



# CT-3-S

Final Return  
(see procedure in instr.)

New York State Department of Taxation and Finance

## New York S Corporation Franchise Tax Return Tax Law — Articles 9-A and 22

1996 calendar yr. filers, check box   
Other filers enter tax period:

beginning   
ending

Employer identification number		File number		If address on return is new, check box (see instructions). <input type="checkbox"/>	For office use only
Mailing Name and Address	Taxpayer's business name			If your name, employer identification number, address or owner/officer information has changed, you must file Form DTF-95 (see instructions). If no form is enclosed, call 1 800 462-8100 to request one. From areas outside the U.S. and Canada, call (518) 485-6800.	Date received
	Business name at location below (if different from business name above)				
	c/o Street or PO Box				
	City State ZIP code				
Trade name		Business telephone number ( )		Business activity code number (from federal return)	Audit use
Principal business activity		State or country of incorporation	Date of incorporation	Foreign corporations: date began business in NYS	
Has the corporation revoked its election to be treated as a New York S corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, give effective date		Number of shareholders	

**A. Payment** — pay amount shown on line 52. Make check payable to: **New York State Corporation Tax**  
Attach your payment here.

Payment enclosed

	1	Federal taxable income before net operating loss and special deductions	1	•	
	2	Interest income on federal, state, municipal and other obligations not included on line 1	2	•	
	3a	Interest deductions directly attributable to subsidiary capital (see instructions)	3a	•	
	3b	Non-interest deductions directly attributable to subsidiary capital (see instructions)	3b	•	
	4a	Interest deductions indirectly attributable to subsidiary capital (see instructions)	4a	•	
	4b	Non-interest deductions indirectly attributable to subsidiary capital (see instructions)	4b	•	
	5	New York State and other state and local taxes deducted on your federal return (see instructions)	5	•	
	6	ACRS and MACRS deductions used in the computation of line 1 (attach Form CT-399)	6	•	
	7	Other additions (attach list; see instructions)	7	•	
	8	Add lines 1 through 7	8	•	
Computation of Entire Net Income Base	9	Income from subsidiary capital (from Form CT-3-S-ATT, line 49)	9	•	
	10	50% of dividends from nonsubsidiary corporations (see instructions)	10	•	
	11	Foreign dividends gross-up not included on lines 9 and 10	11	•	
	12	New York net operating loss deduction (attach federal and NYS computations)	12	•	
	13	Allowable New York depreciation (attach Form CT-399)	13	•	
	14	Other subtractions (attach list; see instructions)	14	•	
	15	Total subtractions (add lines 9 through 14)	15	•	
	16	Entire net income (subtract line 15 from line 8)	16	•	
	17	Investment income for allocation (from Form CT-3-S-ATT, line 65 but not more than the amount on line 16)	17	•	
	18	Business income for allocation (subtract line 17 from line 16)	18	•	
	19	Allocated investment income (multiply line 17 by <input type="text"/> % from Form CT-3-S-ATT, line 51)	19	•	
	20	Allocated business income (multiply line 18 by <input type="text"/> % from Form CT-3-S-ATT, line 19 or line 27)	20	•	
	21	Entire net income base (add lines 19 and 20)	21	•	
	22	Entire net income base multiplied by corporate tax rate (see instructions)	22	•	
	23	Entire net income base multiplied by Article 22 tax rate (see instructions)	23	•	
	24	Tax on entire net income base (subtract line 23 from line 22)	24	•	
	25	Fixed dollar minimum tax before Article 22 tax equivalent reduction (see instructions)	25	•	
		Gross payroll			
Tax Computation	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)	27	•	
	28	Tax (enter amount from line 24 or 27, whichever is larger)	28	•	
	29	Special additional mortgage recording tax credit (from Form CT-43 or Form CT-43.1)	29	•	
	30	Balance (subtract line 29 from line 28)	30	•	
	31	Tax due (amount from line 27 or 30, whichever is larger)	31	•	
	32	State tax surcharge rate, if applicable <input type="text"/> % (see instructions)	32	•	
	33	Tax and state tax surcharge (add lines 31 and 32)	33	•	
	34	Recapture of tax credits (see instructions)	34	•	
	35	Total tax (add lines 33 and 34; enter here and on page 2, line 36)	35	•	

