Nev	v York State Department of Taxation and Finance		For calendar ye	or 1002
	CT-3-S New York S Corporation			period:
[1]		beginning		
	Tax Law - Articles 9-A and 22	ending		
Em,	ployer identification number File number You must report	For office of		
L	Changes to your	ļ	,	
Nar		·		
	PLAGE LABEL HERE owner/officer information on Form	Date receiv	ved	
Nur	nber and street City or town State ZIP code DTF-95. Also, if			
	address on return is new, check box.			
Trac	Business activity code number			
	Susmess telephone number (from federal refurn)			
Prin	cipal business activity State or country of incorporation date Foreign corporations:	1		
	date hegan business in NYS	Audit use		
Has	the corporation revoked its election to be treated Number of shareholders	1		
as a	New York S corporation? Yes No			
lf Ye	es, give effective date			
			Payment enclosed	
Α.	Payment - pay amount shown on line 46 — Make check payable to: New York State Corporation	Tax	,	
Cor	mputation of Entire Net Income Base			
1	Federal taxable income before net operating loss and special deductions	. 1 •)	
	Interest on federal, state, municipal and other obligations not included on line 1)	
3	Deductions directly attributable to subsidiary capital (attach list))	
4	Deductions indirectly attributable to subsidiary capital (attach list))	
5	New York State, other state and local taxes deducted on your federal return (see instructions))	T
6	ACRS and MACRS deductions used in the computation of line 1 (attach Form CT-399))	†
7	Other additions (attach list — see instructions))	
8	Add lines 1 through 7	8 •)	
9	Income from subsidiary capital (from Form CT-3-S-ATT, line 49)			
10	50% of dividends from nonsubsidiary corporations (see instructions) 10			
11	Foreign dividends gross-up not included on lines 9 and 10			
	New York net operating loss deduction (attach federal and NYS computations) 12			
	Allowable New York depreciation (attach Form CT-399)			
	Other subtractions (attach list — see instructions)			
15				
	Entire net income (subtract line 15 from line 8)		· · · · · · · · · · · · · · · · · · ·	
	Investment income for allocation (from Form CT-3-S-ATT, line 63 but not more than line 16)			<u> </u>
	Business income for allocation (subtract line 17 from line 16).			
	Allocated investment income (multiply line 17 by % from Form CT-3-S-ATT, line 51)			
				
	Entire net income base (add lines 19 and 20)	21		Щ
	Entire net income base multiplied by corporate tax rate (see instructions)	22 •	·	
	Entire net income base multiplied by Article 22 tax rate (see instructions)			
	Tax on entire net income base (subtract line 23 from line 22)			
	Fixed dollar minimum tax before Article 22 tax equivalent reduction (see instructions)			+
	Gross payroll	23		
26	Article 22 tax equivalent reduction (enter amount from line 23)	26		
27	Fixed dollar minimum tax (subtract line 26 from line 25 - see instructions for limitation)			
28	Tax (enter amount from line 24 or 27, whichever is larger)			_
29	Tax surcharge rate, if applicable (see instructions)			
30	Tax and tax surcharge (add lines 28 and 29)			
31	Recapture of tax credits (see instructions)			
32	Total tax (add lines 30 and 31)			_
	,			

