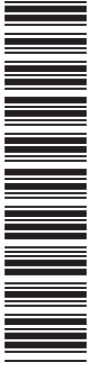


To be filed by S Corporations only. All C Corporations must file Form NYC-2 or NYC-2A
Attach copy of all pages of your federal return 1120S

For CALENDAR YEAR 2021 or FISCAL YEAR beginning _____ 2021 and ending _____



TYPE OR PRINT

Name _____ Name Change

In Care Of _____

Address (number and street) _____ Address Change

City and State _____ Zip Code _____ Country (if not US) _____

Business Telephone Number _____ 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 Claim any 9/11/01-related federal tax benefits (see inst.)

Special short period return (See Instr.) Enter 2-character special condition code, if applicable (see inst.)

Amended return If the purpose of the amended return is to report a federal or state change, check the appropriate box: IRS change NYS change

Date of Final Determination _____-_____-_____

STATE OR COUNTRY OF ORGANIZATION: _____ DATE ORGANIZED: _____-_____-_____ DATE BUSINESS BEGAN IN NEW YORK CITY: _____-_____-_____

TYPE OF CORPORATION: 1. EDGE ACT 2. ALIEN COMMERCIAL 3. SAVINGS AND LOAN 4. TRUST 5. DOMESTIC COMMERCIAL (other than Clearing House)

Check One 6. CLEARING HOUSE 7. CAPTIVE REIT 8. CAPTIVE RIC 9. CREDIT CARD BANK 10. OTHER

TYPE OF BUSINESS LOCATION(S) WITHIN NYC: 1. BRANCH 2. AGENCY 3. REPRESENTATIVE OFFICE 4. LOAN PRODUCTION OFFICE 5. NONE 6. OTHER (Specify) _____

SCHEDULE A - Computation of Tax

A. Payment	Amount being paid electronically with this return	A.	Payment Amount
1.	Allocated taxable entire net income (from Sch. B, line 31) 1.		
2.	Allocated taxable alternative entire net income (from Sch. C, line 6) 2.	X 9% (.09) 1.	
3.	Allocated taxable assets (from Sch. D, line 4 and multiply by the appropriate tax rate, mark in the box) ... 3.	X 3% (.03) 2.	
4.	Fixed minimum tax - No reduction is permitted for a period of less than 12 months..... 4.	<input type="checkbox"/> .00002 <input type="checkbox"/> .00004 <input type="checkbox"/> .0001	125 00
5.	Tax (line 1, 2, 3, or 4, whichever is largest) 5.		
6.	UBT Paid Credit (attach Form NYC-9.7B) 6.		
7.	Tax after UBT Paid Credit (line 5 less line 6) 7.		
8a.	Relocation and employment assistance program (REAP) credit (see instructions and attach Form NYC-9.5) 8a.		
8b.	LMREAP Credit (see instructions and attach Form NYC-9.8) 8b.		
9.	Net Tax (line 7 less lines 8a and 8b) 9.		
10.	First installment of estimated tax for period following that covered by this return: 10a.		
	a) If application for extension has been filed, enter amount from line 2 of Form NYC-EXT 10a.		
	b) If application for extension has not been filed and line 9 exceeds \$1,000, enter 25% of line 9 10b.		
11.	Total of lines 9 and 10a or 10b..... 11.		
12.	Prepayments (from Composition of Prepayments Claimed, page 6, item G) (see instructions) 12.		
13.	Balance due (line 11 less line 12) 13.		
14.	Overpayment (line 12 less line 11) 14.		
15a.	Interest (see instructions) 15a.		
15b.	Additional charges (see instructions)..... 15b.		
15c.	Penalty for underpayment of estimated tax (attach Form NYC-222B)..... 15c.		
16.	Total of lines 15a, 15b and 15c 16.		
17.	Net overpayment (line 14 less line 16)..... 17.		
18.	Amount of line 17 to be: (a) Refunded 18a.		
	(b) Credited to 2022 estimated tax 18b.		
19.	TOTAL REMITTANCE DUE (see instructions). 19.		
20.	Issuer's allocation percentage rounded to the nearest one hundredth of a percentage point (see instructions) (attach worksheet)..... 20.		%
21.	Total receipts (Sch. G, part 1, line 2f, col. B) 21.		
22.	Total capital from federal return..... 22.		
23.	Total assets from federal return 22.		
24.	EIN of parent corporation 24.		
25.	EIN of common parent corporation 25.		
26.	Entire net income allocation percentage rounded to the nearest one hundredth of a percentage point (Sch. G, part 1, line 7) 26.		%
27.	IBF Formula Allocation Method (✓) 27. <input checked="" type="checkbox"/>		
28.	NYC rent deducted on federal tax return 28.		

CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION

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

Firm's Email Address: _____

SIGN HERE: Signature of officer _____ Title _____ Date _____

Preparer's Social Security Number or PTIN _____

Preparer's signature _____ Preparer's printed name _____ Check if self-employed Date _____

Firm's Employer Identification Number _____

▲ Firm's name (or yours, if self-employed) _____ ▲ Address _____ ▲ Zip Code _____

SCHEDULE B - Computation and Allocation of Entire Net Income

Table with 31 rows for 'ADDITIONS' and 'SUBTRACTIONS'. Includes columns for 'ALIEN CORPORATIONS', 'ALL OTHERS', and a final column for the total amount. Rows include items like 'Federal taxable income before net operating loss deduction', 'Dividends and interest effectively connected with the conduct of a trade or business', 'Interest and other expenses not deducted on federal return', etc.



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 2021 return is on or before March 15, 2022.
For fiscal years beginning in 2021, 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
BANKING 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
BANKING CORPORATION TAX
P.O. BOX 5563
BINGHAMTON, NY 13902-5563

SCHEDULE C - Computation and Allocation of Alternative Entire Net Income

Table with 6 rows for SCHEDULE C. Rows include: 1. Entire net income (from Schedule B, line 30); 2. Interest income from subsidiary capital; 3. Dividend income, gains and losses from subsidiary capital; 4. Interest income on obligations of N.Y. State, its political subdivisions, or of the U.S.; 5. Alternative entire net income (add lines 1 through 4); 6. Allocated alternative entire net income - line 5 x [] % (from Schedule G, part 2, line 5 rounded to the nearest one hundredth of a percentage point) (enter on page 1, Schedule A, line 2).

SCHEDULE D - Computation and Allocation of Taxable Assets

Table with 6 rows for SCHEDULE D. Rows include: 1. Average value of total assets; 2. Money or other property received from the Federal Deposit Insurance Corporation or from the Federal Savings and Loan Insurance Corporation; 3. Taxable assets (line 1 less line 2); 4. Allocated taxable assets - line 3 x [] % (from Schedule G, part 3, line 7 rounded to the nearest one hundredth of a percentage point) (enter on page 1, Schedule A, line 3); 5. Compute net worth ratio: Net worth on the last day of the tax year / Total assets on the last day of the tax year = [] %; 6. Compute percentage of mortgages included in total assets: Average quarterly balance of mortgages / Average quarterly balance of total assets = [] %.

Use the chart below to determine your tax rate. This rate must be used to compute the alternative minimum tax measured by taxable assets. You must meet both the net worth ratio and percentage of mortgages included in the total assets requirements to qualify for the lower tax rates.

Mark an X in the appropriate box in the last column and use this rate on line 3 of Schedule A.

Chart with 4 columns: If the net worth ratio (from line 5) is; And the % of mortgages included in total assets (from line 6) is; The tax rate is; Indicate the appropriate tax rate. Rows include: Less than 4% / 33% or more / .00002; At least 4% but less than 5% / 33% or more / .00004; All others / All others / .0001.

SCHEDULE E - Federal Return Information - All Banks

THE FOLLOWING INFORMATION MUST BE ENTERED FOR THIS RETURN TO BE COMPLETE

Enter on Lines 1 through 10, in the Federal Amount column, the amounts reported on your Federal 1120S.

