



CT-3-A

New York State Department of Taxation and Finance

General Business Corporation Combined Franchise Tax Return

Tax Law — Article 9-A

Staple forms here

Final return Amended return

All filers must enter tax period:

beginning ending

Employer identification number	File number	Business telephone number ()	If you have any subsidiaries incorporated outside NYS, mark an X in the box <input type="checkbox"/>	If you claim an overpayment, mark an X in the box <input type="checkbox"/>	
Legal name of corporation		Trade name/DBA			
Mailing name (if different from legal name above) c/o		State or country of incorporation		Date received (for Tax Department use only)	
Number and street or PO box		Date of incorporation			
City		State	ZIP code		Foreign corporations: date began business in NYS
NAICS business code number (from federal return)		If address above is new, mark an X in the box <input type="checkbox"/>			If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95. If only your address has changed, you may file Form DTF-96. You can get these forms from our Web site, by fax, or by phone. See Need help? in the instructions.
Principal business activity				Audit (for Tax Department use only)	

Metropolitan transportation business tax (MTA surcharge)

During the tax year, did any corporation in the combined group do business, employ capital, own or lease property, or maintain an office in the Metropolitan Commuter Transportation District (MCTD)? If Yes, the parent must file Form CT-3M/4M (see *instructions*)..... Yes No

A. Pay amount shown on line 94. Make payable to: New York State Corporation Tax ◀ Attach your payment here. Detach all check stubs. (See <i>instructions</i> for details.)	A.	Payment enclosed
B. Combined issuer's allocation percentage (from line 41)	B.	%
<p>C. If any member of the combined group is the parent of a QSSS, mark an X in the box and attach Form CT-60-QSSS <input type="checkbox"/></p> <p>D. Federal return filed (mark an X in one): Attach a complete copy of your federal return. Form 1120 <input type="checkbox"/> Form 1120-A <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Other: <input type="checkbox"/> _____</p> <p>E. Mark an X in the box only if you need a tax packet mailed to you next year (see <i>instructions</i>) <input type="checkbox"/></p> <p>F. If you are a real estate investment trust (REIT) or regulated investment company (RIC), mark an X in the box (see <i>instructions</i>) <input type="checkbox"/></p>		

If you are filing Form CT-3-A for the first time and are part of a newly formed New York State combined group, follow the instructions on Form CT-51, *Combined Filer Statement for Newly Formed Groups Only*. For existing groups, Form CT-50, *Combined Filer Statement for Existing Groups*, will be sent to you for verification. Follow the instructions on Form CT-50.

Additional forms to file — File a Form CT-3-A/C, *Report by a Corporation Included in a Combined Franchise Tax Return*, for each member of the combined group, except the taxpayer that is designated as the parent corporation (the corporation responsible for filing this Form CT-3-A) and any nontaxpayer (a foreign corporation not taxable in New York State but included in the combined group).

Attach the following when you file your Form CT-3-A: Form(s) CT-3-A/C, *Report by a Corporation Included in a Combined Franchise Tax Return*; Form(s) CT-3-A/ATT, *Schedules A, B, and C — Attachment to Form CT-3-A*; Form(s) CT-3-A/B, *Subsidiary Detail Spreadsheet* (if necessary); other relevant forms.

For additional information, see *Which forms to file* in Form CT-3-A-I, *Instructions for Forms CT-3-A, CT-3-A/ATT, and CT-3-A/B*.

See page 8 for third-party designee, certification, and signature entry areas.

Name	Employer identification number
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Computation of combined entire net income (ENI) base

1 Federal taxable income before net operating loss (NOL) and special deductions	1.
2 Interest on federal, state, municipal, and other obligations not included on line 1	2.
3 Interest paid to a corporate stockholder owning more than 50% of issued and outstanding stock.....	3.
4a Interest deductions directly attributable to subsidiary capital	4a.
4b Noninterest deductions directly attributable to subsidiary capital	4b.
5a Interest deductions indirectly attributable to subsidiary capital	5a.
5b Noninterest deductions indirectly attributable to subsidiary capital	5b.
6 New York State and other state and local taxes deducted on your federal return (see <i>instructions</i>)	6.
7 Federal depreciation from Form CT-399, if applicable (see <i>instructions</i>).....	7.
8 Other additions (attach list; see <i>instructions</i>)	8.
9 Add lines 1 through 8, column E	9.
10 Income from subsidiary capital (see <i>instructions</i>)	10.
11 Fifty percent of dividends from nonsubsidiary corporations (see <i>instructions</i>)	11.
12 Foreign dividends gross-up not included on lines 10 and 11	12.
13 Combined New York net operating loss deduction (NOLD) (attach federal and NYS computations)	13.
14 Allowable New York depreciation from Form CT-399, if applicable (see <i>instructions</i>)	14.
15 Other subtractions (attach list; see <i>instructions</i>)	15.
16 Total subtractions (add lines 10 through 15, column E)	16.
17 Combined ENI (subtract line 16 from line 9; enter here and on line 42)	17.
18 Combined investment income before allocation (from line 215, but not more than line 17, column E)	18.
19 Combined business income before allocation (subtract line 18, column E, from line 17, column E).....	19.
20 Allocated combined investment income (multiply line 18 by • [] % from line 199)	20.
21 Allocated combined business income (multiply line 19 by • [] % from line 128, 160, or 163)	21.
22 Total combined allocated income (add lines 20 and 21)	22.
23 Optional depreciation adjustments (see <i>instructions</i>)	23.
24 Combined ENI base (line 22 plus or minus line 23, column E)	24.
25 Combined ENI base tax (multiply line 24 by the appropriate tax rate from the Tax rates schedule on page 8 of the <i>instructions</i> ; enter here and on line 72)	25.

