

COMBINED BUSINESS CORPORATION TAX RETURN

To be filed by C Corporations ONLY - All Subchapter S Corporations must file Form NYC-1, NYC-3L, NYC-4S or NYC-4SEZ

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Form NYC-2.5A
ent Amount

For	m NYC-2A - 2015 NAME OF DESIGNATED AGENT:	EIN	:	Page 2
SC	CHEDULE A - Computation of Balance Due or Over	payment - Continued		
24.	NYC rent deducted on federal tax return or NYC rent from S	Schedule E, part 1	24.	
25.	Federal Return Filed: 1120 1120 Consolidated 0	Other (Identify):		
26.	Gross receipts or sales (see instructions)		26.	
27.	Total assets (Schedule C, line 1, column D)		27.	
28.	Combined business allocation percentage (from Schedule F	, line 5) (if not allocating, enter 100%)	28.	%
29a.	. Is the designated agent making or has it made the irrevocab By making the election, each corporation in the commonly ow and the election will apply to any member that subsequently en See "Who must file a combined return" instructions	ned group will be bound by the election nters the group.	s 🗆 NO	
29b.	. If YES, enter the beginning and ending dates of the first year of	of election: Beginning Ending		
30.	Total number of combined group members (do not include the	ne designated agent)	30.	
	Total number of taxable combined group members (do not in	nclude the designated agent)	31.	
	signated agent's information Federal separate taxable income (see instructions)		32.	
33.				
34.				
35.		_		
36.	Unabsorbed net operating loss (UNOL) at the end of the bas			
			<i>'</i>	
	, ,	,		
38.	PNOLC subtraction allotment method (see instructions)	50%	10%	
	PNOLC subtraction allotment method (see instructions) OMPOSITION OF PREPAYMENTS SCHEDULE		10%	
	,			OUNT
C	OMPOSITION OF PREPAYMENTS SCHEDULE	DATE		OUNT
C (OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14	DATE		OUNT
A. B.	OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax	DATE		OUNT
A. B. C.	OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1)	DATE		OUNT
A. B. C.	OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2)	DATE		OUNT
A. B. C. D.	Payment with Notice of Estimated Tax Due (3)	DATE		OUNT
A. B. C. D. F.	OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT	DATE		OUNT
A. B. C. D. E. G.	OMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT Overpayment from preceding year credited to this year	DATE		OUNT
A. B. C. D. F. G. H.	Payment with Notice of Estimated Tax Due (3)	ELECTED OFFICER OF THE CORPORA	ATION	
A. B. C. D. F. G. H.	Payment with Notice of Estimated Tax Due (3)	ELECTED OFFICER OF THE CORPORA g rider, is, to the best of my knowledge and	ATION I belief, true, correct an	
A. B. C. D. F. G. H.	Payment with Notice of Estimated Tax Due (3)	ELECTED OFFICER OF THE CORPOR g rider, is, to the best of my knowledge and he preparer listed below. (See instructions)	ATION I belief, true, correct an	
A. B. C. D. E. F. G. H.	PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT	ELECTED OFFICER OF THE CORPORA g rider, is, to the best of my knowledge and the preparer listed below. (See instructions,	ATION I belief, true, correct an)YES m's email dress	d complete.
A. B. C. D. E. F. G. H.	PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT	ELECTED OFFICER OF THE CORPORA g rider, is, to the best of my knowledge and the preparer listed below. (See instructions,	ATION I belief, true, correct an)YES m's email dress	
A. B. C. D. E. F. G. H.	PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT	ELECTED OFFICER OF THE CORPORA g rider, is, to the best of my knowledge and he preparer listed below. (See instructions, Date Check if self-	ATION I belief, true, correct an)YES m's email dress Preparer's Social Sec	d complete.
A. B. C. D. E. F. G. H.	Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1)	ELECTED OFFICER OF THE CORPOR g rider, is, to the best of my knowledge and the preparer listed below. (See instructions) Date Check if self-employed Date Date	ATION I belief, true, correct an)YES m's email dress Preparer's Social Sec Firm's Employer Ic	d complete.
A. B. C. D. E. F. G. H.	PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1) Payment with Notice of Estimated Tax Due (2) Payment with Notice of Estimated Tax Due (3) Payment with extension, Form NYC-EXT	ELECTED OFFICER OF THE CORPORA g rider, is, to the best of my knowledge and he preparer listed below. (See instructions, Date Check if self-	ATION I belief, true, correct an)YES m's email dress Preparer's Social Sec Firm's Employer Ic	d complete.
A. B. C. D. E. F. G. H.	Mandatory first installment paid with preceding year's tax Payment with Declaration, Form NYC-400 (1)	ELECTED OFFICER OF THE CORPOR g rider, is, to the best of my knowledge and the preparer listed below. (See instructions) Date Check if self-employed Date Date	ATION I belief, true, correct an)YES m's email dress Preparer's Social Sec Firm's Employer Ic	d complete.

