES

Check "yes" if electing books and records allocation (see inst.) [] YES

Form with fields: First name and initial, Last name, Business name, Business address, City and State, Zip Code, Business Telephone Number, Date business began.

Form with fields: INDIVIDUALS ENTER SOCIAL SECURITY NUMBER, ESTATES AND TRUSTS ENTER EMPLOYER IDENTIFICATION NUMBER, NEW YORK STATE SALES TAX ID NUMBER, BUSINESS CODE NUMBER.

SCHEDULE A Computation of Tax

BEGIN WITH SCHEDULE B ON PAGE 2. COMPLETE ALL OTHER SCHEDULES. TRANSFER APPLICABLE AMOUNTS TO SCHEDULE A.

Table with 3 columns: Line number, Description, and Amount. Includes rows for Business income, allocation percentages, deductions, and total remittance due.

Name _____

SSN / EIN _____

SCHEDULE B Computation of Total Income - IF ALLOCATING BY SEPARATE BOOKS AND RECORDS, ENTER THE ALLOCATED AMOUNTS

Part 1 Items of business income, gain, loss or deduction

- 1. Net profit (or loss) from business, farming or professions as reported for federal tax purposes from federal Schedule C, C-EZ or F (Form 1040) (see instructions) ● 1.
- 2. If entering income from more than one federal Schedule C, C-EZ or F (Form 1040), check this box. ● 2.
 Enter the number of Schedules C, C-EZ or F attached: ◆ _____
- 3. Gain (or loss) from sale of business personal property or business real property (attach federal Schedule D or Form 4797) (see instructions) ● 3.
- 4. Net amount of rental or royalty income from business personal property or business real property (attach federal Schedule E) (see instructions) ● 4.
- 5. Other business income (or loss) (attach schedule) (see instructions) ● 5.
- 6. Total federal income (or loss) (combine lines 1 through 5) ● 6.
- 7. Subtract net income or gain (or add net loss) from rental, sale or exchange of real property situated outside New York City, if included in line 3 or 4 above (attach schedule) (see instructions) 7.
- 8. Total income before New York City modifications (combine lines 6 and 7) 8.

Part 2 New York City modifications (see instructions for Schedule B, part 2)

ADDITIONS

- 9. All income taxes and Unincorporated Business Taxes 9.
- 10a. Sales and use tax credit 10a.
- 10b. Relocation credits 10b.
- 10c. Expenses related to exempt income 10c.
- 10d. Depreciation adjustments (attach Form NYC-399 and/or NYC-399Z) 10d.
- 10e. Real estate additions (see instructions) 10e.
- 11. Other additions (attach schedule) (see instructions) 11.
- 12. Total additions (add lines 9 through 11) ● 12.

SUBTRACTIONS

- 13. All income tax and Unincorporated Business Tax refunds (included in part 1) 13.
- 14. Sales and use tax refunds from vendors or NY State (included in part 1 and also included on page 1, Schedule A, line 18) 14.
- 15. Wages and salaries subject to federal jobs credit (attach federal Form 5884 or 8884) 15.
- 16. Depreciation adjustment (attach Form NYC-399 and/or NYC-399Z) 16.
- 17. Exempt income included in part 1 (attach schedule) 17.
- 18. 50% of dividends (see instructions) 18.
- 19. Real estate subtractions (see instructions) 19.
- 20. Other subtractions (attach schedule) (see instructions) 20.
- 21. Total subtractions (add lines 13 through 20) ● 21.
- 22. NYC modifications (combine lines 12 and 21) 22.

- 23. Total income (combine lines 8 and 22) (see instructions) 23.
- 24. Less: Charitable contributions (not to exceed 5% of line 23) (see instructions) 24.
- 25. Balance (line 23 less line 24) 25.
- 26. Investment income - (complete lines a through g below) (see instructions)
 - (a) Dividends from stocks held for investment 26a.
 - (b) Interest from investment capital (include non-exempt governmental obligations) (itemize on rider) 26b.
 - (c) Net capital gain (loss) from sales or exchanges of securities held for investment . 26c.
 - (d) Income from assets included on line 3 of Schedule D 26d.
 - (e) Add lines 26a through 26d inclusive 26e.
 - (f) Deductions directly or indirectly attributable to investment capital 26f.
 - (g) Interest on bank accounts included in income reported on line 26d 26g. _____
- 27a. Investment income (line 26e less line 26f) ● 27a.
- 27b. Investment income to be allocated (enter on pg 1, Sch A, line 7)(see instructions) ● 27b.
- 28. **BUSINESS INCOME** (line 25 less line 27b) (enter here and transfer amount to pg 1, Sch. A, line 1) .. 28.



Business Tax Credit Computation

- 1. If the amount on page 1, line 19, is \$1,800 or less, your credit on line 20 is the entire amount of tax on line 19. (NO TAX WILL BE DUE.)
- 2. If the amount on page 1, line 19, is \$3,200 or over, no credit is allowed. Enter "0" on line 20.
- 3. If the amount on page 1, line 19, is over \$1,800 but less than \$3,200, your credit is computed by the following formula:

$$\text{amount on pg. 1, line 19} \times \frac{(\$3,200 \text{ minus tax on line 19})}{\$1,400} = \text{your credit}$$

Name _____

SSN / EIN _____

ALLOCATION OF BUSINESS INCOME

Taxpayers who carry on business both inside and outside New York City should complete Schedule C, Parts 1, 2 and 3 (below). Attach separate schedule if allocating by separate books and records. See "Highlights of Recent Tax Law Changes for Unincorporated Businesses." On Schedule A, line 2, check method

used to allocate and enter percentage from Part 3, line 5 rounded to the nearest one hundredth of a percentage point. Taxpayers who do not carry on business both inside and outside New York City should omit Schedule C, Parts 1 and 2 (below), enter 100% on Part 3, line 5 and enter 100% on Schedule A, line 2.

