# NYC Department of Finance
nyc.gov/finance

## CR-A ANNUAL 2019/20

**NEW YORK CITY DEPARTMENT OF FINANCE**
# COMMERCIAL RENT TAX RETURN
Applicable for the tax period June 1, 2019 to May 31, 2020 ONLY

Name: ☐ Name Change

Address (number and street): ☐ Address Change

City and State: 

Zip: 

Country (if not US): 

Business Telephone Number: 

Taxpayer's Email Address: 

Employer Identification Number

**OR**

Social Security Number

Federal Business Code

Special Condition Code

Amended Return ☐

**REPORT FULL YEAR'S RENT OR THE ANNUALIZED RENT IF LESS THAN FULL YEAR ON THIS RETURN. COMPLETE PAGES 2 AND 3 FIRST.**

CHECK (✓) THE TYPE OF BUSINESS ENTITY: ● ☐ Corporation ● ☐ Partnership ● ☐ Individual, estate or trust

CHECK (✓) IF APPLICABLE: ☐ Initial return - Date business began: ☐☐-☐☐-☐☐☐☐
● ☐ Final return - Date business discontinued: ☐☐-☐☐-☐☐☐☐

## COMPUTATION OF TAX

**A. Payment -** Amount being paid electronically with this return......................................................A. ● ▼ Payment ▼

| LINE | RATE CLASS | | NO. OF PREMISES FOR EACH RATE CLASS | TOTAL BASE RENT | TAX RATE | | TAX DUE: TOTAL BASE RENT X TAX RATE | |
|---|---|---|---|---|---|---|---|---|
| ● 1. | $0 to $249,999 | (from line 13 on pg. 2 or supplemental spreadsheet) | | .00 | 0% | 1. | 0 | 0 0 |
| ● 2. | $250,000 and over | (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)............................ | | | | | ● 3. | | |
| 4. | Small Business Tax Credit (from pg. 2, line 17, or supplemental spreadsheet) (see instructions) ... | | | | | ● 4. | | |
| 5. | Total Credits (add lines 3 and line 4)................................................................. | | | | | ● 5. | | |
| 6. | **Total Tax Due After Tax Credit** (line 2 minus line 5). ....................................... | | | | | ● 6. | | |
| 7. | Deduct total quarterly payments ...................................................... | | | | | ● 7. | | |
| 8. | Balance Due (if line 7 is less than line 6) ......................................... | | | | | ● 8. | | |
| 9. | Add interest and penalties (See instructions) ................................. | | | | | ● 9. | | |
| 10. | Overpayment (if line 7 is greater than the sum of line 6 and line 9) ...........................**REFUND** ☞ | | | | | ● 10. | | |
| 11. | **Total Remittance Due** (Add line 8 and line 9) (see instr.) **Enter payment amount on line A, above** .. | | | | | ● 11. | | |
| 12. | Total number of Subtenants......................................................... | | | | | ● 12. | | |
| 13. | Enter EIN used on the Business Tax Return ............. ☐☐☐-☐☐☐☐☐☐☐ | | | | | | | |

## CERTIFICATION

*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 return 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 ☐

Preparer's Social Security Number or PTIN

**SIGN HERE** → Signature of officer ___ Title ___ Date ___

Firm's Employer Identification Number

**PREPARER'S USE ONLY** → Preparer's signature: ___ Preparer's printed name: ___ Date ___

Check if self-employed: ☐

Preparer's Telephone Number

▲ Firm's name ▲ Address ▲ Zip Code

Make remittance payable to the order of: NYC DEPARTMENT OF FINANCE Payment must be made in U.S. dollars, 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 P.O. BOX 3933, NEW YORK, NY 10008-3933 | RETURNS CLAIMING REFUNDS (FORM ONLY) NYC DEPARTMENT OF FINANCE P.O. BOX 5563 BINGHAMTON, NY 13902-5563 |
|---|---|---|

**DID YOUR MAILING ADDRESS CHANGE?** If so, please visit us at *nyc.gov/finance* 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.