Table with 10 rows for SCHEDULE E. Rows include: 1. Interest income; 2. Other income; 3. Total income; 4. Compensation of officers; 5. Salaries and wages; 6. Bad debts; 7. Interest expense; 8. Other deductions; 9. Total deductions; 10. Taxable income before NOL. Includes a 'Federal Amount' column.

Enter on lines 1 through 5, in the Federal Amount column, the amounts reported on your Federal 1120S.

Table with 5 rows for SCHEDULE E. Rows include: 1. Net income (loss) per books; 2. Income subject to tax not recorded on books this year; 3. Expenses recorded on books this year not deducted on this return; 4. Income recorded on books this year not included on this return; 5. Deductions on this return not charged against book income this year. Includes a 'Federal Amount' column.

Enter on lines 1 and 2 in the Federal Amount column the amounts reported on your Federal 1120S.

Table with 2 rows for SCHEDULE E. Rows include: 1. Total assets (Beginning of tax year, Schedule L, Column b); 2. Total assets (End of tax year, Schedule L, Column d). Includes a 'Federal Amount' column.



SCHEDULE F - Computation of International Banking Facility Adjusted Eligible Net Income or Loss (Pursuant to Section 11-641 (f) of the Administrative Code)

If the corporation has an IBF located in New York State, check the appropriate box below and see instructions.

The corporation computed entire net income using the: IBF modification method or IBF formula allocation method

If using the modification method, complete lines 1 through 34; if using the formula allocation method, complete lines 1 through 18 only.

Table with 4 columns: COMPUTATION OF ELIGIBLE GROSS INCOME, COLUMN A Total IBF Gross Income, COLUMN B Ineligible IBF Gross Income, and COLUMN C Eligible Gross Income (column A minus column B). Rows 1-5 include interest income, fee income, and total eligible gross income.

Table with 4 columns: COMPUTATION OF APPLICABLE EXPENSES, COLUMN A Direct Expenses, COLUMN B Indirect Expenses, and COLUMN C Total (column A plus column B). Rows 6-17 list various expenses like salaries, taxes, and depreciation, leading to total applicable expenses on line 18.

Table with 4 columns for COMPUTATION OF INELIGIBLE FUNDING AMOUNT. Rows 19-24 calculate the ineligible funding amount based on net income and liabilities, resulting in the remaining amount on line 24.

Table with 4 columns for COMPUTATION OF FLOOR AMOUNT. Rows 25-34 calculate the floor amount based on average aggregate amounts of loans and deposits, leading to the adjusted eligible net income or loss on line 34.



SCHEDULE G - Allocation Percentages - Parts 1, 2 and 3

- ◆ Are you a banking corporation described in Administrative Code section 11-640(a)(9)? Yes No
 - ◆ Are you substantially engaged in providing management, administrative, or distribution services to an investment company as such terms are defined in Adm. Code section 11-642(b)(1-a)? Yes No
- If you answered "Yes" to **both** questions, see instructions concerning "Allocation for Certain Banking Corporations."

Part 1 Computation of entire net income allocation

If the corporation has an IBF located in New York State, check the appropriate box below and see instructions.

The corporation computed entire net income using the: **IBF modification method** or **IBF formula allocation method**

If you are claiming an allocation outside NYC, attach a rider to explain the business carried on outside NYC upon which you base your right to allocate.

