



NYC GENERAL CORPORATION 4S TAX RETURN

▲ DO NOT WRITE IN THIS SPACE - FOR OFFICIAL USE ONLY ▲

For CALENDAR YEAR 2002 or FISCAL YEAR beginning _____ 2002 and ending _____

2002

☐ Amended return ☐ Final return. Check box if the corporation has ceased operations. ☐ Special short period return (see inst.)

▼ Affix mailing label here ▼

Name

Address (number and street)

City and State

Zip Code

Business Telephone Number

Date business began in NYC

EMPLOYER IDENTIFICATION NUMBER

BUSINESS CODE NUMBER AS PER FEDERAL RETURN

IMPORTANT: Corporations licensed and/or regulated by the NYC Taxi and Limousine Commission use business code 9999 in lieu of federal code.

SCHEDULE A Computation of Tax

BEGIN WITH SCHEDULES B THROUGH E ON PAGE 2. TRANSFER APPLICABLE AMOUNTS TO SCHEDULE A.

A. Payment		Pay amount shown on line 15 - Make check payable to: NYC Department of Finance		Payment Enclosed	
1.	Net income (from Schedule B, line 8)	1.		X .0885	1.
2a.	Total capital (from Schedule C, line 7) (see instructions)	2a.		X .0015	2a.
2b.	Total capital - Cooperative Housing Corps. (see instructions)	2b.		X .0004	2b.
2c.	Cooperatives - enter: <input type="radio"/> BORO <input type="radio"/> BLOCK <input type="radio"/> LOT				
3a.	Compensation of stockholders (from Schedule D, line 1)	3a.			
3b.	Alternative tax (applies to corporations including professional corporations) (see instructions for worksheet)	3b.			
4.	Minimum tax - No reduction is permitted for a period of less than 12 months	4.			300 00
5.	Tax (line 1, 2a, 2b, 3b or 4, whichever is largest)	5.			
6.	First installment of estimated tax for period following that covered by this return: (a) If application for extension has been filed, enter amount from line 4 of Form NYC-6 (attach form)	6a.			
	(b) If application for extension has not been filed and line 5 exceeds \$1,000, enter 25% of line 5 (see instructions)	6b.			
7.	Total before prepayments (add lines 5 and 6a or 6b)	7.			
8.	Prepayments (from Prepayments Schedule, line E) (see instructions)	8.			
9.	Balance due (line 7 less line 8)	9.			
10.	Overpayment (line 8 less line 7)	10.			
11a.	Interest (see instructions)	11a.			
11b.	Additional charges (see instructions)	11b.			
11c.	Penalty for underpayment of estimated tax (attach Form NYC-222) .	11c.			
12.	Total of lines 11a, 11b and 11c	12.			
13.	Net overpayment (line 10 less line 12)	13.			
14.	Amount of line 13 to be: (a) Refunded	14a.			
	(b) Credited to 2003 estimated tax	14b.			
15.	TOTAL REMITTANCE DUE (see instructions) Enter payment amount on line A above	15.			
16.	NYC rent deducted on federal return (see instr.) THIS LINE MUST BE COMPLETED. ...	16.			
17.	Federal return filed: <input type="checkbox"/> 1120 <input type="checkbox"/> 1120-A <input type="checkbox"/> 1120S <input type="checkbox"/> 1120F				
18.	Gross receipts or sales from federal return	18.			
19.	Total assets from federal return	19.			

CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION

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

SIGN HERE →	Signature of officer	Title	Date	Preparer's Social Security Number or PTIN
	Preparer's signature	Check if self-employed <input type="checkbox"/>	Date	Firm's Employer Identification Number
PREPARER'S USE ONLY →	Firm's name (or yours, if self-employed)		Address	Zip Code

Attach copy of all pages of your federal tax return or pro forma federal tax return.

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 on your tax return and remittance.

