



CT-4-S

New York State Department of Taxation and Finance

New York S Corporation Franchise Tax Return Short Form for Small Businesses Tax Law — Articles 9-A and 22

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

[] Final Return (see procedure in instr.)

beginning [] ending []

Employer identification number, File number, Mailing Name and Address, Trade name, Business telephone number, Business activity code number, Principal business activity, State or country of incorporation, Date of incorporation, Foreign corporations: date began business in NYS, Was this corporation involved in a merger, acquisition or consolidation on or after April 19, 1989? Yes [] No []

Computation of Entire Net Income Tax

Table with 9 rows for computation of net income tax. Line 1: Federal taxable income before net operating loss and special deductions. Line 2: Interest income on federal, state, municipal and other obligations not included on line 1. Line 3: New York State, other state and local income taxes deducted on your federal return. Line 4: ACRS and MACRS deductions used in the computation of line 1. Line 5: Add lines 1 through 4. Line 6: Allowable New York depreciation. Line 7: Refund or credit of certain franchise taxes imposed by New York State. Line 8: Total subtractions. Line 9: Entire net income base.

Tax Computation

Table with 15 rows for tax computation. Line 10: Fixed dollar minimum tax. Line 11: Total prepayments. Line 12: Balance. Line 13: Interest on late payment. Line 14: Late filing and late payment penalties. Line 15: Balance. Line 16: Voluntary gifts/contributions: Return a Gift to Wildlife, Breast Cancer Research & Education Fund. Line 17: Balance due. Line 18: Overpayment. Line 19: Amount of overpayment to be credited to next period. Line 20: Refund. Line 21: Does the corporation have an interest in real property located in New York State? Line 22: Has controlling interest in this corporation's stock changed at any time during the last 3 years (prior to June 15, 1996)? Line 23: Enter total capital contributions.

Federal return filed: [] 1120 [] 1120-A [] 1120S [] Consolidated basis [] Other: []

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

Table for Shareholder Information, Part I. Columns: Name and Address of Shareholder, Check box below if nonresident, Social Security Number, Number of Shares, Period Held (From, To). Rows A, B, C, D.

Enter total number of shareholders in box above line A

Shareholder Information, Part II - Shareholders' Shares of Income, Credits, 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
24 Ordinary income (loss) from trade or business activities					•
25 Net income (loss) from rental real estate activities					•
26 Net income (loss) from other rental activities					•
27 Portfolio income (loss)					•
28 Net gain (loss) under section 1231 (other than due to casualty or theft)					•
29 Other income (loss) (attach schedule)					•
30 Total income (loss) (add lines 24 through 29)					•
31 Charitable contributions					
32 Section 179 expense deduction					
33 Expenses related to portfolio income (loss)					•
34 Other deductions (attach schedule)					
35 Total deductions (add lines 31 through 34)					•
36 Federal tax preference items for minimum tax					
37 Interest expense on investment debts paid or accrued in 1996					
38 Total foreign taxes (check one) <input type="checkbox"/> Paid <input type="checkbox"/> Accrued					
39 Reduction in foreign taxes					
40 Total property distributions (including cash) other than dividend distributions reported on line 42 ...					•
41 Other items and amounts not included above that are required to be reported separately to shareholders for federal purposes (attach schedule)					
42 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
Additions					
43 New York franchise tax imposed under Article 9-A					
44 Accelerated cost recovery system (ACRS) and modified accelerated cost recovery system (MACRS) deductions (from Form CT-399) ...					
45 Other additions (see instructions, attach explanation)					
Subtractions					
46 New York depreciation (from Form CT-399)					
47 Other subtractions (see instructions, attach explanation)					
Other Items (see instructions, attach explanation)					
48 Additions to federal itemized deductions					
49 Subtractions from federal itemized deductions					
50 New York adjustments to federal tax preference items					

If you use a paid preparer or for any other reason do not need New York State tax 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	Date
	Address		Signature of individual preparing this return

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