



NYC
202S

UNINCORPORATED BUSINESS TAX RETURN FOR INDIVIDUALS **2008**

For CALENDAR YEAR 2008 or FISCAL YEAR beginning _____, 2008 and ending _____

- Amended return Final return. Check box if you have ceased operations.
- Check box if you are engaged in an exempt unincorporated business activity

First name and initial		Last name	
Business name			
Business address (number and street)			
City and State		Zip Code	
Business Telephone Number	Date business began (mm-dd-yy)	Date business ended (mm-dd-yy)	

ENTER SOCIAL SECURITY NUMBER

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NEW YORK STATE SALES TAX ID NUMBER - ENTER 9, 10 OR 11 DIGITS

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BUSINESS CODE NUMBER FROM FEDERAL SCHEDULE C:

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

A. Payment	Pay amount shown on line 14 - Make check payable to: NYC Department of Finance		Payment Enclosed
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	● 13a.	
	(b) Credited to 2009 Estimated Tax on Form NYC-5UBTI	● 13b.	
14.	Total remittance due. Line 10 plus line 12. Enter payment amount on line A above	● 14.	
15.	Gross receipts or sales from federal return	● 15.	

CERTIFICATION

SIGN HERE	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 <input type="checkbox"/>			
PREPARER'S USE ONLY	Taxpayer's Signature:	Title:	Date:	Preparer's Social Security Number or PTIN
	Preparer's signature:	Preparer's printed name:	MM-DD-YY	● <table style="border: 1px solid black; width: 100%; height: 20px;"></table>
	● Firm's name	▲ Address	▲ Zip Code	Firm's Employer Identification Number
			MM-DD-YY	● <table style="border: 1px solid black; width: 100%; height: 20px;"></table>
			Check if self-employed <input type="checkbox"/>	

Name: _____ SSN: _____

SCHEDULE B Computation of Total Income

Items of business income, gain, loss or deduction			
1.	Net profit (or loss) from business, as reported for federal tax purposes from federal Schedule C or C-EZ	● 1.	
2.	Other business income (or loss) (see instructions).....	● 2.	
3.	Income taxes and unincorporated business tax paid this year and deducted on federal return	3.	
4.	Total income (combine lines 1, 2 and 3)	4.	
5.	Less: Charitable contributions (not to exceed 5% of line 4) (see instructions).....	5.	
6.	Balance (line 4 less line 5).....	6.	

Business Tax Credit Computation

1. If the amount on page 1, line 6, is \$1,800 or less, your credit on line 7 is the entire amount of tax on line 6. (NO TAX WILL BE DUE.)
2. If the amount on page 1, line 6, is \$3,200 or over, no credit is allowed. Enter "0" on line 7.
3. If the amount on page 1, line 6, is over \$1,800 but less than \$3,200, your credit is computed by the following formula:
 Amount on pg. 1, line 6 X $\left(\frac{\$3,200 \text{ minus tax on line 6}}{\$1,400} \right) =$ your credit

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

1. Nature of business or profession: _____
2. Did you file a New York City Unincorporated Business Tax Return for the following years:
 2006 YES NO
 2007 YES NO
 If "NO," state reason: _____
3. Enter home address: _____ Zip Code: _____
4. If business terminated during the current taxable year, state date terminated. (mm-dd-yy) _____ - _____ - _____
 (Attach a statement showing disposition of business property.)
5. Has the Internal Revenue Service or the New York State Department of Taxation and Finance increased or decreased any taxable income (loss) reported in any tax period, or are you currently being audited? YES NO
 If "YES", by whom? Internal Revenue Service State period(s): Beg.: _____ End.: _____
MM-DD-YY MM-DD-YY
 New York State Department of Taxation and Finance State period(s): Beg.: _____ End.: _____
MM-DD-YY MM-DD-YY
6. Has Form NYC-115 (Report of Federal/State Change in Taxable Income) been filed? YES NO

PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 9	DATE	AMOUNT
A. Payment with declaration, Form NYC-5UBTI (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)		

MAILING INSTRUCTIONS

To receive proper credit, you must enter your correct Social Security Number on your tax return and remittance.

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.

RETURNS WITH REMITTANCES
 NYC DEPARTMENT OF FINANCE
 UNINCORPORATED BUSINESS TAX
 P.O. BOX 5040
 KINGSTON, NY 12402-5040

RETURNS CLAIMING REFUNDS
 NYC DEPARTMENT OF FINANCE
 UNINCORPORATED BUSINESS TAX
 P.O. BOX 5050
 KINGSTON, NY 12402-5050

ALL OTHER RETURNS
 NYC DEPARTMENT OF FINANCE
 UNINCORPORATED BUSINESS TAX
 P.O. BOX 5060
 KINGSTON, NY 12402-5060

The due date for the calendar year 2008 is on or before April 15, 2009.

For fiscal years beginning in 2008, file on or before the 15th day of the fourth month following the close of the fiscal year.

