



CR-A

ANNUAL

2017/18

NEW YORK CITY DEPARTMENT OF FINANCE

COMMERCIAL RENT TAX RETURN

Applicable for the tax period June 1, 2017 to May 31, 2018 ONLY

		Name:				Name 🖂		Employer Identification Number			
Address (i											
		Address (number and street):							OR		
						Address Change	Address Change		Social Security Number		
		City and State:	Zip:			Country (if not	116).	_ L			
		City and State.		zip.			03).		Federal Business Code		
										7	
		Business Telephone Numl	ber:	Taxpayer's Ema	il Address	5:					
									Amended Return		
REPORT FULL YEAR'S RENT OR THE ANNUALIZED RENT IF LESS THAN FULL YEAR ON THIS RETURN. COMPLETE PAGE 2 FIRST.											
CHEC	ск (🗸) тне туре оf в	SUSINESS ENTITY:	Corporation	(Pa	rtnership			Individual, estate or tr	rust	
			Initial return - Date busir	ness began:							
CHEC	K (✓) IF APPLICABLE:	•	s discontinued:								
			СОМР	UTATION C	OF TA	x					
Α.	Payment -	Amount being paid ele	ectronically with this	s return			A.	•	▼ Payment ▼		
LINE		RATE	NO. OF PREMISES		TOTAL BASE REN		TAX RATE		TAX DUE: TOTAL BASE RENT X TAX RATE	 E	
• 1.	\$0 to \$249,999	(from line 13 on pg. 2 or supplemental spreadsheet)				.00	0%	1.	0	0 0	
• 2.	\$250,000 and ove	(from line 14 on pg. 2 or supplemental spreadsheet)				.00	6%	• 2.			
3.	Tax Credit (from pg. 2, line 16 or supplemental spreadsheet) (see instructions)										
4.	Total Tax Due After Tax Credit (line 2 minus line 3).										
5.	Deduct total quarterly payments							• 5.			
6.	Balance Due (if line 5 is less than line 4)							• 6.			
7.	Add interest and penalties (See instructions)						• 7.				
8.	Overpayment (if line 5 is greater than the sum of line 4 and line 7)							• 8.			
9.											
10.	Total number o	f Subtenants						• 10.		-	
11.	Enter EIN used	l on the Business Tax I	Return		1 1	1 1 1					
			CI								
I hereby certify that this return, including any accompanying schedules, has been examined by me and is, to the best of my knowledge and belief, true, correct and complete I also request a refund of the amount of any overpayment of the tax shown on line 8, if any, as is attributable to the inclusion in base rent reported on line 2 of page 1 of this return of NYC Real Property Tax escalations for which, and at such time as, the taxpayer receives a credit or refund from the lessor of taxable premises covered by this re turn and I agree to submit such information as is necessary to establish the amount of such overpayment. I authorize the Dept. of Finance to discuss the processing of this return with the preparer listed below: (see instructions) YES											
HER	e → of officer			Title		Date			Firm's Employer Identification Nu	umber	
	Preparer's ARER's signature: →		Preparer's printed name:			Date Check if	Г	•	Preparer's Telephone Numb		
	▲ Firm's nan	ne	Address	A.	Zip Code	self-emp	loyed: ∟				
<u> </u>	Make remittar	nce payable to the order	of: NYC DEPARTMEN	OF FINANCE F	ayment	must be made	in U.S	6. dol	lars, drawn on a U.S. bank.		
To receive proper credit, you must enter your correct Employer Identification Number or Social Security Number and your Account ID number on your tax return and remittance.											
RETURNS (FORM ONLY) NYC DEPARTMENT OF FINANCE P.O. BOX 5564 BINGHAMTON, NY 13902-5564			REMITTANCES PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/FINANCE OR Mail Payment and Form NYC-200V ONLY to: NYC DEPARTMENT OF FINANCE				RET	RETURNS CLAIMING REFUNDS (FORM ONLY) NYC DEPARTMENT OF FINANCE P.O. BOX 5563 BINGHAMTON, NY 13902-5563			
	P.O. BOX 3933, NEW YORK, NY 10008-3933										
DID YOUR MAILING ADDRESS CHANGE? If so, please visit us at <i>nyc.gov/finance</i> and click "Update Name and Address" in the blue "Business Taxes" box. This will bring you to the "Business Taxes Change of Name, Address or Account Information". Update as required.											