ATTACH REMITTANCE TO THIS PAGE ONLY

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SCHEDULE B Computation of NYC Taxable Net Income

1.	Federal taxable income before net operating loss deduction and special deductions (see instructions).....	1.	
2.	Interest on federal, state, municipal and other obligations not included in line 1.....	2.	
3a.	NYS Franchise Tax and other income taxes, including MTA surcharge, deducted on federal return (see instr.).....	3a.	
3b.	NYC General Corporation Tax deducted on federal return (see instructions).....	3b.	
4.	ACRS depreciation and/or adjustment (attach Form NYC-399 or NYC-399Z) (see instructions).....	4.	
5.	Total (sum of lines 1 through 4)	5.	
6a.	New York City net operating loss deduction (see instructions)	6a.	
6b.	Depreciation and/or adjustment calculated under pre-ACRS or pre - 9/11/01 rules (attach Form NYC-399 or NYC-399Z) (see instr.)	6b.	
6c.	NYC and NYS tax refunds included in Schedule B, line 1 (see instructions).....	6c.	
7.	Total (sum of lines 6a through 6c).....	7.	
8.	Taxable net income (line 5 less line 7) (enter on page 1, Schedule A, line 1) (see instructions).....	8.	

S CORPORATIONS
see instructions
for line 1

SCHEDULE C Total CapitalBasis used to determine average value in column C. **Check one.** (Attach detailed schedule)

- ☐ - Annually ☐ - Semi-annually ☐ - Quarterly
☐ - Monthly ☐ - Weekly ☐ - Daily

	COLUMN A Beginning of Year	COLUMN B End of Year	COLUMN C Average Value
1. Total assets from federal return			
2. Real property and marketable securities included in line 1			
3. Subtract line 2 from line 1			
4. Real property and marketable securities at fair market value			
5. Adjusted total assets (add lines 3 and 4)			
6. Total liabilities (see instructions)			
7. Total capital (column C, line 5 less column C, line 6) (enter on page 1, Schedule A, line 2a or 2b)			

SCHEDULE D Certain Stockholders

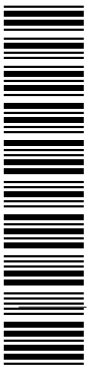
Include all stockholders owning in excess of 5% of taxpayer's issued capital stock who received any compensation, including commissions.

Name and Address - Give actual residence (Attach rider if necessary)	Social Security Number	Official Title	Salary & All Other Compensation Received from Corporation (If none, enter "0")

1. Total, including any amount on rider (enter on page 1, Schedule A, line 3a)	1.	
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SCHEDULE E The following information must be entered for this return to be complete.

1. New York City principal business activity _____
2. Does the corporation have an interest in real property located in New York City? (see instructions).....YES ☐ NO ☐
3. If "YES": (a) Attach a schedule of such property, including street address, borough, block and lot number.
 (b) Was a controlling economic interest in this corporation (i.e., 50% or more of stock ownership) transferred during the tax year?.....YES ☐ NO ☐
4. Does the corporation have one or more qualified subsidiary subsidiaries (QSSS)?.....YES ☐ NO ☐
 If "YES" Attach a schedule showing the name, address and EIN, if any, of each QSSS and indicate whether the QSSS filed or was required to file a City business income tax return. See instructions.



PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 8	DATE	AMOUNT	TWELVE DIGIT TRANSACTION ID CODE
A. Mandatory first installment paid with preceding year's tax			
Payment with declaration, Form NYC-400 (1)			
B. Payment with Notice of Estimated Tax Due, (2)			
Payment with Estimated Tax Due (3)			
C. Payment with extension, Form NYC-6 or NYC-6F			
D. Overpayment credited from preceding year			
E. TOTAL of A, B, C and D (enter on Schedule A, line 8) ...			

MAILING INSTRUCTIONS

RETURNS WITH REMITTANCES
NYC DEPARTMENT OF FINANCE
PO BOX 5040
KINGSTON, NY 12402-5040

RETURNS CLAIMING REFUNDS
NYC DEPARTMENT OF FINANCE
PO BOX 5050
KINGSTON, NY 12402-5050

ALL OTHER RETURNS
NYC DEPARTMENT OF FINANCE
PO BOX 5060
KINGSTON, NY 12402-5060