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**YOU MAY FILE ELECTRONICALLY AT NYC.GOV/ESERVICES. IF YOU ARE FILING ON PAPER, USE THIS PAGE IF YOU HAVE THREE OR LESS PREMISES/SUBTENANTS OR MAKE COPIES OF THIS PAGE IF YOU HAVE ADDITIONAL PREMISES/SUBTENANTS. IF YOU CHOOSE TO USE A SPREADSHEET, YOU MUST USE THE CRA.FINANCE SUPPLEMENTAL SPREADSHEET WHICH YOU CAN DOWNLOAD FROM OUR WEBSITE AT WWW.NYC.GOV/CRTINFO.**

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

| LINE | DESCRIPTION | PREMISES 1 | PREMISES 2 | PREMISES 3 |
|------|-------------|------------|------------|------------|
| 1a. | Street Address ............ 1a. | | | |
| 1b. | Zip Code ............ 1b. | | | |
| 1c/d. | Block and Lot Number ............ 1c/1d. | 1c. BLOCK   1d. LOT | 1c. BLOCK   1d. LOT | 1c. BLOCK   1d. LOT |
| 2. | Gross Rent Paid (see instructions) ............ 2. | | | |
| 3. | Rent Applied to Residential Use ............ 3. | | | |
| 4a1. | **SUBTENANT'S Name if Partnership or Corporation** (if more than one subtenant, see instructions) ......... 4a1. | | | |
| 4a2. | Employer Identification Number (EIN) for partnerships or corporations ............ 4a2. | ● EIN _____ | ● EIN _____ | ● EIN _____ |
| 4b1. | **SUBTENANT'S Name if Individual** ............ 4b1. | | | |
| 4b2. | Social Security Number (SSN) for individuals ..... 4b2. | ● SSN _____ | ● SSN _____ | ● SSN _____ |
| 4c. | **Rent received from SUBTENANT** (if more than one subtenant, see instructions) ............ 4c. | | | |
| 4d1. | Is this rent paid for a period less than 12 months? ..4d1. | YES ☐   NO ☐ | YES ☐   NO ☐ | YES ☐   NO ☐ |
| 4d2. | If YES, how many months? ............ 4d2. | Total number of months:_____ | Total number of months:_____ | Total number of months:_____ |
| 5a. | Other Deductions (attach schedule) ............ 5a. | | | |
| 5b. | Commercial Revitalization Program special reduction (see instructions) ............ 5b. | | | |
| 6. | Total Deductions (add lines 3, 4c, 5a and 5b)............ 6. | | | |
| 7. | Base Rent Before Rent Reduction (line 2 minus line 6)...7. | | | |

**NOTE**
- ▸ If the line 7 amount represents rent for less than the full year, proceed to line 10, or
- ▸ If the line 7 amount plus the line 5b amount is $249,999 or less and represents rent for a full year, transfer line 9 to line 13, or
- ▸ If the line 7 amount plus the line 5b amount is $250,000 or more and represents rent for a full year, transfer line 9 to line 14

| LINE | DESCRIPTION | PREMISES 1 | PREMISES 2 | PREMISES 3 |
|------|-------------|------------|------------|------------|
| 8. | 35% Rent Reduction (35% X line 7)............ 8. | | | |
| 9. | Base Rent Subject to Tax (line 7 minus line 8) ............ 9. | | | |

**COMPLETE LINES 10 THROUGH 12 ONLY IF YOU RENTED PREMISES FOR LESS THAN THE FULL YEAR**

| LINE | DESCRIPTION | PREMISES 1 | PREMISES 2 | PREMISES 3 |
|------|-------------|------------|------------|------------|
| 10. | Tenants whose rent is not paid on a monthly basis, check box and see instructions. Others complete lines 10a through12. ...10. | ☐ | ☐ | ☐ |
| 10a. | Number of Months at Premises during the tax period ............ | 10a. # of months   10b. From:   10c. To: | 10a. # of months   10b. From:   10c. To: | 10a. # of months   10b. From:   10c. To: |
| 11. | Monthly Base Rent before rent reduction (line 7 plus line 5b divided by line 10a)............ 11. | | | |
| 12. | Annualized Base Rent before rent reduction (line 11 X 12 months or line 4 from worksheet on page 3) .12. | | | |

- ■ If the line 12 amount is $249,999 or less, transfer the line 9 amount *(not the line 12 amount)* to line 13
- ■ If the line 12 amount is $250,000 or more, transfer the line 9 amount *(not the line 12 amount)* to line 14

| RATE CLASS | TAX RATE | TRANSFER THE AMOUNTS FROM LINES 13 THROUGH 16 TO THE CORRESPONDING LINES ON PAGE 1 | | |
|------------|----------|---|---|---|
| 13. ($0 - 249,999) ......... **0%** ....... 13. | | | | |
| 14. ($250,000 or more)... **6%** ....... 14. | | | | |
| 15. Tax Due before credit (line 14 multiplied by 6%) ........ 15. | | | | |
| 16. Tax Credit (see worksheet below) .16. | | | | |
| 17. Small Business Tax Credit (from pg. 3, or supplemental spreadsheet) (see instructions) ....17. | | | | |