**First installment of estimated tax for the next tax period:**

36	Enter amount from line 35 on page 1 .....	36	
37a	If request for extension was filed, enter amount from Form CT-5.4, line 4 .....	37a	
37b	If Form CT-5.4 was not filed and line 36 is over \$1,000, enter 25% (.25) of line 36 .....	37b	
38	Add line 36 and line 37a or 37b .....	38	
39	Prepayments: First installment ..... (date _____)	39	
40	Second installment ..... (date _____)	40	
41	Third installment ..... (date _____)	41	
42	Final installment ..... (date _____)	42	
43	Payment with extension Form CT-5.4 ..... (date _____)	43	
44	Credit from prior years .....	44	
45	Total prepayments (add lines 39 through 44) .....	45	
46	Balance (subtract line 45 from line 38; if line 45 is larger than line 38, enter "0") .....	46	
47	Penalty for underpayment of estimated tax (check box if Form CT-222 is attached <input type="checkbox"/> ; if none, enter "0")...	47	
48	Interest on late payment (see instructions) .....	48	
49	Late filing and late payment penalties (see instructions) .....	49	
50	Balance (add lines 46 through 49) .....	50	
51	Voluntary gifts/contributions: Return a Gift to Wildlife ..... <input type="checkbox"/> 00 (see instructions) Breast Cancer Research & Education Fund ..... <input type="checkbox"/> 00	51	00
52	Balance due (if line 45 is less than the total of lines 38, 47, 48, 49 and 51, the difference is the amount due; enter payment on line A on page 1) .....	52	
53	Overpayment (if line 45 is more than the total of lines 38, 47, 48, 49 and 51, the difference is the amount overpaid) ...	53	
54	Amount of overpayment to be credited to next period .....	54	
55	Balance of overpayment to be refunded (subtract line 54 from line 53) .....	55	
56	If you claim a refund of unused special additional mortgage recording tax credit, enter the amount from Form CT-43.1, line 5 or line 9 (see instructions) .....	56	
57	Does this corporation have an interest in <b>real property</b> located in New York State? .....	57	<input type="checkbox"/> Yes <input type="checkbox"/> No
58	Has controlling interest in this corporation's stock changed at any time during the last 3 years (but prior to June 15, 1996)? If you answered Yes to both questions 57 and 58, attach an explanation (see instructions) .....	58	<input type="checkbox"/> Yes <input type="checkbox"/> No
59	Are you claiming small business taxpayer status to lower the tax rate on the entire net income base (line 22)? ...	59	<input type="checkbox"/> Yes <input type="checkbox"/> No
60	If you answered Yes to question 59, enter total capital contributions (see worksheet instructions) .....	60	

**Shareholder Information** — All New York S corporations must complete Part I, Part II and Part III. Only New York S corporations with tax credits or recaptures that flow through to their shareholders should complete Part IV.

**Shareholder Information, Part I** (attach separate sheet if necessary; check here  if separate sheet is attached)

Enter total number of shareholders in box on Page 1.

Name and Address of Shareholder	Check box below if nonresident	Social Security Number	Stock Ownership		
			Number of Shares	Period Held	
Check box if any shareholders are nonresidents: <input type="checkbox"/>				From	To
A •	<input type="checkbox"/>	•			
B •	<input type="checkbox"/>	•			
C •	<input type="checkbox"/>	•			
D •	<input type="checkbox"/>	•			

**Shareholder Information, Part II — Shareholders' Shares of Income, Credit, Deductions, etc.** Instead of entering shareholders' pro rata shares below, you may attach a copy of federal Schedule K-1 for each shareholder. However, you must complete the **Total** column for each applicable item below.

	A	B	C	D	Total
61 Ordinary income (loss) from trade or business activities .....					•
62 Net income (loss) from rental real estate activities .....					•
63 Net income (loss) from other rental activities .....					•
64 Portfolio income (loss) .....					•
65 Net gain (loss) under section 1231 (other than due to casualty or theft) .....					•
66 Other income (loss) (attach schedule) .....					•
67 Total income (loss) (add lines 61 through 66) .....					•

	A	B	C	D	Total
68 Charitable contributions .....					
69 Section 179 expense deduction .....					
70 Expenses related to portfolio income (loss) .....					•
71 Other deductions .....					
72 Total deductions (add lines 68 through 71) .....					•
73 Federal tax preference items for minimum tax .....					
74 Interest expense on investment debts paid or accrued in 1996 .....					
75 Total foreign taxes (check one) <input type="checkbox"/> Paid <input type="checkbox"/> Accrued .....					
76 Reduction in foreign taxes .....					
77 Total property distributions (including cash) other than dividend distributions reported on line 79 .....					•
78 Other items and amounts not included above that are required to be reported separately to shareholders for federal purposes (attach schedule) .....					
79 Total dividend distributions paid from accumulated earnings and profits contained in other retained earnings .....					