Attach copy of all pages of your federal tax return or pro forma federal tax return. The due date for the calendar year 2015 return is on or before March 15, 2016. For fiscal years beginning in 2015, file on or before the 15th day of the 3rd month following the close of the fiscal year.

ALL RETURNS EXCEPT REFUND RETURNS

NYC DEPARTMENT OF FINANCE BUSINESS CORPORATION TAX P.O. BOX 5564 BINGHAMTON, NY 13902-5564 REMITTANCES
PAY ONLINE WITH FORM NYC-200V
AT NYC.GOV/ESERVICES
OR

OR

Mail Payment and Form NYC-200V ONLY to:

NYC DEPARTMENT OF FINANCE
P.O. BOX 3933

NEW YORK, NY 10008-3933

RETURNS CLAIMING REFUNDS

NYC DEPARTMENT OF FINANCE BUSINESS CORPORATION TAX P.O. BOX 5563 BINGHAMTON, NY 13902-5563

SC	HEDULE B - (Computation of Tax on Combined Bus	DESIGNATED AGENT	TOTAL OF ALL AFFILIATES	INTERCORPORATE ELIMINATIONS	COMBINED GROUP TOTAL			
1a.	Federal consolid	lated taxable income (CTI) of New York City co	mbined group (see i	nstructions)	1a.				
lc.	Addback federal consolidated net operating loss deduction (NOLD)								
1d.		dividends paid deduction (DPD) of captive RE							
le.		ore federal NOLD, federal DRD, and disallowed							
lf.		tercorporate dividends (see instructions)	,	,					
lg.		ore New York City additions and subtractions (s							
2.	conduct of a trac included on line Any other income	nterest effectively connected with the de or business in the United States NOT 1g by alien corporations							
	effectively connec	ted with the conduct of a trade or business in s by alien corporations							
1.	Dividends not inc	luded on line 1g by non-alien corporations4.							
5.		al, state, municipal and other obligations not 1g by non-alien corporations5.							
6.	Income taxes paid to	the US or its possessions deducted on federal return6.							
7.		i, including MTA taxes and other business taxes deral return (see instructions; attach rider)7.							
3.	•	axes deducted on federal return (see instr.)8.							
).		tting to employment opportunity relocation BZ credit9.							
10.	•	ating to real estate tax escalation credit10.							
11.		ion and/or adjustments (attach Form NYC-399Z)11.							
12.	Payment for use	of intangibles12.							
13.	Domestic produc	tion activities deduction (see instructions)13.							
14.	Other additions	(see instructions; attach rider)14.							
15.	Total additions (add lines 1g through 14)15.							
16.	Gain on sale of cer	tain property acquired prior to 1/1/66 (see instr.)16.							
17.		refunds included in line 15 (see instructions) 17.							
18.	federal Form 58	ries subject to federal jobs credit (attach 84; see instructions)18.							
19.	or pre - 9/11/01 r	or adjustment calculated under pre-ACRS or ules (attach Form NYC-399 and/or instructions)19.							
20.	Other subtraction	ns (see instructions) (attach rider)20.							
21.	Total subtraction	s (add lines 16 through 20)			21.				
22.	Net modification	s to federal taxable income (subtract line 21 fro	om line 15)		22.				
23.	Subtraction modi	fication for qualified banks and other qualified len	ders (from Form NYC-	2.2, Schedule A, line 1;	see instructions) 23.				
24.	Combined entire	net income (ENI) (subtract line 23 from line 2.	2)		24.				
25.	Investment and	other exempt income (from Form NYC-2.1, Sci	hedule D, line 1)		25.				
26.	Subtract line 25	from line 24			26.				
27.	Excess interest de	eductions attributable to investment income and other	er exempt income (fro	m Form NYC-2.1, Sch	edule D, line 2) 27.				
28.	Combined Busin	ess income (add lines 26 and 27)			28.				
29.	Addback of incom	ne previously reported as investment income (from	Form NYC-2.1, Sched	dule F, line 6; if zero, e	enter 0; see instr.) 29.				
30.	Combined busines	ss income after addback (add lines 28 and 29)			30.				
	31.	Combined business allocation percentage (from	Schedule F, line 5; if n	ot allocating, enter 100°	%) 31.	%			
	32.	Allocated combined business income after ad		•					
	33.	Prior net operating loss conversion subtractio	n (from Form NYC-2.	3, Schedule C, line 4) 33.				
	34.	Subtract line 33 from line 32			34.				
	35.	Net operating loss carryback deduction (attack	,						
	36.	Combined business income base (subtract line 35	*						
	37.	Tax rate (see instructions)			37.	%			
	38.	Tax on combined business income base (muland enter here and on Schedule A, line 1)			38.				