SCHEDULE C Complete this schedule if business is carried on both inside and outside New York City

Part 1 List location of each place of business **INSIDE** New York City, nature of activities at each location (manufacturing, sales office, executive office, public warehouse, contractor, converter, etc.), and number of employees, their wages, salaries and duties at each location.

Complete Address	Rent	Nature of Activities	Number of Employees	Wages, Salaries, etc.	Duties
Total					

Part 2 List location of each place of business **OUTSIDE** New York City, nature of activities at each location (manufacturing, sales office, executive office, public warehouse, contractor, converter, etc.), and number of employees, their wages, salaries and duties at each location.

Complete Address	Rent	Nature of Activities	Number of Employees	Wages, Salaries, etc.	Duties
Total					

Part 3 Formula Basis Allocation of Income

DESCRIPTION OF ITEMS USED AS FACTORS	● COLUMN A - NEW YORK CITY	● COLUMN B - EVERYWHERE	● COLUMN C
1. Average value of the real and tangible personal property of the business (see instructions)			PERCENTAGE IN NEW YORK CITY (COLUMN A DIVIDED BY COLUMN B)
a. Business real property owned..... 1a.			
b. Business real property rented from others (rent x 8) 1b.			
c. Business tangible personal property owned..... 1c.			
d. Business tangible personal property rented from others (rent x 8) 1d.			
e. Total of lines 1a through 1d 1e.			%
2. Wages, salaries and other personal service compensation paid to employees during the year..... 2.			%
3a. Gross sales of merchandise or charges for services during the year..... 3a.			%
3b. Optional additional gross income factor for manufacturers (enter amount from line 3a, see instructions)... 3b.			%
4. Sum of percentages in column C 4.			%
5. BUSINESS ALLOCATION PERCENTAGE (divide total percentage (line 4) by 3 or actual number of percentages used if more or less than 3) (round to the nearest one hundredth of a percentage point and enter here and transfer to page 1, Schedule A, line 2) 5.			%
6. IS ANY PLACE OF BUSINESS LISTED IN PARTS 1 AND 2 LOCATED IN YOUR HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO			
7. DID YOU CLAIM A DEDUCTION FOR EXPENSES OF AN OFFICE IN YOUR HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO			

SCHEDULE D Investment Capital and Allocation and Cash Election

A DESCRIPTION OF INVESTMENT	B No. of Shares or Amount of Securities	C Average Value	D Liabilities Attributable to Investment Capital	E Net Average Value (column C minus column D)	F Issuer's Allocation Percentage	G Value Allocated to NYC (column E x column F)
LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)					%	
1. Totals (including items on rider)						
2. Investment allocation percentage (line 1G divided by line 1E, round to the nearest one hundredth of a percentage point)						%
3. Cash - (To treat cash as investment capital, you must include it on this line.)						
4. Investment capital						

Name _____

SSN / EIN _____

SCHEDULE E New York City Net Operating Loss Carryforward Deduction

COMPLETE A SEPARATE SCHEDULE FOR EACH LOSS YEAR. ATTACH A DETAILED SCHEDULE FOR EACH APPLICABLE LINE.

Table with 8 rows for entering allocated NYC net operating loss amount, previously absorbed amounts, and net operating loss deduction.

SCHEDULE F The following information must be entered for this return to be complete.

- 1. Nature of business or profession: _____
2. Did you file a New York City Unincorporated Business Tax Return for the following years: 2003 YES NO, 2004 YES NO
3. Enter home address: _____ Zip Code: _____
4. If business terminated during the current taxable year, state date terminated. (mm/dd/yy) | _____ | _____ | _____
5. Has the Internal Revenue Service or the New York State Department of Taxation and Finance increased or decreased any taxable income (loss) reported in any tax period, or are you currently being audited? YES NO
6. Has Form NYC-115 (Report of Federal/State Change in Taxable Income) been filed? YES NO
7. Did you calculate a depreciation deduction by the application of the federal Accelerated Cost Recovery System (ACRS) (see instructions)? YES NO
8. Were you a participant in a "Safe Harbor Leasing" transaction during the period covered by this return? YES NO

Table with 4 columns: Description, DATE, AMOUNT, TWELVE DIGIT TRANSACTION ID CODE. Rows include prepayments claimed on Schedule A, line 24.

CERTIFICATION

Certification box containing signature lines for taxpayer and preparer, and fields for Social Security Number, PTIN, and Employer Identification Number.

Attach copy of federal Form 1040, Schedule C or Schedule C-EZ. If this is a final return, attach an entire copy of federal Form 1040.

To receive proper credit, you must enter your correct Social Security Number or Employer Identification Number on your tax return and remittance.

Make remittance payable to the order of: NYC DEPARTMENT OF FINANCE. Payment must be made in U.S. dollars, drawn on a U.S. bank.

MAILING INSTRUCTIONS

RETURNS WITH REMITTANCES NYC DEPARTMENT OF FINANCE P.O. BOX 5040 KINGSTON, NY 12402-5040

RETURNS CLAIMING REFUNDS NYC DEPARTMENT OF FINANCE P.O. BOX 5050 KINGSTON, NY 12402-5050

ALL OTHER RETURNS NYC DEPARTMENT OF FINANCE P.O. BOX 5060 KINGSTON, NY 12402-5060

The due date for the calendar year 2005 is on or before April 17, 2006. For fiscal years beginning in 2005, file on or before the 15th day of the fourth month following the close of the fiscal year.