		COLUMN A NEW YORK CITY	COLUMN B EVERYWHERE
1a. Wages, salaries and other personal service compensation of employees, except general executive officers.....	1a.		
1b. Multiply column A x 80%	1b.		
1c. Percentage in New York City (line 1b, column A divided by line 1a, column B)	1c.		%
2. Receipts arising during the taxable period from:			
a. Interest income from loans and financing leases	2a.		
b. Other income from loans and financing leases	2b.		
c. Lease transactions and rents.....	2c.		
d. Interest from bank, credit, travel, entertainment and other credit card receivables	2d.		
e. Service charges and fees from bank, credit, travel, entertainment and other credit cards	2e.		
f. Receipts from merchant discounts.....	2f.		
g. Income from trading activities and investment activities.....	2g.		
h. Fees or charges from letters of credit, traveler's checks and money orders.....	2h.		
i. Performance of services	2i.		
j. Royalties	2j.		
k. All other business receipts.....	2k.		
l. Total (transfer amount from column B to page 1, line 21)	2l.		
m. Percentage in New York City (line 2l, column A, divided by line 2l, column B).	2m.		%
3. Additional receipts factor (enter percentage from line 2m (see instructions))	3.		%
4. Deposits maintained in branches			
a. Deposits of \$100,000 or more	4a.		
b. Deposits of less than \$100,000	4b.		
c. Total of line 4a and line 4b.....	4c.		
d. Percentage in New York City (line 4c, column A divided by line 4c, column B)	4d.		%
5. Additional deposits factor (enter percentage from line 4d (see instructions)).....	5.		%
6. Total of NYC percentages shown on lines 1c, 2m, 3, 4d and 5 (see instructions)	6.		%
7. Entire net income allocation percentage (divide line 6 by five or by the actual number of percentages used if less than five) (round to the nearest one hundredth of a percentage point and transfer to Schedule B, line 31 and to Schedule A, line 26)	7.		%

Part 2 Computation of alternative entire net income allocation percentage

		COLUMN A NEW YORK CITY	COLUMN B EVERYWHERE
1a. Wages, salaries and other personal service compensation of employees, except general executive officers	1a.		
1b. Percentage in New York City (line 1a, column A divided by line 1a, column B)	1b.		%
2. Receipts factor - enter percentage from Schedule G, part 1, line 2m	2.		%
3. Deposits factor - enter percentage from Schedule G, part 1, line 4d	3.		%
4. Total of lines 1b, 2 and 3	4.		%
5. Alternative entire net income allocation percentage (divide line 4 by three or by the actual number of percentages used if less than three) (round to the nearest one hundredth of a percentage point and transfer to Schedule C, line 6)	5.		%



Part 3 (Schedule G (cont'd)) Computation of taxable assets allocation percentage

ALL ACTIVITIES OF AN IBF ARE TO BE INCLUDED IN BOTH THE NUMERATOR (COL. A) AND THE DENOMINATOR (COL. B) WHEN COMPUTING THE TAXABLE ASSETS ALLOCATION PERCENTAGE.		COLUMN A NEW YORK CITY		COLUMN B EVERYWHERE	
1a.	Wages, salaries and other personal service compensation of employees, except general executive officers	1a.			
1b.	Multiply column A x 80%.....	1b.			
1c.	Percentage in New York City (line 1b, column A divided by line 1a, column B)	1c.			%
2.	Receipts arising during the taxable period from:				
a.	Interest income from loans and financing leases.....	2a.			
b.	Other income from loans and financing leases.....	2b.			
c.	Lease transactions and rents	2c.			
d.	Interest from bank, credit, travel, entertainment and other credit card receivables	2d.			
e.	Service charges and fees from bank, credit, travel, entertainment and other credit cards.....	2e.			
f.	Receipts from merchant discounts.....	2f.			
g.	Income from trading activities and investment activities	2g.			
h.	Fees or charges from letters of credit, traveler's checks and money orders ..	2h.			
i.	Performance of services.....	2i.			
j.	Royalties.....	2j.			
k.	All other business receipts	2k.			
l.	Totals	2l.			
m.	Percentage in New York City (line 2l, column A divided by line 2l, column B)	2m.			%
3.	Additional receipts factor (enter percentage from line 2m (see instructions))	3.			%
4.	Deposits maintained in branches				
a.	Deposits of \$100,000 or more	4a.			
b.	Deposits of less than \$100,000.....	4b.			
c.	Total of line 4a and line 4b	4c.			
d.	Percentage in New York City (line 4c, column A divided by line 4c, column B) .	4d.			%
5.	Additional deposits factor (enter percentage from line 4d (see instructions))	5.			%
6.	Total of NYC percentages shown on lines 1c, 2m, 3, 4d and 5 (see instructions).....	6.			%
7.	Taxable assets allocation percentage (divide line 6 by five or by the actual number of percentages used if less than five) (round to the nearest one hundredth of a percentage point and transfer to Schedule D, line 4).....	7.			%

Composition of Prepayments claimed on Schedule A, line 12

	DATE	AMOUNT
A. Mandatory first installment paid with preceding year's tax.....		
B. Payment with declaration, Form NYC-400B (1).....		
C. Payment with Notice of Estimated Tax Due (2)		
D. Payment with Notice of Estimated Tax Due (3)		
E. Payment with extension, Form NYC-EXT		
F. Carryover credit from preceding year other than UBT Paid Credit carryover.....		
G. TOTAL of A through F (enter on Schedule A, line 12).....		



