



General Business Corporation Franchise Tax Return

Tax Law – Article 9-A

Caution: This form must be used **only** for tax periods beginning on or after January 1, 2015. If you use it for any prior periods, the return will **not** be processed and will **not** be considered timely filed. As a result, penalties and interest may be incurred (see Form CT-1).

See instructions, Form CT-3-I, before completing return.

All filers must enter tax period:

Final return <input type="checkbox"/>		Amended return <input type="checkbox"/>		beginning <input type="text"/>		ending <input type="text"/>	
Employer identification number (EIN)		File number	Business telephone number ()		If you claim an overpayment, mark an X in the box <input type="checkbox"/>		
Legal name of corporation				Trade name/DBA			
Mailing name (if different from legal name above) c/o				State or country of incorporation			
Mailing address number and street or PO box				Date of incorporation		Foreign corporations: date began business in NYS	
City		State	ZIP code	Country (if not United States)		For office use only	
Principal business activity in NYS				NAICS business code number (from NYS Pub 910)			
If address/phone above is new, mark an X in the box <input type="checkbox"/>		If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See <i>Business information</i> in Form CT-1.					

A. Pay amount shown on Part 2, line 23. Make payable to: New York State Corporation Tax Attach your payment here. (Detach all check stubs; see instructions for details.)		Payment enclosed <input type="checkbox"/>	
B. Are you subject to the metropolitan transportation business tax (MTA surcharge)? (see instructions; mark an X in the appropriate box)		<input type="checkbox"/> B Yes <input type="checkbox"/> No <input type="checkbox"/>	
C. If you are disclaiming tax liability in New York State based on Public Law 86-272, mark an X in the box (see instructions)		<input type="checkbox"/> C	

Third – party designee (see instructions)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Designee's name (print)	Designee's phone number ()
	Designee's e-mail address		PIN

Certification: I certify that this return and any attachments are to the best of my knowledge and belief true, correct, and complete.

Authorized person	Printed name of authorized person		Signature of authorized person		Official title	
	E-mail address of authorized person			Telephone number ()		Date
Paid preparer use only (see instr.)	Firm's name (or yours if self-employed)		Firm's EIN		Preparer's PTIN or SSN	
	Signature of individual preparing this return		Address		City	State ZIP code
	E-mail address of individual preparing this return		Preparer's NYTPRIN or		Excl. code	Date

See instructions for where to file.

Content of Form CT-3

Part 1 – General corporate information	Part 5 – Computation of investment capital for the current tax year
Part 2 – Computation of balance due or overpayment	Part 6 – Computation of business apportionment factor
Part 3 – Computation of tax on business income base	Part 7 – Summary of tax credits claimed
Part 4 – Computation of tax on capital base	

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Part 1 – General corporate information

Section A – Qualification for preferential tax rates

If you are a corporation as identified in this section and qualify for preferential tax rates, mark an **X** in the boxes that apply to you (see instructions).

- 1 A qualified emerging technology company (QETC) for purposes of the lower tax rates, capital base tax cap, and fixed dollar minimum tax amounts 1
 - 2 A qualified New York manufacturer based on the principally engaged test for purposes of the lower business income base tax rate and fixed dollar minimum tax amounts 2
 - 3 A qualified New York manufacturer based on the principally engaged test for purposes of the lower capital base tax rate and capital base tax cap 3
 - 4 A qualified New York manufacturer based on the significant employment and property test for purposes of the lower tax rates, capital base tax cap, and fixed dollar minimum tax amounts 4
 - 5 Claiming cooperative housing corporation status for the lower capital base tax rate 5
 - 6 A small business eligible for the lower business income tax rates and possible capital base tax exception 6
- If you marked this box, complete line 6a; also mark the box at line 6b or 6c, if applicable.
- 6a Total capital contributions 6a
 - 6b **Small business taxpayers only:** you are also a QETC 6b
 - 6c **Small business taxpayers only:** you are also a qualified New York manufacturer 6c
- 7 A qualified entity of a New York State innovation hot spot that operates solely within such New York State innovation hot spot, and you have elected to be subject only to the fixed dollar minimum tax base 7

Section B – New York State information (see instructions)

