

				UAL 1/22				IAL R							N
		Name:						Name Change			Emplo	oyer Ide	ntifica	tion Numbe	er
		Address (number and stre	et):					Address Change			S	ocial Se	OR curity	Number	
	Address (number and street): City and State:				Zip: Country (if not US):				Federal Business Code						
		Business Telephone Num	oer:			Taxpayer's Em	ail Address	5:			Special Co		Code]
		REPORT FULL YEAR'S RE	ENT OF		UALIZEI	D RENT IF LES	S THAN FU	ULL YEAR ON	THIS R	ETURN	I. COMPL	ETE P/	AGES	3 2 AND 3	FIRST.
=		CHECK (1) THE TYPE OF BUSIN	IESS EN	TITY:	• [Corporation		• 🗌 Partr	nership		•	Indi	vidual	, estate or t	trust
		CHECK (🗸) IF APPLICABLE:			•			siness began: ness discontinued			=				
						TATION						— ▼Pa	aymer	ıt ▼	ļ
	Payment -	Amount being paid ele		ICALLY WIT		s returnA.						та	X DUE		
LINE		(from line 13 on pg. 2 or		EACH RATE			BASE REN		RATE		TOTA			X TAX RATE	:
• 1. • 2.	\$0 to \$249,999 \$250,000 and ove	supplemental spreadsheet)						.00 .00	0% 6%	1. ● 2.				0	0 0
• <u>2</u> . 3.		supplemental spreausiteer)		atal aproc	dahaa	t) (acc instru	untiona)			• 3.					
	Tax Credit (from pg. 2, line 16 or supplemental spreadsheet) (see instructions)									• 4.					
4.	Small Business Tax Credit (from pg. 2, line 17, or supplemental spreadsheet) (see instructions)							-	• 5.						
	Total Credits (add lines 3 and line 4) Total Tax Due After Tax Credit (line 2 minus line 5).							• 6.							
6.		,		,		•7.									
7.										• 8.					
8.		if line 7 is less than line	,							• 9.					
9.		nd penalties (See instru		,						• 10.					
10.		(if line 7 is greater than								• 10.					+
11.		nce Due (Add line 8 and					amount	on line A, ab	ove						
12.		of Subtenants								• 12.					
13.	If you are a member of a NYC combined group, enter the EIN of the designated agent or reporting corporation filing the business income tax return														
	_				CE	RTIFICAT	ON								
I also returi turn a I auth	o request a refund o n of NYC Real Prop and I agree to subm horize the Dept. of F	return, including any accomp of the amount of any overpay perty Tax escalations for whi nit such information as is neo inance to discuss the proces	ment o ch, and cessary	f the tax sh at such tin to establis	nown on me as, th sh the an	line 8, if any, a le taxpayer rec nount of such	s is attribut eives a cree overpayme	table to the incl dit or refund fro ent.	usion ii om the	n base	rent repo of taxable	rted on premi	i line ises c	2 of page	1 of this y this re
	■ → of officer				I	ītle		Date			Firm's E	Employe	r Iden	tification Nu	mber
	ARER'S Signature:			Preparer's printed nam	ne:			Date		•					
USE ONLY	\rightarrow —							Check if self-emp			Pre	eparer's	Telepl	hone Numb	er
	▲ Firm's na		Addres				Zip Code				L	•			<u> </u>
To		nce payable to the order or , you must enter your correct					•								ittanac
10 10		(FORM ONLY)		·		REMITTANCE	\$							S (FORM	
NYC DEPARTMENT OF FINANCE PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/FINANCE NYC DEPAR							TMEN D. BOX	T OF 5563	FINANCE	-,					

NEW YORK CITY DEPARTMENT OF FINANCE

CR-A

NYC DEPARTMENT OF FINANCE P.O. BOX 3933, NEW YORK, NY 10008-3933

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.

20012291

Form CR-A for the tax period June 1, 2021 to May 31, 2022 ONLY

Page	e 2
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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 PREM-ISES/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.

