



For CALENDAR YEAR 2024 beginning _____ and ending _____

First name and initial	Last name	Name Change <input type="checkbox"/>	TAXPAYER'S EMAIL ADDRESS
In Care Of			
Business name			SOCIAL SECURITY NUMBER <div></div>
Business address (number and street)			
City and State		Zip Code	Country (if not US)
Business Telephone Number	Date business began in NYC (mm-dd-yy)	Date business ended in NYC (mm-dd-yy)	BUSINESS CODE NUMBER FROM FEDERAL SCHEDULE C: <div></div>

CHECK ALL THAT APPLY

☐ Amended return
☐ Final return - Check this box if you have ceased operations in NYC.
☐ Engaged in a **fully exempt** unincorporated business activity

If the purpose of the amended return is to report a federal or state change, check the appropriate box:
☐ IRS change
☐ NYS change
 Enter 2-character special condition code if applicable (see instructions)
☐ Engaged in a **partially exempt** unincorporated business activity

Date of Final Determination

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

A. Payment	Amount being paid electronically with this return	A.	Payment Amount
1.	Business income (from page 2, Schedule B, line 6)	1.	
2.	Less: allowance for taxpayer's services - do not enter more than 20% of line 1 or \$10,000, whichever is less (see instructions)	2.	
3.	Balance before exemption (line 1 less line 2)	3.	
4.	Less: exemption - \$5,000 (taxpayer operating more than one business or short period taxpayer, see instructions).....	4.	
5.	Taxable income (line 3 less line 4) (see instructions).....	5.	
6.	TAX: 4% of amount on line 5.....	6.	
7.	Less: business tax credit (select the applicable credit condition from the Business Tax Credit Computation schedule on page 2 and enter amount) (see instructions)	7.	
8.	UNINCORPORATED BUSINESS TAX (line 6 less line 7) (see instructions).....	8.	
9.	Payment of estimated Unincorporated Business Tax, including carryover credit from preceding year and payment with extension, NYC-EXT (see instructions)	9.	
10.	If line 8 is larger than line 9, enter balance due	10.	
11.	If line 8 is smaller than line 9, enter overpayment	11.	
12.	Interest (see instructions)12.		
13.	Amount of line 11 to be: (a) Refunded - <input type="checkbox"/> Direct deposit - fill out line 13c OR <input type="checkbox"/> Paper check .	13a.	
	(b) Credited to 2025 Estimated Tax on Form NYC-SUBTI	13b.	
13c.	Routing Number <div></div> Account Number <div></div> ACCOUNT TYPE Checking <input type="checkbox"/> Savings <input type="checkbox"/>		
14.	Total remittance due. Line 10 plus line 12.	14.	
15.	Gross receipts or sales from federal return.....	15.	

CERTIFICATION

SIGN HERE
PREPARER'S USE ONLY

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 Department of Finance to discuss this return with the preparer listed below. (see instructions).....YES ☐

Taxpayer's Signature:

Title:

Date: MM-DD-YY

Preparer's signature:

Preparer's printed name:

Date: MM-DD-YY

Firm's name

Address

Zip Code

Firm's Email Address:

Preparer's Social Security Number or PTIN

Firm's Employer Identification Number

Check if self-employed ☐

61412491 THIS RETURN MUST BE SIGNED. (SEE REVERSE FOR MAILING INSTRUCTIONS.) NYC-202S 2024

SCHEDULE B

Computation of Total Income

Business Tax Credit Computation

- SCHEDULE C**
- The following information must be entered for this return to be complete.

- | PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 9 | DATE | AMOUNT | |
|---|------|--------|--|
| A. Payment with declaration, Form NYC-SUBTI (1) | | | |
| B. Payment with Notice of Estimated Tax Due (2) | | | |
| C. Payment with Notice of Estimated Tax Due (3) | | | |
| D. Payment with Notice of Estimated Tax Due (4) | | | |
| E. Payment with extension, Form NYC-EXT | | | |
| F. Overpayment credited from preceding year | | | |
| G. TOTAL of A, B, C, D, E, F (enter on Schedule A, line 9) | | | |

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