IAI	•

ille Co.	ioniation of Aggiogato of Foucial	Separate Taxable to Federal Consolidated	Tuxubic income (011)	(occ matruotions)
ITEM	Λ.	A IEMBER NAME	B MEMBER EIN	C OWNERSHIP PERCENTAGE
Α				%
В				%
С				%
D				%
E				%
F				%
G				%
Н				%
ı				%
J				%
K				%
L				%
М				%
N				%
0				%
Р				%
	D	_	F	G
ITEM	IF PART OF A FEDERAL CONSOLIDATED GROUP, MARK AN X IN THE BOX	E FEDERAL FORM FILED	EIN OF PARENT OF FEDERAL CONSOLIDATED RETURN	FEDERAL SEPARATE TAXABLE INCOME
_	GROUP, MARK AN X IN THE BOX		CONSOLIDATED HETOTIK	TAXABLE INCOME
A				
В				
С				
D				
E				
F				
G				
Н				
I				
J				
К				
L				
М				
N				
0				
Р				
1. Aç	garagete of federal senerate toyable inco	me (add amounts in column G)	4	1
		easury Regulations section 1.1502.12		1
		me for consolidated purposes (combine lines 1 and 2)		
''8		application of Treasury Regulations section 1.1502.1		
	-	required under IRC to arrive at federal CTI of	-	
	New York City combined g	roup		
	6. Federal CTI of New York C	City combined group (combine lines 3, 4 and 5)	6.	
	Certain items reported on line			
	_	ntercompany income, expense, gain or loss		
		ain		
		ntributions deduction		
	iv. Consolidated inc section	1201 1151 1055	IV.	Í.

SCHEDULE D - Computation of Combined Investment Capital for the Current Year (see instructions)									
	A Average fair market value as reported	B Liabilities attributable to column A amount		C Net average value (column A - column					
 Total combined capital that generates income claimed to not be allocable to New York under the U.S. Constitution (from Form NYC-2.1, Schedule E, line 1) 			1.						
2. Total of stocks actually held for more than one year (from Form NYC-2.1, Schedule E, line 2)			2.						
3. Total of stocks presumed held for more than one year (from Form NYC-2.1, Schedule E, line 3)			3.						
4. Total combined investment capital for the current year here and on Schedule C, line 8; if zero or less, enter 0)			4.						

Addback of capital previously reported as investment capital

5. Total of stocks previously presumed held for more than one year, but did not meet the holding period (from Form NYC-2.1, Schedule F, line 1; enter here and on Schedule C, line 10)......

Average fair market value as reported		Liabilities attributable to column A amount			Net average valu (column A - colum	
				5.		



Form NYC-2A - 2015	NAME OF DESIGNATED AGENT:	EIN:	Page 6

SCHEDULE E - Location of Places of Business Inside and Outside New York City

Include on this schedule all information for the designated agent plus the information for the affiliated companies from their Form NYC-2A/BC.

Part 1 - List location of, and rent paid or payable, if any, for 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. (Attach rider if necessary.)

Complete	e Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET							
CITY	STATE	ZIP	-				
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP	_				
NUMBER AND STREET							
CITY	STATE	ZIP	_				

Part 2 - List location of, and rent paid or payable, if any, for 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. (Attach rider if necessary)

Complete Addre	ss		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET	1						
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
Total							