SCHEDULE J - Additional Required Information

1. Are you currently under audit by the Internal Revenue Service or the New York State Department of Taxation and Finance? YES NO
 If "YES", by whom? Internal Revenue Service state periods: Beg.: _____ End.: _____
 MM-DD-YYYY MM-DD-YYYY
 New York State state periods: Beg.: _____ End.: _____
 Dept. of Taxation and Finance MM-DD-YYYY MM-DD-YYYY

2. 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 YES NO
 If "YES", by whom? Internal Revenue Service state periods: Beg.: _____ End.: _____
 MM-DD-YYYY MM-DD-YYYY
 New York State state periods: Beg.: _____ End.: _____
 Dept. of Taxation and Finance MM-DD-YYYY MM-DD-YYYY

3. If "YES" to question 2:
 3a. For years prior to 1/1/15, has Form(s) NYC-3360B (Banking Corporation Report of Federal /State Change in Taxable Income) been filed? YES NO
 3b. For years beginning on or after 1/1/15, has an amended return(s) been filed? YES NO
 4. Did you calculate a depreciation deduction by the application of the Federal Accelerated Cost Recovery System (ACRS)? YES NO
 5. Were you a participant in a "safe harbor leasing" transaction during the period covered by this return? YES NO
 6. At any time during the taxable year, did the corporation have an interest in real property (including a leasehold interest) located in NYC or in an entity owning such real property? YES NO

7. If "YES" to 6:
 a. Attach a schedule of such property, including the nature of the interest and including the street address, borough, block and lot number.
 b. Was any NYC real property or interest (including a leasehold interest) in an entity owning real property acquired or transferred with or without consideration? YES NO
 c. Was there a partial or complete liquidation of the corporation? YES NO
 d. Was 50% or more of the corporation's ownership transferred during the tax year, over a three-year period or according to a plan? YES NO
 8. If "YES" to 7b, 7c, or 7d, was a Real Property Transfer Tax Return filed? YES NO
 9. If "NO" to 8, explain: _____

10. Are you a member of:
 a. a federal consolidated group YES NO Number of members: _____
 b. a New York State combined group YES NO Number of members: _____
 c. a New York City combined group YES NO Number of members: _____

11. If you answered:
 "YES" to 10a. indicate total federal consolidated taxable income of group before net operating loss deduction \$ _____
 "YES" to 10b. compute total federal consolidated taxable income before net operating loss deduction for those corporations not included in the New York City combined group but included in the New York State combined group \$ _____
 "YES" to 10c. compute total federal consolidated taxable income before net operating loss deduction for those corporations not included in the New York City combined group but in the federal consolidated group \$ _____

12. Balance sheet information as of end of the year as per federal income tax return:
 Total assets \$ _____
 Total liabilities \$ _____
 Total capital \$ _____

13. If you are a member of a New York City combined group, compute combined New York City balance sheet information as of end of the year.
 Total assets \$ _____
 Total liabilities \$ _____
 Total capital \$ _____

14. Attach a list of offices and branches located outside New York City.
 15. Do you have an International Banking Facility in New York City? YES NO
 If "YES", provide the date established: _____ Date business began in NYC: _____
 Provide the date approval was obtained from Federal Reserve Bank: _____

16. Does the corporation have one or more qualified subchapter S subsidiaries? YES NO
 If "YES", attach a schedule showing the name, address and EIN, if any, of each QSSS and indicate whether the QSSS filed or was required to file a City business income tax return. See Finance Memorandum 99-3 online at: http://www1.nyc.gov/assets/finance/downloads/pdf/99pdf/fm99_3.pdf

17. 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
 18. 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 _____