FOR ADDITIONAL PREMISES, YOU MAY EITHER MAKE COPIES OF THIS PAGE OR USE THE FINANCE SUPPLE-MENTAL SPREADSHEET, AVAILABLE AT NYC.GOV/CRTINFO. YOU MAY NOT USE ANY OTHER SPREADSHEET.

EACH LINE MUST BE ACCURATELY COMPLETED. YOUR DEDUCTION WILL BE DISALLOWED IF INACCURATE INFORMATION IS SUBMITTED.

LII	DESCRIPTION PREMIS		PREMISES 1	PF	REMISES 2	PREMISES 3			
1a.	Street Address 1a								
1b.	Zip Code1b					 			
1c.	Block and 1d. Lot Number1c/1d								
2	Gross Rent Paid (see instructions) 2	1C. BLOC	ск 1d. LOT	1C. BLOCK	κ 1d. LOT	1C. BLOCK	а 1d. Lot		
3. Rent Applied to Residential Use		•							
4a.	SUBTENANT'S NAME (if more than one subtenant, see instructions)								
4b.	4b. Employer Identification Number (EIN) for partnerships or corporations4b.					• 4b. EIN			
4c. Social Security Number for individuals4		• 4c. SSN		• 4c. SSN _		• 4c. SSN			
4d.	Rent received from SUBTENANT (if more than one subtenant, see instructions)4d								
5a.	Other Deductions (attach schedule)5a								
5b.	Commercial Revitalization Program special reduction (see instructions) 5b								
6.	Total Deductions (add lines 3, 4d, 5a and 5b)6								
7.	Base Rent Before Rent Reduction (line 2 minus line 6)7								
	 If the line 7 amount represents rent If the line 7 amount plus the line 5b If the line 7 amount plus the line 5b 	amount is s amount is s	\$249,999 or less and \$250,000 or more an	represents	s rent for a full year				
	35% Rent Reduction (35% X line 7)8								
9.	Base Rent Subject to Tax (line 7 minus line 8)9								
10-	COMPLETE LINES 10a, 11 AND 1 Number of Months at Premises during the tax period			REMISES		10a. # of months			
IVa	number of workins at Fremises during the tax period	. Iva. # or monuns		TUa. # OF MONUNS		IVa. # OI MONUIS	TUD. From:		
11	Monthly Base Rent before rent reduction		10c. To:		10c. To:		10c. To:		
	(line 7 plus line 5b divided by line 10a)11								
12.	Annualized Base Rent before rent reduction								
(line 11 X 12 months)12.									
	If the line 12 amount is \$249,999 or less, tran If the line 12 amount is \$250,000 or more, tra		· ·		,				
	RATE CLASS TAX RA	TE							
	13. (\$0 - 249,999)0%1	3.							
	14. (\$250,000 or more) 6%1	4.							
	15. Tax Due before credit								
	16. Tax Credit (see worksheet below) 1	6.							
	Note: The tax credit only applies if	f line 7 plus lin	e 5b (or line 12, if applica	uble) is at least	t \$250,000, but is less tl	nan \$300,000.	All others enter zero.		
	Tax Credit Computation Worksheet								
	If the line 7 amount represents rent for the full 12 month period, your credit is calculated as follows:								
	 16. Tax Credit (see worksheet below) .16. Note: The tax credit only applies if line 7 plus line 5b (or line 12, if applicable) is at least \$250,000, but is less than \$300,000. All others enter zero. Tax Credit Computation Worksheet If the line 7 amount represents rent for the full 12 month period, your credit is calculated as follows: Amount on line 15 X (\$300,000 minus the sum of lines 7 and 5b) = = your credit If the line 7 amount represents rent for less than the full 12 month period, your credit is calculated as follows: Amount on line 15 X (\$300,000 minus the sum of lines 7 and 5b) = = your credit If the line 7 amount represents rent for less than the full 12 month period, your credit is calculated as follows: Amount on line 15 X (\$300,000 minus line 12) = = your credit 								
	If the line 7 amount represents rent for less than the full 12 month period, your credit is calculated as follows:								
	Amount on line 15 X (\$30	0,000 minu \$50,000	$\frac{s \text{ line } 12}{2} = $	=	= your credit				
_	TRANSFER THE AMOUN 20021891						NES ON PAGE 1 CR-A 2017/18 - Rev. 06.12.2018		