эспі	EDULE F - Computation of Com	A	B	C	В	E
		Designated	Total of	Intercorporate	D Combined group	Combined group Everywhere total
10	Deal estate award	Agent	all affiliates	eliminations	NYC total (A + B - C)	(A + B - C)
1a.	Real estate owned					
	,					
1a(B). 1b.	Everywhere	oo instructions) (att	ach ridar)			
		ee msuuchons) (atta	acii ridei)			
` ,	,					
1b(B).	Everywhere					
1c.	Inventories owned					
1c(A).	New York City					
1c(B).	•					
1d.	Tangible personal property owned (see instructions)		I		
1d(A).	New York City					
1d(B).	Everywhere					
1e.	Tangible personal property rented - m	nultiply by 8 (see inst	tr., attach rider)			
1e(A).	New York City					
1e(B).	Everywhere					
1f(A).	Total Property New York City (add colu	mn D, lines 1a(A) thr	ough 1e(A))			
1f(B).	Total Property Everywhere (add column	n E, lines 1a(B) throu	ıgh 1e(B))			
1g.	Percentage in New York City (divide lin	ne 1f(A), column D by	line 1f(B), column E)			%
1h.	Multiply line 1g by 10					
2a(A).	New York City receipts (from Form NY	C-2.5A, line 54, colun	nn D)			
2a(B).	Everywhere receipts (from From NYC-	2.5A, line 54, column	E)			
2b.	Percentage in New York City (divide line	2a(A), column D by lir	ne 2a(B), column E)			%
2c.	Multiply line 2b by 80					
3.	Wages, salaries and other compensation	of employees, except	t general executive office	cers (see instructions)		
3a(A).	New York City					
3a(B).	Everywhere					
3b.	Percentage in New York City (divide line	e 3a(A), column D by	line 3a(B), column E).			%
3c.	Multiply line 3b by 10					
Sum d	of Weighted Factors					
4.	Add lines 1h, 2c and 3c					
	Business Allocation Percei	ntage				
	5. Divide line 4 by 100 i	f no factors are missi	ing. If a factor is miss	ing, divide line 4 by th	e total weights of	
	the factors present. E This is your business			t one hundredth of a pe	ercentage point.	%



Forn	m NYC-2A - 2015 NAME OF DESIGNATED AGENT: EIN:	Page 8				
SC	CHEDULE G - Additional Required Information					
1.	List all significant business activities in NYC and everywhere (see instructions; if necessary, attach list)					
2.	Enter your Secondary Business Code (see instructions)					
3.	Trade name of designated agent corporation, if different from name entered on page 1					
4.	Is the designated agent corporation included in a consolidated federal return?	s 🗌 NO				
	If "YES", give parent's name: EIN:					
5.	Is any member corporation also a member of a controlled group of corporations as defined in IRC section 1563, disregarding any exclusion by reason of paragraph (b)(2) of that section?	s 🗆 no				
	If "YES", give common parent corporation's name EIN:					
6.	Has the Internal Revenue Service or the New York State Department of Taxation and Finance corrected any taxable income or other tax base reported in a prior year, for the combined group, or any variation of the combined group or any member corporation or are there any of the same currently under audit?	s 🗌 no				
	If "YES", Internal Revenue Service State period(s): Beg.: End.:	MDDYY				
	by whom?					
	MMDDYY M					
7.	If "YES" to question 6, has Form(s) NYC-3360 (Report of Federal/State Change in Tax Base) been filed? (see instructions) YES	s U NO				
8.	Did any member corporation make any payments treated as interest in the computation of business income to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock? If "YES", complete the following (if more than one, attach separate sheet).	s 🗌 no				
	Shareholder's name:					
	Interest paid Total Indebtedness to Total to shareholder: shareholder described above: interest paid:					
9.	Was any member corporation a member of a partnership or joint venture during the tax year?					
10.						
	(including a leasehold interest) located in NYC or a controlling interest in an entity owning such real property?					
11a.	If "YES" to question 10, attach a schedule of such property, indicating owning corporation, the nature of the interest and including the street address, borough, block and lot number.					
11b.	b. Was any NYC real property (including a leasehold interest) or controlling interest in an entity owning NYC real property acquired or transferred with or without consideration?					
11c.	Was there a partial or complete liquidation of the owning corporation?	s 🗌 NO				
11d.	Was 50% or more of the owning corporation's ownership transferred during the tax year, over a three-year period or according to a plan? 🗌 YES	s 🗌 NO				
12.	If "YES" to questions 11b, 11c or 11d, was a Real Property Transfer Tax Return (Form NYC-RPT) filed?	s 🗌 NO				
13.	If "NO" to question 12, explain:					
14.	4. Does any member corporation pay rent greater than \$200,000 for any premises in NYC in the borough of Manhattan south of 96th Street for the purpose of carrying on any trade, business, profession, vocation or commercial activity?					
15.	15. If "YES" to question 14, were all required Commercial Rent Tax Returns filed?					
	Please enter Employer Identification Number which was used on the Commercial Rent Tax Return:					
	16 Are you claiming an exception to the related member expense addhack under Administrative Code section 11-652(8)(n)(2)(ii)?	s 🗌 NO				
	If yes, enter applicable exception and amount of royalty payments					
	EXCEPTION AMOUN'	Г				