**TAX CREDIT COMPUTATION WORKSHEET**

■ If the line 7 amount represents rent for the full 12 month period, your credit is calculated as follows:

$$\text{Amount on line 15} \times \left( \frac{\$300,000 \text{ minus the sum of lines 7 and 5b}}{\$50,000} \right) = \underline{\hspace{3cm}} = \text{your credit}$$

■ If the line 7 amount represents rent for less than the full 12 month period, your credit is calculated as follows:

$$\text{Amount on line 15} \times \left( \frac{\$300,000 \text{ minus line 12}}{\$50,000} \right) = \underline{\hspace{3cm}} = \text{your credit}$$

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## TO QUALIFY FOR SMALL BUSINESS TAX CREDIT

**A.** Is your "total income" as defined by Ad. Code Section 11-704.4(a) less than $10,000,000? ...................................... ☐ **YES** ☐ **NO**

If your answer to Question A is NO, you are not eligible for this credit.

**B.** Is your "Base Rent Before Rent Reduction" (page 2, line 7) for any premises at least $250,000 but less than $550,000? ...... ☐ **YES** ☐ **NO**

If the answer to this Question is NO for any of the premises, you are not eligible for this credit for those premises whose Base Rent Before Reduction is either less than $250,000 or equal to or greater than $550,000 and you should not complete this worksheet for those premises.

## INCOME FACTOR CALCULATIONS - Complete either lines 1a and 1b OR lines 2a and 2b

**1a.** Enter amount of total income, if total income is $5,000,000 or less (see instructions)............................................**1a.**

**1b.** Income factor (see instructions) ..............................................................................................................**1b.**

**2a.** Enter amount of total income if total income is more than $5,000,000 but less than $10,000,000 (see instructions)...........................................................................**2a.**

**2b.** If total income is more than $5,000,000 but less than $10,000,000: Income Factor is (10,000,000 - line 2a) / 5,000,000.............................................................**2b.**

## RENT FACTOR CALCULATIONS - Complete either lines 3a and 3b OR lines 4a and 4b

| | PREMISES | PREMISES | PREMISES |
|---|---|---|---|
| **3a.** Enter amount of base rent, if base rent from Page 2, line 7 is less than $500,000...................**3a.** | | | |
| **3b.** Rent factor (see instructions) ...........................**3b.** | | | |
| **4a.** Enter amount of base rent if base rent from Page 2, line 7 is at least $500,000 but less than $550,000 (see instructions). ..............................**4a.** | | | |
| **4b.** If base rent from Page 2, line 7 is at least $500,000 but less than $550,000: Rent Factor is ($550,000 - line 4a) / 50,000......**4b.** | | | |

## CREDIT CALCULATION

| | PREMISES | PREMISES | PREMISES |
|---|---|---|---|
| **5a.** Page 2, line 15 (Tax at 6%) ...............................**5a.** | | | |
| **5b.** Page 2, line 16 (Tax Credit from Tax Credit Computation Worksheet on Page 2).......**5b.** | | | |
| **5c.** (line 5a - line 5b) X (line 1b or 2b) X (line 3b or 4b). Enter here and on Page 2, line 17 .....................**5c.** | | | |

## WORKSHEET FOR TENANTS WHO PAY RENT FOR A PERIOD OTHER THAN ONE MONTH

To determine the annualized rent, divide the rent paid during the tax period by the number of days for which the rent was paid and multiply the result by the number of days in the tax year. Enter the result on line 4 here and on Form NYC-CRA, Page 2, line 12.

| | PREMISES | PREMISES | PREMISES |
|---|---|---|---|
| 1. Amount of rent paid for the period................... 1. | | | |
| 2. Number of days in the rental period for which rent was paid.................. 2. | | | |
| 3. Rent per day (divide line 1 by line 2. Round to the nearest whole dollar). 3. | | | |
| 4. Annualized rent (multiply rent per day, line 3 by 365. In case of a leap year, multiply by 366. Round to the nearest whole dollar)................... 4. | | | |