CT-13

New York State Department of Taxation and Finance

## Unrelated Business Income

	Amended	Tax Retu			rs enter tax period		ation or _	
mnle	return over identification number	Tax Law – Article		beginn phone number	ng 📗	en	nding If you o	laim an
mpi	syon tachancation number	The named	( )	priorio number			overpa	yment, mai the box
egal	name of corporation	•		Trade n	ame/DBA			
lailin	g name (if different from legal name above)			State or	country of incorporation	Date receive	ed (for Tax Depar	tment use
/o								
	per and street or PO box			Date of	incorporation			
ity		State	ZIP code	Foreign business	corporations: date began			
AIC:	S business code number (see instructions)		If your name,	employer identificat	on number, address,	Audit (for Ta	ax Department us	e only)
	or owner/officer information has changed, you must file Form DTF-95. If only your address has changed,					,	•	3,
inci	pal unrelated business activity you may file Form DTF-96. You can get these forms							
				site, by phone, or b of the instructions.	y fax. See the <i>Need</i>			
OU	ı filed New York State Form CT-247, App	olication for Exemption t	from Corporation	on Franchise Taxes	by a Not-For-Profit	Organizatio	on? Yes	No
	$\mathbf{X}$ in this box if you ceased oper							
e	section Who must file Form CT-13 in	the instructions)						
	ay amount shown on line 22. Mak		New York S	State Corporation			Payment end	losed
-	tach your payment here. Detach			<del> </del>		A.		
	Federal unrelated business taxable inco		•			1.		
2	New York State Article 13 tax do					2.		
3	Additions required for shareholders of federal S corporations (see instructions)					3.		
4	Grossed-up taxes for sharehold			,		4.		
5	Other additions (see instructions)	)				5.		
6	Add lines 1 through 5					6.		
7 8	Other income (see instructions)			7.				
	Federal S corporation shareholder subtractions (see instructions) 8.							
9	Other subtractions (see instructions)							
0	Total subtractions (add lines 7, 8, and 9)							
1								
2	2 New York net operating loss deduction (attach federal and NYS computations; see instructions)							
	Taxable income (subtract line 12 from line 11)							
	Allocated taxable income (multip					13.		
•	from line 13 if allocation is not cla					14.		
5	Tax based on income (multiply li	*			_	15.		
		14 by 9 % (.09))				16.		25
6	Tax (line 15 or line 16, whichever is							25
					_	17.		
7	Total prepayments from line 46				_	18.		
8	Balance (if line 18 is less than line 17, subtract line 18 from line 17)					19.		
7 8 9	Interest on late payment (see instructions)					20. 21.		
7 8 9 20		101	Late filing and late payment penalties (see instructions)					
17 18 19 20 21	Late filing and late payment per	,	,		_			
17 18 19 20 21	Late filing and late payment per Balance due (add lines 19, 20, ar	nd 21; enter payment h	nere and on lir	ne A above)				
17 18 19 20 21 22	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less tha	nd 21; enter payment h an line 18, subtract lind	nere and on lir e 17 from line	ne A above) 18)		23.		
17 18 19 20 21 22 23	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less that Amount of overpayment on line	nd 21; enter payment han line 18, subtract line 23 to be <b>credited t</b>	nere and on line e 17 from line to next year	ne A above) 18)		23. 24.		
17 18 19 20 21 22 23 24	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less that Amount of overpayment on line Amount of overpayment on line	nd 21; enter payment han line 18, subtract line 23 to be credited to 23 to be refunded	nere and on line to next year (subtract line	ne A above) 18)  24 from line 23) .		23. 24. 25.		-1-2
17 18 19 20 21 22 23 fic	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less that Amount of overpayment on line Amount of overpayment on line cation: I certify that this return an	nd 21; enter payment han line 18, subtract line 23 to be credited to 23 to be refunded	nere and on line to next year (subtract line	ne A above) 18) 24 from line 23) est of my knowle		23. 24. 25.		plete.
17 18 19 20 21 22 23 24 25	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less that Amount of overpayment on line Amount of overpayment on line	nd 21; enter payment han line 18, subtract line 23 to be credited to 23 to be refunded	nere and on line to next year (subtract line	ne A above) 18)  24 from line 23) .		23. 24. 25.	ct, and com	plete.
17 18 19 20 21 22 23 24 25 fic	Late filing and late payment per Balance due (add lines 19, 20, ar Overpayment (if line 17 is less that Amount of overpayment on line Amount of overpayment on line cation: I certify that this return an	and 21; enter payment han line 18, subtract line 23 to be <b>credited t</b> 23 to be <b>refunded</b> d any attachments a	nere and on line to next year (subtract line	18)24 from line 23) est of my knowle		23. 24. 25.		plete.