**Shareholder Information, Part III — Shareholders' Shares of Changes from Federal Items**

	A	B	C	D	Total
<b>Additions</b>					
80 New York franchise tax imposed under Article 9-A .....					
81 Accelerated cost recovery system (ACRS) and modified accelerated cost recovery system (MACRS) deductions (from Form CT-399) .....					
82 Other additions (see instructions, attach explanation) .....					
<b>Subtractions</b>					
83 New York depreciation (from Form CT-399) .....					
84 Other subtractions (see instructions, attach explanation) .....					
<b>Other Items</b> (see instructions, attach explanation)					
85 Additions to federal itemized deductions .....					
86 Subtractions from federal itemized deductions .....					
87 New York adjustments to federal tax preference items .....					

**Shareholder Information, Part IV — Shareholders' Shares of New York S Corporation's New York Tax Credits and Taxes on Early Dispositions**

	A	B	C	D	Total
88 Investment tax credit and/or retail enterprise tax credit (attach Form CT-46) .....					•
89 Investment tax credit on research and development property at the optional rate (attach Form CT-46) .....					•
90 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) .....					
91 EDZ wage tax credit (attach Form DTF-601) .....					
92 ZEA wage tax credit (attach Form DTF-601.1) .....					
93 EDZ investment tax credit (attach Form DTF-603) .....					
94 EDZ capital tax credit (attach Form DTF-602) .....					
95 Tax on early dispositions — EDZ investment tax credit (attach Form DTF-603) .....					

**Additional Information**

Check boxes for any tax credits claimed by the New York S corporation or its shareholders. See instructions for *Shareholder Information, Part IV*.

Tax credits: Check forms filed and attach forms: •  CT-43 •  CT-43.1 •  CT-45 •  CT-46  
 DTF-601  DTF-601.1  DTF-602  DTF-603

Federal return filed: •  1120 •  1120-A •  1120S •  Consolidated basis •  Other: \_\_\_\_\_

**Attach a complete copy of your federal return (see instructions).**

Interest deducted in computing federal taxable income  \_\_\_\_\_

If the IRS has completed an audit of any of your returns within the last five years, list years: \_\_\_\_\_

If a member of an affiliated federal group, primary corporation: 

Name	EIN
•	•

If more than 50% owned by another corporation, parent corporation: 

Name	EIN
•	•

Was the corporation involved in a corporate merger, consolidation or acquisition on or after April 19, 1989?... Yes •  No •   
 If Yes, complete and attach Form CT-244.

If this return is for a termination year, check the appropriate box to indicate which method of accounting was used for the New York S short year (see instructions for Form CT-3-S).

Normal accounting rules  Daily pro rata allocation

**Net Operating Loss Carryback Election**

If line 16 is a loss (without regard to the deduction on line 12) check the appropriate box to indicate whether or not you elect to carryback the first \$10,000 of the loss.

Yes  I elect to carryback the first \$10,000.  
 No  I do not elect to carryback the first \$10,000.

If the first \$10,000 of the loss is not carried back, it is carried forward 15 years. Once made, this election is irrevocable for the loss year.

**Issuer's allocation percentage**

If you completed Form CT-3-S-ATT, enter percentage from Form CT-3-S-ATT, line 42. If you did not complete Form CT-3-S-ATT, enter 100% .....  %  
 Article 27, section 1085 of the Tax Law provides for a \$500 penalty for failure to provide this information.

If you use a paid preparer or for any other reason do not need New York State forms mailed to you next year, check box .....

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

Signature of elected officer or authorized person	Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)	ID number
	Address	Date
	Signature of individual preparing this return	

Mail your return to: **NYS CORPORATION TAX  
 PROCESSING UNIT  
 PO BOX 1909  
 ALBANY NY 12201-1909**