

2016 **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

			For CALENDAR	YEAR 2016 or FISCAL Y	/EAR beginnii	ng	20	16 and endi	ng	
		Name				Name				
		In care of					Employer Iden	tification Num	ber	-
		Address (number and street)				Address		•		.
					(Change		L R	п. п. п. п.	
		City and State		Zip Code	Country (if no	ot US)	Business Code	Number as p	per federal return	
_		Business telephone number	Tax	payer email address:						
		State or country of organization	Date	e organized			2-character sp	ecial condition	a code	
		Date business began in NYC	Final Return	If final return, date bu	siness ended in	NYC	if applicable (·	
	IECK ALL AT APPLY	Special short period return	52/53-week tax	able year	Pro-forma fede	ral return attache	d	Claim any 9	9/11/01-related federal tax b	benefits
				ended return is to report heck the appropriate box:	IRS chang		Date of Final Determination			
		Federal form filed: 1120	1120C	1120F	1120-H	o	ther/None			
S	CHEDULE	A - Computation of Bala	nce Due or O	verpayment					Payment Amount	
	A. Paymen	t Amount being paid electron	nically with this r	eturn				A.		
1.	Tax on busin	ness income base (from Schedule E	3, line 13)					1		
2.	Tax on capita	al base (from Schedule C, line 9; M	laximum Tax is \$10	0,000,000)				2.		
3.	Minimum tax	 (see instructions) - NYC Gross F 	Receipts:					3.		
4.	Tax (enter th	ne amount from line 1, 2 or 3, which	ever is largest)					4.		
5.	Total prepay	ments (from Composition of Prepay	ments Schedule,	page 3, line G)				5.		
6.	Balance due	e (subtract line 5 from line 4)						6.		
7.	Overpaymer	nt (subtract line 4 from line 5)						7.		
8a.	Interest (see	e instructions)			8a.					
8b.	Additional ch	narges (see instructions)			8b.					
8c.	Penalty for u	underpayment of estimated tax (atta	ach Form NYC-222	?)	8c.					
9.	Total of lines	8a, 8b and 8c						9.		
10.	Net overpay	ment (subtract line 9 from line 7)						10.		
11.	Amount of lin	ne 10 to be: a. Refunded - 🗌 D	Direct deposit - fill of	ut line 11c OR 🗌 F	Paper check			11a		
		b. Credited to 2017	estimated tax					11b		
11c.	Routing		Account				Checking			
	Number:		Number:			Account Type	Savings			
12.	TOTAL REN	IITTANCE DUE. (see instructions)						12.		
13.	NYC rent de	ducted on federal tax return (see ir	structions)					13.		
14.	Gross receip	ots or sales from federal return						14.		
15.	Total assets	from federal return						15.		
		CERTIFI	CATION OF A	N ELECTED OFF	ICER OF	THE CORF	PORATION			
	hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete. authorize the Dept. of Finance to discuss this return with the preparer listed below. <i>(See instructions)</i> YES									
SIGN HERE	Signature of officer		Title		Date		Firm's emai address	I		
Γ								Preparer's S	Social Security Number of	or PTIN
USE ON	Preparer's signature		Preparer's printed name		Check if employe					
PREPARER'S USE ONLY								Firm's Em	ployer Identification N	lumber
PREPA	▲ Firm's nam	ne (or yours, if self-employed)	▲ Address				Zip Code			