- 1 Number of New York State employees 1
- 2 Wages paid to New York State employees 2
- 3 Number of business establishments in New York State 3
- 4 If you have an interest in, or have rented, real property in New York State, mark an **X** in the box and complete lines 4a and 4b (if multiple counties see instructions) 4
- 4a The real property's county 4a
- 4b The real property's value or rent 4b
- 5 If you are claiming an exception to the related member expense addback under Tax Law §208.9(o)(2)(B), mark an **X** in the box 5
- 5a If you marked the line 5 box, use line 5a to report the applicable exception number (1-4) and the amount of royalty payments 5a Number Amount
- 6 If you are not protected by Public Law 86-272 and are subject to tax **solely** as a result of deriving receipts in New York State, mark an **X** in the box 6

Section C – Filing information

- 1 **Federal return filed** – you must mark an **X** in one box and attach a complete copy of your federal return
 1120 • 1120 consolidated • 1120-REIT or 1120-RIC 1120S • 1120F • 1120-H
- 2 **Amended return** – If you marked the amended return box on page 1, then for any item(s) that apply, mark an **X** in the box and attach documentation
 Final federal determination • Date of determination NOL carryback • Capital loss carryback ... • 1139 • 1120X •
- 2a Enter the tax due amount from your most recently filed New York State return for this tax period • 2a
- 3 **Required attachments** – For all forms, other than tax credit claim forms, that are attached to this return, mark an **X** in the applicable box(es)
 CT-3.1 • CT-3.2 • CT-3.3 • CT-3.4 • CT-60 • CT-225 • Other (identify): _____ •
- 4 If you are claiming tax credits, enter the number of tax credit forms attached to this return. Where multiple forms are filed for the same credit, count **each** form filed. 4
- 5 If you filed federal Form 1120F and you have effectively connected income (ECI), mark an **X** in the box 5

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Part 2 – Computation of balance due or overpayment

Largest of three tax bases, minus credits, plus mandatory first installment

1a	Business income base tax (from Part 3, line 20)	•	1a			
1b	Capital base tax (from Part 4, line 15; see instructions)	•	1b			
1c	Fixed dollar minimum tax (see instr) • <input type="text" value="New York receipts"/>	•	1c			
2	Tax due (enter the amount from line 1a, 1b, or 1c, whichever is largest; see instructions)	•	2			
3	Tax credits used (from Part 7, line 2; see instructions)	•	3			
4	Tax due after credits (subtract line 3 from line 2; if line 3 is more than line 2, enter 0)	■	4			
5	If you filed a request for an extension, enter the amount from Form CT-5, line 2	•	5			
6	If you did not file Form CT-5 and line 4 is over \$1,000, see instructions	■	6			
7	Largest base minus credits, plus mandatory first installment (add line 4 and line 5 or 6)	•	7			

Penalties and interest

8	Estimated tax penalty (see instructions; if Form CT-222 is attached, mark an X in the box)	•	<input type="checkbox"/>	8		
9	Interest on late payment (see instructions)	•	9			
10	Late filing and late payment penalties (see instructions)	•	10			
11	Total penalties and interest (add lines 8, 9, and 10)	•	11			

Voluntary gifts/contributions (see instructions)

12a	Return a Gift to Wildlife	■	12a			
12b	Breast Cancer Research and Education Fund	■	12b			
12c	Prostate Cancer Research, Detection, and Education Fund	■	12c			
12d	9/11 Memorial	■	12d			
12e	Volunteer Firefighting & EMS Recruitment Fund	■	12e			
12f	Veterans Remembrance	■	12f			
12g	Women's Cancers Education and Prevention Fund	■	12g			
13	Total voluntary gifts/contributions (add lines 12a through 12g)	•	13			

Total amount due

14	Add lines 7, 11, and 13	•	14			
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Prepayments

15	Mandatory first installment	■	15			
16	Second installment (from Form CT-400)	■	16			
17	Third installment (from Form CT-400)	■	17			
18	Fourth installment (from Form CT-400)	■	18			
19	Payment with extension request (from Form CT-5, line 5)	■	19			
20	Overpayment credited from prior years <input type="text" value="Period"/>	■	20			
21	Overpayment credited from CT-3-M <input type="text" value="Period"/>	■	21			
22	Total prepayments (add lines 15 through 21; see instructions)	•	22			