Continue on page 2

	First installment of estimated tax for next tax period:						
33	a If application for extension was filed, enter amount from	om Form	CT-5.4, Ii	ne 5		33a	
33	bit Form CI-5.4 was not filed and line 32 is over \$1,000), enter 2	5% of lir	ne 32		22h	
34	Add line 32 and line 33a or 33b					34	
35	Prepayments: First installment (date_)	35			
36	Second installment		j	36			
37	Third installment(date_		,)	37			
38	Final installment(date_			38			
39	Payment with extension Form CT-5.4(date_		<i>)</i>	39			
40	Credit from prior years		,	40			
41	Total prepayments (add lines 35 through 40)	• • • • • • • •				a. L	
42	Balance (if line 41 is less than line 34, subtract line 41 from	n line 34		c largar antar (1011)	· · · · · · · · · · · · · · · · · · ·	41	
43	Interest on late payment (see instructions)	1 11110 04,	11 11116 41 1	s larger, enter U)	• • • • • • • • • • • •	42	
44	Late filing and late payment penalties (see instructions)				• • • • • • • • • • • • •	43	
45	Penalty for underpayment of estimated tax (check box		· · · · · · · · · · · · · · · · · · ·			44	
46	Balance due (add lines 42 through 45 — enter payment or	LLJ II FUI	III CI-222	attacnea - it none,	enter "0")	45	
47	Overpayment (if line 34 is loss than line 41, see instruction	ilin e a) .		• • • • • • • • • • • • • • • • • • • •		46	
48	Amount of overnayment to be credited to payt paried	s)	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • •	47	
49	Amount of overpayment to be credited to next period.			• • • • • • • • • • • • • • • • • • • •		48	
50	Balance of overpayment to be refunded (subtract line 4)	B from line	9 <i>47</i>)	• • • • • • • • • • • • • • • • • • • •		49	
51	Does this corporation have an interest in real property	y located	in New	York State?		50 • □ Ye	
J1	Has controlling interest in this corporation's stock char	nged at a	iny time	during the last 3	years?	51 ● □ Ye	es ●□ No
E 0	If you answered Yes to both questions 50 and 51, atta	cn an ex	pianation	(see instructions).	. [
52	Are you claiming small business taxpayer status to lower the	tax rate of	on the enti	re net income bas	e (line 22)?	52 🔃 Y	es 🔳 No
<u> </u>	Enter total capital contributions (see worksheet instruction	ns)		<u> </u>		53	
SUS	irenoider Information — All New York S Corporations	must cor	nniete Pa	ort I Part II and	Port III Only	New York S C	Corporations
	the state of recupitates that now through to their sha	nenoider	s snould	COMPLETE Part 11	J.		- por amorro
Sna Ent	areholder Information, Part I (attach separate sheet if	necessai	ry; check	here if sepa	rate sheet is a	ttached)	
No	er total number of shareholders in box on Page 1. ne and Address of Shareholder Ch.						
ivai		eck box		· · · · · · · · · · · · · · · · · · ·		Stock Owners	hip
Che	ale have if announts out to the contract of th	elow if	So	cial Security	Number		d Held
	non	resident	<u> </u>	Number	of Shares	From	То
A •							
	<u> </u>		•				
в	•						
				<u> </u>			
c •	۰						
			•	1 1		ļ	
D •	-						
			•				
	reholder Information, Part II — Shareholders' Shares shares below, you may attach a copy of federal Scheduck applicable item below.	s of Inco	or each s	hareholder. How	ever, you must	complete the	Total column
54	Ordinary income (loss) from trade or business activities		A	В	Ç	D	Total
55	Net income (loss) from rental real estate activities						•
56	Net income (loss) from other rental activities	· · · ·		 			•
57	Portfolio income (loss)	· · · · ├──		+			•
58	Portfolio income (loss)	· · · · 		+			•
	Net gain (loss) under section 1231 (other than due to casualty or theft)						•
59	Other income (loss) (attach schedule)					-	•
60	Other income (loss) (attach schedule) Total income (loss) (add lines 54 through 59)						•
61	Charitable contributions						
62	Section 179 expense deduction	[
63	Expenses related to portfolio income (loss)	ļ		1			
64	Other deductions (add lines 61 through 64)						•
65	Total deductions (add lines 61 through 64)						
			-				_

