

To be filed by S Corporations only. All C Corporations must file Form NYC-2, NYC-2S or NYC-2A

For CALENDAR YEAR 2020 or FISCAL YEAR beginning

2020 and ending

Name Name Change
 In Care Of
 Address (number and street) Address Change
 City and State Zip Code Country (if not US)
 Business Telephone Number Date business began in NYC

Taxpayer's Email Address:
 EMPLOYER IDENTIFICATION NUMBER
 BUSINESS CODE NUMBER AS PER FEDERAL RETURN

CHECK ALL THAT APPLY

Final return - Check this box if you have ceased operations in NYC
 Special short period return (See Instr.)
 Amended return If the purpose of the amended return is to report a federal or state change, check the appropriate box:
 Filing a 52- 53-week taxable year
 Enter 2-character special condition code, if applicable (see inst.)
 IRS change
 NYS change
 Date of Final Determination

SCHEDULE A Computation of Tax BEGIN WITH SCHEDULES B, LINE 6 ON PAGE 2. TRANSFER APPLICABLE AMOUNT TO SCHEDULE A.

A. Payment		Amount being paid electronically with this return		Payment Amount	
1.	Net income (from Schedule B, line 6)	1.	<input type="text"/>	X .0885	1.
2.	Minimum tax (See instructions) - NYC Gross Receipts:	2.	<input type="text"/>		2.
3.	Tax (line 1 or 2, whichever is larger)	3.			3.
4.	First installment of estimated tax for period following that covered by this return:				
	(a) If application for extension has been filed, enter amount from line 2 of Form NYC-EXT	4a.			4a.
	(b) If application for extension has not been filed and line 3 exceeds \$1,000, enter 25% of line 3 (see instructions)	4b.			4b.
5.	Total before prepayments (add lines 3 and 4a or 4b)	5.			5.
6.	Prepayments (see instructions)	6.			6.
7.	Balance due (line 5 less line 6)	7.			7.
8.	Overpayment (line 6 less line 5)	8.			8.
9a.	Interest (see instructions)	9a.	<input type="text"/>		9a.
9b.	Additional charges (see instructions)	9b.	<input type="text"/>		9b.
9c.	Penalty for underpayment of estimated tax (attach Form NYC-222)	9c.	<input type="text"/>		9c.
10.	Total of lines 9a, 9b and 9c	10.			10.
11.	Net Overpayment (line 8 less line 10)	11.			11.
12.	Amount of line 11 to be: (a) Refunded - <input type="checkbox"/> Direct deposit - fill out line 12c OR <input type="checkbox"/> Paper check ..	12a.			12a.
	(b) Credited to 2021 estimated tax	12b.			12b.
12c.	Routing Number <input type="text"/> Account Number <input type="text"/> ACCOUNT TYPE <input type="checkbox"/> Checking <input type="checkbox"/> Savings				
13.	TOTAL REMITTANCE DUE (see instructions)	13.			13.
14.	Gross income	14.			14.

CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION

SIGN HERE I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete. Firm's Email Address:
 I authorize the Dept. of Finance to discuss this return with the preparer listed below. (see instructions)... YES

Officer's signature: _____ Title: _____ Date: _____
 Preparer's signature: _____ Preparer's printed name: _____ Check if self-employed: Date: _____
 Preparer's Social Security Number or PTIN:
 Firm's Employer Identification Number:

PREPARER'S USE ONLY
 ▲ Firm's name (or yours, if self-employed) ▲ Address ▲ Zip Code

NAME _____

EIN _____

SCHEDULE B

1. Federal Taxable Income before net operating loss deduction and special deductions	1.		
2. State and local income and MTA taxes deducted on federal return (see instructions).....	2.		
3. Total of lines 1 and 2.....	3.		
4. New York City net operating loss deduction (see instructions)	4.		
5. New York City and New York State income tax refunds included in line1	5.		
6. Taxable net income. Line 3 less the sum of lines 4 and 5 (enter on page 1, Schedule A, Line 1)	6.		

ADDITIONAL REQUIRED INFORMATION - See Instructions

- 1. Does this taxpayer 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?..... YES NO
- 2. If "YES", were all required Commercial Rent Tax Returns filed?..... YES NO

Please enter Employer Identification Number which was used on the Commercial Rent Tax Return: _____

3. Enter the number of Federal K1 returns attached: _____

MAILING INSTRUCTIONS

Attach copy of all pages of your federal tax return 1120S.

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

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

The due date for the calendar year 2020 return is on or before March 15, 2021.

For fiscal years beginning in 2020, 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
GENERAL CORPORATION TAX
P.O. BOX 5564
BINGHAMTON, NY 13902-5564

REMITTANCES

**PAY ONLINE WITH FORM NYC-200V
AT NYC.GOV/ESERVICES**

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
GENERAL CORPORATION TAX
P.O. BOX 5563
BINGHAMTON, NY 13902-5563