LIN	E DESCRIPTION	P	REMISES 1	PRE	EMISES 2	PR	EMISES 3				
• 1a.	Street Address	1a.									
1b.	Zip Code	1b.									
1c/d	Block and Lot Number										
• 2.	Gross Rent Paid (see instructions)	2.	ск 1d. Lot	1C. BLOCK	1d. LOT	1C. BLOCK	к 1d. Loт				
3.	Rent Applied to Residential Use	3.									
4a1.	SUBTENANT'S Name if Partnership or Corporate (if more than one subtenant, see instructions)										
• 4a2.	Employer Identification Number (EIN) for partnerships or corporations			• EIN		• EIN					
4b1.	SUBTENANT'S Name if Individual	4b1									
	Social Security Number (SSN) for individuals . <i>Rent received from SUBTENANT</i> (if more than one subtenant, see instructions)			• SSN		• SSN					
4d1.	Is this rent paid for a period less than 12 months	?4d1. YES		YES	ю 🗌	YES					
4d2.	If YES, how many months?	4d2. Total number	of months:	Total number of m	nonths:	Total number of	months:				
5a. 5b.	Other Deductions (attach schedule) Commercial Revitalization Program special reduction (see instructions)										
6.	Total Deductions (add lines 3, 4c, 5a and 5b)										
7.	Base Rent Before Rent Reduction (line 2 minus line) If the line 7 amount represents re	nt for less than th	e full year, proceed to	line 10, or							
NC	 If the line 7 amount plus the line 5 If the line 7 amount plus the line 5 	5b amount is \$249	,999 or less and repre	esents rent fo							
	•		· · ·		or a run year, trans						
8.	35% Rent Reduction (35% X line 7)	8.									
9.	Base Rent Subject to Tax (line 7 minus line 8)										
10.	COMPLETE LINES 10 THR Tenants whose rent is not paid on a monthly basis, check and see instructions. Others complete lines 10a through1	box	IF YOU RENTED PH		R LESS THAN TH		AR				
10a.	Number of Months at Premises during the tax period		10b. From:	10a. # of months 1	0b. From:	10a. # of months	10b. From:				
			10c. To:	1	1 0c. To:	-	10c. To:				
11.	Monthly Base Rent before rent reduction						1				
12.	(line 7 plus line 5b divided by line 10a) Annualized Base Rent before rent reduction										
12.	(line 11 X 12 months or line 4 from worksheet on page										
	If the line 12 amountIf the line 12 amount		•	•		,					
	RATE CLASS TAX R	ATE TRANSFE	R THE AMOUNTS FROM	LINES 13 THR	OUGH 16 TO THE CO	RRESPONDIN	G LINES ON PAGE 1				
	13. (\$0 - 249,999) 0 %	513.									
	14. (\$250,000 or more) 6 %	o14									
	15. Tax Due before credit (line 14 multiplied by 6%)	15.									
	16. Tax Credit (see worksheet be	elow) . 16.									
	 14. (\$250,000 or more) 6% 15. Tax Due before credit (line 14 multiplied by 6%) 16. Tax Credit (see worksheet be 17. Small Business Tax Credit (from pg. 3, or supplement spreadsheet) (see instruction) Note: The tax credit only ap If the line Amount of If the line 	al									
	Note: The tax credit only ar	spreadsheet) (see instructions)17. 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		ts rent for the full 12 mon			follows:					
		(15 X (<u>\$300,000 minus the sum of lines 7 and 5b</u>) == your credit \$50,000 ount represents rent for less than the full 12 month period, your credit is calculated as follows:								
	20022291 $\operatorname{Amount on line 15 X}\left(\frac{\$300,000 \text{ minus line 12}}{\$50,000}\right) = \underline{\qquad} = \operatorname{your credit}$										

ADD	OU ARE FILING ON PAPER, USE THIS DITIONAL PREMISES. IF YOU CHOOSE S TAX CREDIT WORKSHEET WHICH Y	E TO USE A SPREADSH	HEET, YOU MUST USE THE S	SUPPLEMENTAL SMALL BUSI-					
1	TO QUALIFY FOR SMALL BUSINE	SS TAX CREDIT							
Α.	Is your "total income" as defined by Ad. Co If your answer to Question A is NO, you are								
В.	Is your "Base Rent Before Rent Reduction" (p If the answer to this Question is NO for any Before Reduction is either less than \$250,000 c	of the premises, you are n	ot eligible for this credit for those	premises whose Base Rent					
	INCOME FACTOR CALCULATIONS - Com	plete either lines 1a and	1 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.									
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.									
	RENT FACTOR CALCULATIONS - Comple	te either lines 3a and 3	b OR lines 4a and 4b						
3a.	Enter amount of base rent, if base rent from Page 2, line 7 is less than \$500,000 3a.	PREMISES	PREMISES	PREMISES					
3b.	Rent factor (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								
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 .								
			OR A PERIOD OTHER THAN						
			ne tax period by the number of days fo Ilt on line 4 here and on Form NYC-C	or which the rent was paid and multiply RA, 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 paid2.								
	 Rent per day (divide line 1 by line 2. Round to the nearest whole dollar). 3. 								
	 Amount of rent paid for the period								

Form CR-A for the tax period June 1, 2021 to May 31, 2022 ONLY