

New York State Department of Taxation and Finance

New York Bank S Corporation

Franchise Tax Return	
	2003 calendar-year filers check box:
Tax Law – Articles 32 and 22	Other filers enter tax period:

	return	Tax Law - Articles 32 and 22			Other filers enter tax period:					
					beginnin	nning		ending		
Employer identif	ication number	File number	Business teleph	one number		If you have any	rnorotod		If you claim an	
			()			subsidiaries inco outside NYS, che			overpayment, check box	
Legal name of c	orporation	<u>-</u>		Т	rade name/DE	3A				
				9	tate or country	of incorporation	Data rassi	and Ifan	Tour Damonton and us	- anh()
Mailing name (if	different from legal name above)			ľ	tate of country	of incorporation	Date receiv	rea (tor	Tax Department us	se oniy)
c/o					ate of incorpo	ration				
Number and stre	eet or PO box				ate of incorpo	ration				
City		State	ZIP code		oreign corporat usiness in NYS	ions: date began				
NAICS business	code number (see instructions)	If address above is new,	If your name, en				Audit (for T	ax Depa	artment use only)	
1		check box	Form DTF-95. If	fonly your ad	dress has cl	nanged, you				
Principal busine	ss activity		may file Form D phone, or from o section of the in	our Web site.						
Number of sh	nareholders New York assets	● Total ass	ets everywhere	● ZIP	code (U.S. h	eadquarters)	or Name	of cou	intry (foreign hea	adquarte
Type of	Commercial • Sav	vings & Loan •	Savings	• 🗆 🗸	or:		Coun	ty code		
bank				• U Oth			-	_		
yment — pa	ay amount shown on line 2	20. Make check pay	able to: <i>New</i>	York State	e Corpora	ition Tax		Paym	ent enclosed	
	syment here.	noumants of set!	motod tov /		(a.a. ====	OT 00 O 1)				
	f tax and installment p	<u> </u>								
	come from Form CT-32, S	*	•	,						
Entire net in	come allocation percentag	ge (see instructions)					. • 2.			
	preciation adjustments fror									
	·									
Optional dep	·	m Form CT-32, Sch	edule E, line 7	77, and So	chedule F	line 82	. 9.			250
Optional dep Fixed dollar Franchise ta	preciation adjustments from minimum	m Form CT-32, Sch	edule E, line 7	77, and Sc	chedule F	line 82	. • 4. · 9. · 10.			250
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Attach a complete copy of your federal return.

Mail your return to:

NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 22038, ALBANY NY 12201-2038

Additional information								
Check box and attach Form CT-60-QSSS to notify the Tax Department that a QSSS Check boxes below to indicate the forms filed for any tax credits claimed by the New Part II, of Form CT-34-SH, New York S Corporation Shareholders' Information School	York S corporation of							
• ☐ CT-41	9 • 🗆 C ⁻	Γ-250 ΓF-624	• DTF-630					
Attach a copy of your pro forma federal Form 1120 and a copy of your actual federal federal Form 1120S, please indicate the form number and name here:		-	eturn other than					
If the Internal Revenue Service has completed an audit of any of your returns within	the last five years, li	st years:						
If the corporation is a member of an affiliated federal group, give the name and EIN of the primary corporation:		EIN						
Has the corporation revoked its election to be treated as a New York S corporation?	Yes	■ No						
If Yes, give effective date:								
If this return is for a termination year, check the appropriate box to indicate the methogear (see instructions):	od of accounting use	ed for the New	v York S short					
Normal accounting rules Daily pro rata all	ocation							
Composition of prepayments on line 15 (see instructions)	_		_					
25 Mandatory first installment		e paid	Amount					
25 Mandatory first installment								
26b Third installment from Form CT-400								
26c Fourth installment from Form CT-400								
27 Payment with extension request from Form CT-5.4, line 5								
28 Overpayment credited from prior years		28.						
29 Add lines 25 through 28 (enter here and on line 15)								

You must complete Form CT-34-SH, *New York S Corporation Shareholders' Information Schedule*, and attach it to this form.



Change in Mailing Address and Assistance Information for Prior Year Corporation Tax Forms

Beginning on January 2, 2015, we changed processing centers.

Any corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Department – IT-2659, PO Box 397, Albany NY 12201-0397, must be mailed to this address instead (see *Private delivery services* below):

NYS TAX DEPARTMENT PO BOX 15179 ALBANY NY 12212-5179

Any corporation tax filing extension request form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 22094, Albany NY 12201-2094, or NYS Tax Corporation Tax, Processing Unit, PO Box 22102, Albany NY 12201-2102, must be mailed to this address instead (see *Private delivery services* below):

NYS CORPORATION TAX PO BOX 15180 ALBANY NY 12212-5180

Any C corporation, banking corporation, insurance corporation, Article 9 corporation, and Article 13 corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 1909, Albany NY 12201-1909; NYS Tax Corporation Tax, Processing Unit, PO Box 22038, Albany NY 12201-2038; NYS Tax Corporation Tax, Processing Unit, PO Box 22095, Albany NY 12201-2095; NYS Tax Corporation Tax, Processing Unit, PO Box 22093, Albany NY 12201-2093; or NYS Tax Corporation Tax, Processing Unit, PO Box 22101, Albany NY 12201-2101, must be mailed to this address instead (see *Private delivery services* below):

NYS TAX DEPARTMENT PO BOX 15181 ALBANY NY 12212-5181

Any S corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 22092, Albany NY 12201-2092, or NYS Tax Corporation Tax, Processing Unit, PO Box 22096, Albany NY 12201-2096, must be mailed to this address instead (see *Private delivery services* below):

NYS TAX DEPARTMENT PO BOX 15182 ALBANY NY 12212-5182

Note: Forms mailed to the old addresses may be delayed in processing.

Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed 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? below for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery.

For all the forms referenced above, if you are using a private delivery service, send to:

NYS TAX DEPARTMENT CORP TAX PROCESSING 90 COHOES AVE GREEN ISLAND NY 12183

Need help?



Visit our website at www.tax.ny.gov

- · get information and manage your taxes online
- · check for new online services and features



Telephone assistance

Corporation Tax Information Center: (518) 485-6027 To order forms and publications: (518) 457-5431

Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): (518) 485-5082

Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, call the information center.