

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

Check box if you are filing a 52- 53-week taxable year

Amended return Final return
 Check box if the corporation has ceased operations.

Special short period return
 (See Instructions)

Check box if a pro-forma federal return is attached

Check box if you claim any 9/11/01-related federal tax benefits (see inst.)

Print or Type:

Name		
Address (number and street)		
City and State		Zip Code
Business Telephone Number	Date business began in NYC	Date business ended in NYC

EMPLOYER IDENTIFICATION NUMBER	
<input type="text"/>	<input type="text"/>
BUSINESS CODE NUMBER AS PER FEDERAL RETURN	
<input type="text"/>	

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.	<input type="text"/>	X .0885	1.
2a.	Total capital (from Schedule C, line 7) (see instructions)	2a.	<input type="text"/>	X .0015	2a.
2b.	Total capital - Cooperative Housing Corps. (see instructions).....	2b.	<input type="text"/>	X .0004	2b.
2c.	Cooperatives - enter: <input type="checkbox"/> BORO <input type="checkbox"/> BLOCK <input type="checkbox"/> LOT				
3a.	Compensation of stockholders (from Schedule D, line 1)	3a.	<input type="text"/>		
3b.	Alternative tax (see instructions)	3b.	<input type="text"/>		
4.	Minimum tax - No reduction is permitted for a period of less than 12 months	4.	<input type="text"/>		300 00
5.	Tax (line 1, 2a, 2b, 3b or 4, whichever is largest)	5.	<input type="text"/>		
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 2 of Form NYC-EXT	6a.	<input type="text"/>		
	(b) If application for extension has not been filed and line 5 exceeds \$1,000, enter 25% of line 5 (see instructions).....	6b.	<input type="text"/>		
7.	Total before prepayments (add lines 5 and 6a or 6b)	7.	<input type="text"/>		
8.	Prepayments (from Prepayments Schedule, line F) (see instructions).....	8.	<input type="text"/>		
9.	Balance due (line 7 less line 8).....	9.	<input type="text"/>		
10.	Overpayment (line 8 less line 7)	10.	<input type="text"/>		
11a.	Interest (see instructions)	11a.	<input type="text"/>		
11b.	Additional charges (see instructions)	11b.	<input type="text"/>		
11c.	Penalty for underpayment of estimated tax (attach Form NYC-222)....	11c.	<input type="text"/>		
12.	Total of lines 11a, 11b and 11c	12.	<input type="text"/>		
13.	Net overpayment (line 10 less line 12)	13.	<input type="text"/>		
14.	Amount of line 13 to be: (a) Refunded	14a.	<input type="text"/>		
	(b) Credited to 2009 estimated tax	14b.	<input type="text"/>		
15.	TOTAL REMITTANCE DUE (see instructions) Enter payment amount on line A above.....	15.	<input type="text"/>		
16.	NYC rent deducted on federal return (see instr.) THIS LINE MUST BE COMPLETED.	16.	<input type="text"/>		
17.	Federal return filed: <input type="checkbox"/> 1120 <input type="checkbox"/> 1120C <input type="checkbox"/> 1120S <input type="checkbox"/> 1120F <input type="checkbox"/> 1120H				
18.	Gross receipts or sales from federal return	18.	<input type="text"/>		
19.	Total assets from federal return	19.	<input type="text"/>		

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	<input type="checkbox"/> Preparer's Social Security Number or PTIN <input type="text"/>
	PREPARER'S USE ONLY	Preparer's signature	Preparer's printed name	
	▲ Firm's name (or yours, if self-employed)	▲ Address	▲ Zip Code	<input type="checkbox"/> Firm's Employer Identification Number <input type="text"/>

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.

SCHEDULE B Computation of NYC Taxable Net Income

Table with 8 rows for SCHEDULE B. Rows include: 1. Federal taxable income before net operating loss deduction... 2. Interest on federal, state, municipal and other obligations... 3a. NYS Franchise Tax and other income taxes... 3b. NYC General Corporation Tax... 4. ACRS depreciation and/or adjustment... 5. Total (sum of lines 1 through 4)... 6a. New York City net operating loss deduction... 6b. Depreciation and/or adjustment calculated under pre-ACRS... 6c. NYC and NYS tax refunds included in Schedule B... 7. Total (sum of lines 6a through 6c)... 8. Taxable net income (line 5 less line 7)...

S CORPORATIONS
see instructions
for line 1

SCHEDULE C Total Capital

Basis used to determine average value in column C. Check one. (Attach detailed schedule)

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

Table with 7 rows for SCHEDULE C. Columns: COLUMN A Beginning of Year, COLUMN B End of Year, COLUMN C Average Value. Rows include: 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, 7. Total capital (column C, line 5 less column C, line 6)...

SCHEDULE D Certain Stockholders

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

Table with 4 columns: Name and Address, Social Security Number, Official Title, Salary & All Other Compensation Received from Corporation. Row 1: Total, including any amount on rider (enter on page 1, Schedule A, line 3a)...

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)
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?
4. Does the corporation have one or more qualified subchapter s subsidiaries (QSSS)?

COMPOSITION OF PREPAYMENTS SCHEDULE

Table with 3 columns: PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 8, DATE, AMOUNT. Rows include: A. Mandatory first installment paid with preceding year's tax, B. Payment with Declaration, Form NYC-400 (1), C. Payment with Notice of Estimated Tax Due (2) and (3), D. Payment with extension, Form NYC-EXT, E. Overpayment from preceding year credited to this year, F. TOTAL of A, B, C, D, E (enter on Schedule A, line 8)...

Table with 4 columns: MAILING INSTRUCTIONS, RETURNS WITH REMITTANCES, RETURNS CLAIMING REFUNDS, ALL OTHER RETURNS. Each column contains address information for the NYC Department of Finance.