SC	HEDULE	H - Determination of Tax Rate					
A.	Enter the tax rate computed or used below (see instructions)		%				
В.	Enter the line number of the tax rate computed or used below						
C.	Enter your combined unallocated business income from Schedule B, line 30						
D.	Enter your combined allocated business income from Schedule B, line 32						
E.	Are you a	Qualified Manufacturing Corporation (see instructions)	E.	YES NO			
Tax Rate Computation For Business Corporations Not Specified Below (see instructions)							
1.		ed unallocated business income (Schedule B, line 30) is less than \$2M and combined business income (Schedule B, line 32) is less than \$1M.	6.50%				
2.		ed unallocated business income (Schedule B, line 30) is equal to or greater (regardless of the amount of combined allocated business income)	8.85%				
3.		ed allocated business income (Schedule B, line 32) is equal to or greater M (regardless of the amount of combined unallocated business income)	8.85%				
4.	than \$2M	ed unallocated business income (Schedule B, line 30) is equal to or greater but less than \$3M and combined allocated business income (Schedule B, less than \$1M, use unallocated formula	$6.50\% + (2.35\% \text{ X} \frac{\text{line } 30 - 2,000,000}{1,000,000}) = \frac{\%}{1,000,000}$				
5.	combined	ed unallocated business income (Schedule B, line 30) is less than \$2M and allocated business income (Schedule B, line 32) is equal to or greater but less than \$1.5M, use allocated formula	6.50% + (2.35% X line 32 - 1,000,000) =%				
than \$2M <i>line 32)</i> is		ed unallocated business income (Schedule B, line 30) is equal to or greater but less than \$3M and combined allocated business income (Schedule B, equal to or greater than \$1M but less than \$1.5M, compute tax rates using ulas. Use the greater of the two computed tax rates.	$6.50\% + (2.35\% \times \frac{\text{line } 30 - 2,000,000}{1,000,000}) = \underline{\hspace{1cm}}^{\%}$ $6.50\% + (2.35\% \times \frac{\text{line } 32 - 1,000,000}{500,000}) = \underline{\hspace{1cm}}^{\%}$				
			Enter the greater of the two computed tax rates: %				
Ta	ax Rate C	omputation For Qualified Manufacturing Corporations (see	instructions)				
7.	If combined unallocated business income (Schedule B, line 30) is less than \$20M and combined allocated business income (Schedule B, line 32) is less than \$10M		4.425%				
8.		ed unallocated business income (Schedule B, line 30) is equal to or greater If (regardless of the amount of combined allocated business income)	8.85%				
9.	If combined allocated business income (Schedule B, line 32) is equal to or greater than \$20M (regardless of the amount of combined unallocated business income)		8.85%				
10	If combined unallocated business income (Schedule B, line 30) is equal to or greater than \$20M but less than \$40M and combined allocated business income (Schedule B, line 32) is less than \$10M, use unallocated formula		$4.425\% + (4.425\% \text{ X } \frac{\text{line } 30 - 20,000,000}{20,000,000}) = \frac{\%}{20,000,000}$				
11.	If combined unallocated business income (Schedule B, line 30) is less than \$20M and combined allocated business income (Schedule B, line 32) is equal to or greater than \$10M but less than \$20M, use allocated formula		$4.425\% + (4.425\% \text{ X } \frac{\text{line } 32 - 10,000,000}{10,000,000}) =$				
		12. If combined unallocated business income (Schedule B, line 30) is equal to or greater than \$20M but less than \$40M and combined allocated business income (Schedule B, line 32) is equal to or greater than \$10M but less than \$20M, compute tax rates using both formulas. Use the greater of the two computed tax rates		$\frac{e \ 30 - 20,000,000}{20,000,000}) = \frac{\%}{10,000,000}$ $\frac{e \ 32 - 10,000,000}{10,000,000}) = \frac{\%}{10,000,000}$			
			Enter the greater of the two computed tax rates: %				
	Tax Rate Computation For Certain Financial Corporations (see instructions)						
		13. Financial Corporations as defined in Administrative Code Section 11-654(1)(e)(1)(i)		9.00%			