Payment due or overpayment to be credited/refunded

23	Balance due (If line 22 is less than line 14, subtract line 22 from line 14 and enter the result here. This is the amount due; enter payment amount on page 1, line A.)	■	23			
24	Overpayment (If line 22 is more than line 14, subtract line 14 from line 22. This is your overpayment; enter the result here and see instructions.)	■	24			
25	Amount of overpayment to be credited to next period (see instructions)	■	25			
26	Balance of overpayment available (subtract line 25 from line 24; see instructions)	•	26			
27	Amount of overpayment to be credited to Form CT-3-M	•	27			
28	Balance of overpayment to be refunded (subtract line 27 from line 26; see instructions)	■	28			
29	Unused tax credits to be refunded (see instructions)	■	29			
30	Unused tax credits applied to next period	■	30			

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Part 3 – Computation of tax on business income base

1	Federal taxable income (FTI) before net operating loss (NOL) and special deductions (see instructions)	•	1	
2	Additions to FTI (from Form CT-225, line 5)	•	2	
3	Add lines 1 and 2	•	3	
4	Subtractions from FTI (from Form CT-225, line 10)	•	4	
5	Subtract line 4 from line 3	•	5	
6	Subtraction modification for qualified banks (from Form CT-3.2, Schedule A, line 1; see instructions)	•	6	
7	Entire net income (ENI) (subtract line 6 from line 5)	•	7	
8	Investment and other exempt income (from Form CT-3.1, Schedule D, line 1)	•	8	
9	Subtract line 8 from line 7	•	9	
10	Excess interest deductions attributable to investment income, investment capital, and other exempt income (from Form CT-3.1, Schedule D, line 2)	•	10	
11	Business income (add lines 9 and 10)	•	11	
12	Addback of income previously reported as investment income (from Form CT-3.1, Schedule F, line 6; if zero, enter 0; see instructions)	•	12	
13	Business income after addback (add lines 11 and 12)	•	13	
14	Business apportionment factor (from Part 6, line 55)	•	14	
15	Apportioned business income after addback (multiply line 13 by line 14)	•	15	
16	Prior net operating loss conversion subtraction (from Form CT-3.3, Schedule C, line 4)	•	16	
17	Subtract line 16 from line 15	•	17	
18	NOL deduction (from Form CT-3.4, line 6)	•	18	
19	Business income base (subtract line 18 from line 17)	•	19	
20	Business income base tax (multiply line 19 by the appropriate business income tax rate from the tax rates schedule in Form CT-3-I; enter here and on Part 2, line 1a; see instructions)	•	20	

Note: If you make any entry on line 2, 4, 6, 8, 10, 12, 16, or 18, you **must** complete and file the appropriate attachment form, or any tax benefit claimed may be disallowed, or there may be a delay in receiving such benefit.



Part 4 – Computation of tax on capital base (see instructions)

		A Beginning of year	B End of year	C Average value
1	Total assets from federal return			
2	Real property and marketable securities included on 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 net assets (subtract line 6, column C, from line 5, column C)			
8	Investment capital (from Part 5, line 19; if zero or less, enter 0)			
9	Business capital (subtract line 8 from line 7)			
10	Addback of capital previously reported as investment capital (from Part 5, line 20, column C; if zero or less, enter 0)			
11	Total business capital (add lines 9 and 10)			
12	Business apportionment factor (from Part 6, line 55)			
13	Apportioned business capital (multiply line 11 by line 12)			
14	New small business (if in first two tax years, mark an X in one box) Year one <input type="checkbox"/> Year two <input type="checkbox"/>			
15	Capital base tax (multiply line 13 by the appropriate capital base tax rate from the tax rates schedule in Form CT-3-I; enter here and on Part 2, line 1b)			

Part 5 – Computation of investment capital for the current tax year (see instructions)

		A Average fair market value as reported	B Liabilities attributable to column A amount	C Net average value (column A - column B)
16	Total capital that generates income claimed to not be apportionable to New York under the U.S. Constitution (from Form CT-3.1, Schedule E, line 1).....			
17	Total of stocks actually held for more than one year (from Form CT-3.1, Schedule E, line 2)			
18	Total of stocks presumed held for more than one year (from Form CT-3.1, Schedule E, line 3)			
19	Total investment capital for the current year (Add column C lines 16, 17, and 18; enter the result here and on Part 4, line 8. If zero or less, enter 0.)			