ATTACH COPY OF YOUR FEDERAL RETURN. SEE PAGE 3 FOR PAYMENT AND MAILING INSTRUCTIONS NYC-2S - 2016 - Rev. 07.12.2017

Form	NYC-2S - 2016	NAME:			EIN:			Page 2
SC	HEDULE B - Co	omputation of Tax	x on Business Incom	e Base				
1.	Federal taxable in	ncome (FTI) before	net operating loss (NOL)) and special deduct	ions <i>(see instructions)</i> . 1			
2.	Interest on federal	l, state, municipal and	d other obligations not inc	luded on line 1	2			
3.	Income taxes paid to the US or its possessions deducted on federal return							
4.	NYS Franchise Tax	, including MTA taxes	and other business taxes d	educted on federal retu	urn <i>(see inst; attach rider)</i> . 4	·		
5.	•		•	,	5			
6.	ACRS depreciation	on and/or adjustmer	nts (attach Form NYC-39	99 and/or NYC-399Z)6	•		
7.		•	,		7			
8.			•	,		·		
9.			lated under pre-ACRS or		attach Form NYC-399 9	_		
10.								
11.								
12.	Tax rate (see insi	tructions)						
13.	Tax on business	income base (multip	oly line 11 by line 12 and	enter here and on S	Schedule A, line 1) 13			
		-	x on Capital Base		<i>,</i> , ,			
		-	lumn C. <i>Check one. (Atta</i>	ach detailed schedu	le.)			
_		- Semi-annually	- Quarterly	COLUMN A Beginning of Year	COLUMN B End of Year			
<u> </u>	Monthly	- Weekly	Daily	Beginning of Year	End of Year		Average Va	ue
						1.		
2.	Real property and r	marketable securities	included on line 1			2.		
3.	Subtract line 2 from	1 line 1				3.		
4.	Real property and	marketable securitie	es at fair market value .			4.		
5.	Adjusted total asse	ets (add lines 3 and 4	!)	1	- I	5.		
6.	Total liabilities (see	instructions)				6.		
7.	Net business capita	al <i>(subtract line 6, col</i>	lumn C, from line 5, colum	nn C)		7.		
Con	nputation of tax o	on capital base:						
		·		A Business	в Tax		с Tax on	
				Capital	Rate		Business Capita	ıl Base
8a.	At tax rate 0.15%		8a.		X 0.0015	8a.		
8b.	At tax rate 0.04%,	enter borough, block a	and lot numbers:					
	Boro Block		ot 8b.		X 0.0004	8b.		
9.	Tax on capital base (add lines 8a and 8b ar	nd subtract \$10,000; if zero c	or less, enter 0 here and	d on Schedule A, line 2)	9.		
SC	HEDULE D - Ac	ditional Require	d Information					
1.	List all significant b	ousiness activities in	NYC and everywhere (see	e instructions; if neces	ssary, attach list)			
2.	, 0	, ,			uding a leasehold interest)			NO
3a.	If "YES" to question borough, block and		e of such property, indicatin	ng the nature of the int	erest and including the stre	et addre	SS,	
3b.	acquired or transfe	erred with or without of	consideration?	-	entity owning NYC real pr			🗌 NO
4.					ough of Manhattan south c activity?			🗌 NO
5.							YES	NO
	•		Imber which was used on					
6.	Did this corporation of	carry out any commerc	ial banking business (as defi	ned by Section 11-640(b	b) of the Ad. Code) during this	s filing per	riod? YES	NO



SC	SCHEDULE E - DETERMINATION OF TAX RATE					
Α.	Enter the tax rate computed or used below (see instructions) A.	%				
в.	Enter the line number of the tax rate computed or used below (see instructions)					
C.	Enter your business income from Schedule B, line 11 C.					
D.	Enter an X in the box if you are a Qualified Manufacturing CompanyD.					
Т	TAY DATE COMPLITATION FOR RUSINESS CORDORATIONS NOT SPECIFIED RELOW (see instructions)					

		· · · · · · · · · · · · · · · · · · ·
1.	If business income (Schedule B, line 11) is less than \$1M.	6.50%
2.	If business income <i>(Schedule B, line 11)</i> is equal to or greater than \$1M but less than \$1.5M	$6.50\% + (2.35\% X \frac{\text{line } 11 - 1,000,000}{500,000}) =\%$
3.	If business income (Schedule B, line 11) is equal to or greater than \$1.5M	8.85%

TAX RATE COMPUTATION FOR QUALIFIED MANUFACTURING CORPORATIONS (see instructions)

4.	If business income (Schedule B, line 11) is less than \$10M	4.425%
5.	If business income <i>(Schedule B, line 11)</i> is equal to or greater than \$10M but less than \$20M	$4.425\% + (4.425\% X \frac{\text{line } 11 - 10,000,000}{10,000,000}) =\%$
6.	If business income (Schedule B, line 11) is equal to or greater than \$20M	8.85%

COMPOSITION OF PREPAYMENTS SCHEDULE				
PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 5	DATE	AMOUNT		
A. Mandatory First Installment				
B. Payment with Declaration, Form NYC-400				
C. Payment with Notice of Estimated Tax Due				
D. Payment with Notice of Estimated Tax Due				
E. Payment with Extension, Form NYC-EXT				
F. Overpayment from preceding year credited to this year				
G. TOTAL of A through F (enter on Schedule A, line 5)				

MAILING INSTRUCTIONS

Attach copy of all pages of your federal tax return or pro forma federal tax return. The due date for the calendar year 2016 return is on or before April 18, 2017. For fiscal years beginning in 2016, file on or before the 15th day of the 4th month following the close of the fiscal year.

REMITTANCES ALL RETURNS EXCEPT **PAY ONLINE WITH FORM NYC-200V REFUND RETURNS** REFUNDS AT NYC.GOV/ESERVICES OR NYC DEPARTMENT OF FINANCE Mail Payment and Form NYC-200V ONLY to: BUSINESS CORPORATION TAX NYC DEPARTMENT OF FINANCE P.O. BOX 5564

BINGHAMTON, NY 13902-5564

P.O. BOX 3933 NEW YORK, NY 10008-3933

RETURNS CLAIMING

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



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