-57	CT-1:
> 2003	
	🗇 🥅 Amend

New York State Department of Taxation and Finance

5	ر 20		Unrelated I		s I		0 0.0	lor voor filore staat	heve	
ſ			Tax Return	Ì		200 Other filers enter tax		dar-year filers check	box: [
		Amended return	Tax Law – Article 13			beginning		ending		
	Er	nployer identification number	File number	Business telephone n	umber			If you claim an		
				()				overpayment, check box	Γ	
	Le	gal name of corporation			ſ	rade name/DBA			L	
	Ma	ailing name (if different from legal name above)		s	tate or country of incorporation	Date rece	ived (for Tax Department use	ə only)	
	c/									
	Νι	umber and street or PO box				ate of incorporation				
	Ci	ty	State	ZIP code	F	oreign corporations: date began usiness in NYS				
	N	AICS business code number (see instructions)		If your name, employ	ver ident	ification number, address,	Audit (for	Tax Department use only)		
		incipal unrelated business activity		or owner/officer infor Form DTF-95. If only may file Form DTF-9	mation your ac 6. You c Veb site.	has changed, you must file dress has changed, you an get these forms by fax, See the <i>Need help?</i>		lax Department use only)		
		u filed New York State Form C								
	-	pration Franchise Taxes by a No	-			Yes No				
Che	ck th	his box if you ceased operating	the unrelated business of	during the tax ye	ar cov	ered by this return			_	
(see s	section Who must file Form CT-13	in the instructions)	ala ta Mary Varia	<u>Ctata</u>	Oover avation Tax	<u></u>	Payment enclosed		_
A.	Payn Atta	nent – pay amount shown on li .ch your payment here.	ne 22. Make check payar	Die to: New York	State	Corporation Tax		Payment enclosed		
		Federal unrelated business taxable	income before not operating l	loss doduction and	oftor ¢1	000 specific doduction	1.			-
	2	New York State Article 13 tax								
	2									
	_									_
	 4 Grossed-up taxes for shareholders of New York S corporations (see instructions) 5 Other additions (see instructions) 6 Add lines 1 through 5 				,				_	
									_	
	7	Income from games of chance			7.		0.			
	8	Subtractions required for shareholde		· -	8.		_			
×	9	Other subtractions (see instruc			9.		_			
ta	10	Total subtractions (add lines 7,	,				10.			-
and tax	11	Taxable income before net op								-
e	12	New York net operating loss d	-							
ome						,				-
ğ			e income (subtract line 12 from line 11)							
of inc	• •	allocation is not claimed)					. 14.			
0 C	15	Tax based on income (multiply								
Computation	16	Minimum tax							250	00
Itai	17	Tax (line 15 or line 16, whichever								_
nd	18	Total prepayments from line 4								_
E o	19	Balance (if line 18 is less than lin								_
Ŭ	20			ructions)						
	21	Late filing and late payment p								
	22	Balance due (add lines 19, 20, a					_			
	23									
	24									
		25 Amount of overpayment on line 23 to be refunded (subtract line 24 from line 23)								_
Cer	tifica	ation. I certify that this return a	nd any attachments are	to the best of my	know	ledge and belief true	, correc	t, and complete.		
Sigr	ature	of authorized person		Offic	ial title			Date		
arer Iy	Firm's	name (or yours if self-employed)				ID number		Date		_
Paid preparer use only	Addre	SS				Signature of individual pre	paring this	s return		

Mail your return to: NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 22038, ALBANY NY 12201-2038 See back page for private delivery service information and address.

Have you been audited by the Internal Reven	ue Service in the past 5 years?	No If Yes, list years:
Federal return was filed on: 990T	Other:	Attach a complete copy of your federal return.

Schedule A – Unrelated business allocation

If you did not maintain a regular place of business outside New York State, leave this schedule blank. A regular place of business is any office, factory, warehouse, or other space regularly used by the taxpayer in its unrelated business. If you claim this allocation, attach a list of each place of business, the location, nature of activities, and number and duties of employees.

٨٧٥	erage value of:		A	Cto	-		E wa	В		
	-		New York	Sta	e		Eve	rywhe	re	
26	Real estate owned (see instructions)					_				
27	Gross rents (attach list; see instructions)	27.								
28	Inventories owned	28.								
29	Other tangible personal property owned (see instructions)	29.								
30	Total (add lines 26 through 29)	30.								
31	Percentage in New York State (divide line 30, column A, by line 30, colum	mn B)						31		%
Rec	ceipts in the regular course of business from:									
32	Sales of tangible personal property shipped to points within									
	New York State	32.								
33	All sales of tangible personal property	33.								
34										
35	Rentals of property	35.								
36	Other business receipts	36.								
37	Total (add lines 32 through 36)	37.								
38	Percentage in New York State (divide line 37, column A, by line 37, colum	nn B)						38	-	%
39	Wages, salaries and other compensation of employees (except									
	general executive officers; see instructions)	39.								
40	Percentage in New York State (divide line 39, column A, by line 39, colum	nn B)						40		%
41	Total of New York State percentages (add lines 31, 38, and 40)							41		%
42	Business allocation percentage (divide line 41 by three or by the number	r of pe	ercentages)					42		%
Cor	mposition of prepayments claimed on line 18*				Da	ate pai	d		Amount	
43	Payment with extension request, Form CT-5, line 5			43.						
44a	Second installment from Form CT-400			44a.						
44b	Third installment from Form CT-400			44b.						
44c	Fourth installment from Form CT-400			44c.						
45	Amount of overpayment credited from prior years						45.			
46	Total prepayments (add lines 43 through 45; enter here and on line 18)						46.			

* Taxpayers subject to the unrelated business income tax are not required to make estimated tax payments. If you did make these unrequired payments, please report them on lines 44a, 44b, and 44c.

Private delivery service — If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your return and pay tax. However, if, at a later date, you need to establish the date you filed your return or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery*

Services. See Need help? in the instructions for information on ordering forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your return, contact that private delivery service for instructions on how to obtain written proof of the date your return was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, address your return to: State Processing Center, 431C Broadway, Albany NY 12204-4836.