Addback of capital previously reported as investment capital

		A Average fair market value as reported	B Liabilities attributable to column A amount	C Net average value (column A - column B)
20	Total of stocks previously presumed held for more than one year, but did not meet the holding period (from Form CT-3.1, Schedule F, line 1; enter here and on Part 4, line 10)			

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Part 6 – Computation of business apportionment factor (see instructions)

		A – New York State	B – Everywhere
Section 210-A.2			
1	Sales of tangible personal property		
2	Sales of electricity		
3	Net gains from sales of real property		
Section 210-A.3			
4	Rentals of real and tangible personal property		
5	Royalties from patents, copyrights, trademarks, and similar intangible personal property		
6	Sales of rights for certain closed-circuit and cable TV transmissions of an event		
Section 210-A.4			
7	Sale, licensing, or granting access to digital products		
Section 210-A.5(a)(1) – Fixed percentage method for qualified financial instruments (QFIs)			
8	To make this irrevocable election, mark an X in the box (see instructions)		<input type="checkbox"/> 8
Section 210-A.5(a)(2) – Mark an X in each box that is applicable (see line 8 instructions)			
Section 210-A.5(a)(2)(A)			
9	Interest from loans secured by real property		
10	Net gains from sales of loans secured by real property		
11	Interest from loans not secured by real property (QFI • <input type="checkbox"/>)		
12	Net gains from sales of loans not secured by real property (QFI • <input type="checkbox"/>)		
Section 210-A.5(a)(2)(B) (QFI • <input type="checkbox"/>)			
13	Interest from federal debt		
14	Net gains from federal debt		
15	Interest from NYS and its political subdivisions debt		
16	Net gains from NYS and its political subdivisions debt		
17	Interest from other states and their political subdivisions debt		
18	Net gains from other states and their political subdivisions debt		
Section 210-A.5(a)(2)(C) (QFI • <input type="checkbox"/>)			
19	Interest from asset-backed securities and other government agency debt		
20	Net gains from government agency debt or asset-backed securities sold through an exchange		
21	Net gains from all other asset-backed securities		
Section 210-A.5(a)(2)(D) (QFI • <input type="checkbox"/>)			
22	Interest from corporate bonds		
23	Net gains from corporate bonds sold through broker/dealer or licensed exchange		
24	Net gains from other corporate bonds		
Section 210-A.5(a)(2)(E)			
25	Net interest from reverse repurchase and securities borrowing agreements		
Section 210-A.5(a)(2)(F)			
26	Net interest from federal funds		
Section 210-A.5(a)(2)(I) (QFI • <input type="checkbox"/>)			
27	Net income from sales of physical commodities		
Section 210-A.5(a)(2)(J) (QFI • <input type="checkbox"/>)			
28	Marked to market net gains		
Section 210-A.5(a)(2)(H) (QFI • <input type="checkbox"/>)			
29	Interest from other financial instruments		
30	Net gains and other income from other financial instruments		