					1	
	Fodoral tour professions the market profession to	<u>A</u>	В	С	D	Total
66 67	Federal tax preference items for minimum tax					
Ο,	accrued in 1992					
68	Total foreign taxes (check one) Paid Accrued				-	
69	Reduction in foreign taxes					
70	Total property distributions (including cash)					
	other than dividend distributions reported on line 72					•
71	Other items and amounts not included above					
	that are required to be reported separately to				1 3.	
	shareholders for federal purposes (attach schedule)					
72	Total dividend distributions paid from accumulated		The state of the s			
	earnings and profits contained in other retained					
	earnings					
	reholder Information, Part III — Shareholders' Shares of	Changes fro	um Fodovol Itor			
Silai	enolder miormation, Fait III — Shareholders Shares of	A A	B	C	D	Total
Addi	tions	~	 	†	D	Total
73						
13	Article 9-A					
74	Accelerated cost recovery system (ACRS) and modified		1			
	accelerated cost recovery system (MACRS) deductions					
	(from Form CT-399)				 	ļ <u>.</u>
	Other additions (see instructions, attach explanation)					
Subt	ractions					
76	New York depreciation (from Form CT-399)	-		-		
77	, , , , , , , , , , , , , , , , , , , ,			<u> </u>		
	er Items (see instructions, attach explanation)					
78	Additions to federal itemized deductions					
79	Subtractions from federal itemized deductions		:			
15	Subtractions from federal itemized deductions				·	<u> </u>
80	New York adjustments to federal tax preference items					
——Shar	eholder Information, Part IV — Shareholders' Shares of New Yo	rk S Corporati	ion's New York T	ax Credits and	Taxes on Early	Dispositions
		A	В	С	D	Total
81	Investment tax credit and/or retail enterprise tax					
	credit (attach Form CT-46)					•
82	Investment tax credit on research and development				1 .	
	property at the optional rate (attach Form CT-46)					•
83	Tax on early dispositions — investment tax credit,					
	research and development tax credit and/or retail					
	enterprise tax credit (attach Form CT-46 and/or CT-42)					
84	Special additional mortgage recording					
	tax credit (attach Form CT-43)					
٥.5	EDZ was a few and it (up 1 5 DEC cost)					
85	EDZ wage tax credit (attach Form DTF-601)		 			
86	EDZ investment tax credit (attach Form DTF-603)					
UU	LDE INVESTINENT TAX CITCUIT (attach FUIII DIF-903)					
87	EDZ capital corporation credit (attach Form DTF-602)					
88	Tax on early dispositions — EDZ investment tax credit		 			+
	(attach Form DTF-603)	200				
	(- 309—			1	1

Page	4	CT-3-S	(1992)
------	---	--------	--------

Additional Information		
Check boxes for any ta Shareholder Informat	${\sf x}$ credits claimed by the New York S corporation that flow through ion, Part IV.	gh to its shareholders. See instructions for
Tax credits: Check form	ns filed and attach forms • CT-42 • CT-43 • CT-4 • CT-46.1 • DTF-601 • DTF-	5
	☐ 1120	Other:
Interest deducted in cor	mputing federal taxable income	
If the IRS has complete	ed an audit of any of your returns within the last five years, list y	ears:
If a member of an affilia	ated federal group, primary corporation:	EIN ●
If more than 50% owner	nd by another corporation, parent corporation:	EIN ●
	olved in a corporate merger, consolidation or acquisition on or after attach Form CT-3, Schedule F.	April 19, 1989? Yes ● No ●
If this return is for a term year (see instructions for	nination year, check the appropriate box to indicate which method r Form CT-3-S).	of accounting was used for the New York S short
Norma	al accounting rules	
Daily	pro rata allocation	
If you use a paid prepare	er or for any other reason do not need New York State forms mail	ed to you next year, check box
Certification. I certify th	at this return and any attachments are to the best of my knowledg	e and belief true, correct and complete.
Date	Signature of elected officer or authorized person	Official title
Date	Print or type name of paid individual or firm preparing this return	Signature of individual preparing this return
Paid preparer's ID number	Paid preparer's address	

 Mail your return to: NYS Corporation Tax Processing Unit P O Box 1909 Albany NY 12201-1909