Mail your return to: NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 22038, ALBANY NY 12201-2038 See back page for private delivery service information and address.

been audited by the Internal Revenue Service in the past	5 yea	ars? Yes	No	If Ye	<i>es,</i> list	years	::		
eturn was filed on: 990T Other:		Atta	ach a	complet	te cop	y of y	our fed	leral retu	rn.
ule A – Unrelated business allocation									
not maintain a regular place of business outside New York	Stat	a lagua this sal	aadula	a blank /	١٠٥٩١١	lar pla	oo of		
s any office, factory, warehouse, or other space regularly									
allocation, attach a list of each place of business, the loca								nlovees	
anocation, attach a fiet of out place of businesse, the local	Λ			В			<del>                                      </del>		
vorage value of			New York State			Everywhere			
verage value of: 26 Real estate owned (see instructions)			in State		Lverywriere				
ss rents (attach list; see instructions)	26. 27.								
ntories owned									
er tangible personal property owned (see instructions)									
I (add lines 26 through 29)									
entage in New York State (divide line 30, column A, by line 30,		mn B)					. 31.		9
s in the regular course of business from:	,	,							
s of tangible personal property shipped to points within									
ew York State	32.								
ales of tangible personal property									
ices performed	34.								
als of property	35.								
r business receipts	36.								
l (add lines 32 through 36)	37.								
entage in New York State (divide line 37, column A, by line 37,	, colui	mn B)					38.		•
es, salaries, and other compensation of employees									
ccept general executive officers; see instructions)	39.								
entage in New York State (divide line 39, column A, by line 39,		,							•
I of New York State percentages (add lines 31, 38, and 40)									•
2 Business allocation percentage (divide line 41 by three or by the number			· · · · · · · · ·	_					
ition of prepayments claimed on line 18*				Date	paid		A	mount	
nent with extension request, Form CT-5, line 5			-						_
Second installment from Form CT-400			-						+
									$\perp$
			$\overline{}$			-			+
						_			+
prepayments (add lines 43 through 45; enter here and on line	18)				4	0.			
th in unt pre axp	Istallment from Form CT-400of overpayment credited from prior yearspayments (add lines 43 through 45; enter here and on line ayers subject to the unrelated business income tax and are subject to the unrelated business income tax and are subject to the unrelated business income tax and are subject to the unrelated business income tax are subject to the unrelated business in the subject to the unrelated business in the un	stallment from Form CT-400of overpayment credited from prior yearspayments (add lines 43 through 45; enter here and on line 18)  ayers subject to the unrelated business income tax are not	stallment from Form CT-400of overpayment credited from prior years	payments (add lines 43 through 45; enter here and on line 18)	of overpayment credited from prior years	stallment from Form CT-400	stallment from Form CT-400	stallment from Form CT-400	stallment from Form CT-400

Private delivery services — If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your return and pay tax. However, if, at a later date, you need to establish the date you filed your return 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? in the instructions for information on ordering forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your return, contact that private delivery service for instructions on how to obtain written proof of the date your return was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, address your return to: State Processing Center, 431C Broadway, Albany NY 12204-4836.