Part 6 – Computation of business apportionment factor *(continued)*

		A – New York State	B – Everywhere
Section 210-A.5(b)			
31 Brokerage commissions	• 31		
32 Margin interest earned on behalf of brokerage accounts	• 32		
33 Fees for advisory services for underwriting or management of underwriting	• 33		
34 Receipts from primary spread of selling concessions	• 34		
35 Receipts from account maintenance fees	• 35		
36 Fees for management or advisory services	• 36		
37 Interest from an affiliated corporation	• 37		
Section 210-A.5(c)			
38 Interest, fees, and penalties from credit cards	• 38		
39 Service charges and fees from credit cards	• 39		
40 Receipts from merchant discounts	• 40		
41 Receipts from credit card authorizations and settlement processing ..	• 41		
42 Other credit card processing receipts	• 42		
Section 210-A.5(d)			
43 Receipts from certain services to investment companies	• 43		
Section 210-A.6			
44 Receipts from railroad and trucking business	• 44		
Section 210-A.6-a			
45 Receipts from the operation of vessels	• 45		
Section 210-A.7			
46 Receipts from air freight forwarding	• 46		
47 Receipts from other aviation services	• 47		
Section 210-A.8			
48 Advertising in newspapers or periodicals	• 48		
49 Advertising on television or radio	• 49		
50 Advertising via other means	• 50		
Section 210-A.9			
51 Transportation or transmission of gas through pipes	• 51		
Section 210-A.10			
52 Receipts from other services/activities not specified	• 52		
Section 210-A.11			
53 Discretionary adjustments	• 53		
Total receipts			
54 Add lines 1 through 53 in columns A and B	• 54		

Calculation of business apportionment factor

55 New York State business apportionment factor *(divide line 54, column A by line 54, column B and enter the result here; round to the fourth decimal place)* •

Enter line 55 on Part 3, *Computation of tax on business income base*, line 14; and on Part 4, *Computation of tax on capital base*, line 12.



Part 7 – Summary of tax credits claimed

1 Have you been convicted of an offense, or are you an owner of an entity convicted of an offense, defined in New York State Penal Law, Article 200 or 496, or section 195.20? (see Form CT-1; mark an **X** in one box)..... 1 Yes No

Enter in the appropriate box below the amount of each tax credit **used** to reduce the tax due shown on Part 2, line 2, and attach the corresponding properly completed claim form. The amount of credit to enter is computed on each credit form and carried to this section.

CT-37	<input type="text"/>	CT-604	<input type="text"/>	DTF-621	<input type="text"/>
CT-40	<input type="text"/>	CT-605	<input type="text"/>	DTF-622	<input type="text"/>
CT-41	<input type="text"/>	CT-606	<input type="text"/>	DTF-624	<input type="text"/>
CT-43	<input type="text"/>	CT-607	<input type="text"/>	DTF-630	<input type="text"/>
CT-44	<input type="text"/>	CT-611	<input type="text"/>	Other credits •	<input type="text"/>
CT-46	<input type="text"/>	CT-611.1	<input type="text"/>		
CT-47	<input type="text"/>	CT-611.2	<input type="text"/>		
CT-236	<input type="text"/>	CT-612	<input type="text"/>		
CT-238	<input type="text"/>	CT-613	<input type="text"/>		
CT-239	<input type="text"/>	CT-631	<input type="text"/>		
CT-241	<input type="text"/>	CT-633	<input type="text"/>		
CT-242	<input type="text"/>	CT-634	<input type="text"/>		
CT-243	<input type="text"/>	CT-635	<input type="text"/>		
CT-246	<input type="text"/>	CT-636	<input type="text"/>		
CT-248	<input type="text"/>	CT-637	<input type="text"/>		
CT-249	<input type="text"/>	CT-638	<input type="text"/>		
CT-250	<input type="text"/>	CT-639	<input type="text"/>		
CT-259	<input type="text"/>	CT-640	<input type="text"/>		
CT-261	<input type="text"/>	CT-641	<input type="text"/>		
CT-501	<input type="text"/>	CT-642	<input type="text"/>		
CT-502	<input type="text"/>	CT-643	<input type="text"/>		
CT-601	<input type="text"/>	CT-644	<input type="text"/>		
CT-602	<input type="text"/>	CT-645	<input type="text"/>		
CT-603	<input type="text"/>	CT-646	<input type="text"/>		

2 Total tax credits claimed above (enter here and on Part 2, line 3; attach appropriate form for each credit claimed) ● **2**

3 Total tax credits claimed that are refund eligible (see instructions) ● **3**

4a If you claimed the QEZE tax reduction credit and you had a 100% zone allocation factor, mark an **X** in the box ● **4a**

4b If you claimed the tax-free NY area tax elimination credit, and you had a 100% area allocation factor, mark an **X** in the box ● **4b**

4c If you claimed the tax-free NY area excise tax on telecommunications credit and you had a 100% area allocation factor, mark an **X** in the box ● **4c**