Computation of combined capital base (use average values and enter whole dollars for lines 26 through 31; see *instructions*)

26 Total assets from federal return	26.
27 Real property and marketable securities included on line 26	27.
28 Subtract line 27 from line 26	28.
29 Real property and marketable securities at fair market value.....	29.
30 Adjusted total assets (add lines 28 and 29)	30.
31 Total liabilities.....	31.
32 Total combined capital (subtract line 31, column E, from line 30, column E)	32.
33 Combined subsidiary capital from line 222, column E; if none, enter 0	33.
34 Combined business and investment capital (subtract line 33 from line 32)	34.
35 Combined investment capital from line 201, column E; if none, enter 0	35.
36 Combined business capital (subtract line 35 from line 34)	36.
37 Allocated combined investment capital (multiply line 35 by • [] % from line 199)	37.
38 Allocated combined business capital (multiply line 36 by • [] % from line 128, 160, or 163)	38.
39 Combined capital base (add lines 37 and 38)	39.
40 Combined capital base tax (see <i>instructions</i>)	40.
41 Combined issuer's allocation percentage (see <i>instructions</i> ; enter here and on line B on page 1)	41.

	A Parent	B Total subsidiaries	C Subtotal (column A + column B)	D Intercorporate eliminations		E Combined total (column C - column D)
1.					1.	•
2.					2.	•
3.					3.	•
4a.					4a.	•
4b.					4b.	•
5a.					5a.	•
5b.					5b.	•
6.					6.	•
7.					7.	•
8.					8.	•
9.					9.	•
10.					10.	•
11.					11.	•
12.					12.	•
13.					13.	•
14.					14.	•
15.					15.	•
16.					16.	•
17.					17.	•
18.					18.	•
19.					19.	•
20.					20.	•
21.					21.	•
22.					22.	•
23.					23.	•
24.					24.	•
25.					25.	•

26.					26.	•
27.					27.	•
28.					28.	•
29.					29.	•
30.					30.	•
31.					31.	•
32.					32.	•
33.					33.	•
34.					34.	•
35.					35.	•
36.					36.	•
37.					37.	•
38.					38.	•
39.					39.	•
40.					40.	•
41.					41.	•
						%

Name	Employer identification number
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Computation of combined minimum taxable income (MTI) base

42 Combined ENI from line 17.....	42.
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Adjustments (see instructions)

43 Depreciation of tangible property placed in service after 1986 (see instructions)	43.
44 Amortization of mining exploration and development costs paid or incurred after 1986.....	44.
45 Amortization of circulation expenditures paid or incurred after 1986 (<i>personal holding companies only</i>)	45.
46 Basis adjustments in determining gain or loss from sale or exchange of property.....	46.
47 Long-term contracts entered into after February 28, 1986	47.
48 Installment sales of certain property.....	48.
49 Merchant marine capital construction funds	49.
50 Passive activity loss (<i>closely held and personal service corporations only</i>)	50.
51 Add lines 42 through 50, column E	51.

Tax preference items (see instructions)

52 Depletion.....	52.
53 Appreciated property charitable deduction	53.
54 Intangible drilling costs.....	54.
55 Add lines 51 through 54, column E	55.
56 Combined New York NOLD from line 13	56.
57 Total (<i>add lines 55 and 56</i>)	57.
58 Combined alternative net operating loss deduction (ANOLD) (see instructions)	58.
59 Combined MTI (<i>subtract line 58 from 57</i>)	59.
60 Combined investment income before apportioned NOLD (<i>add line 18 and line 214</i>)	60.
61 Combined investment income not included in ENI but included in MTI	61.
62 Combined investment income before apportioned ANOLD (<i>add lines 60 and 61</i>)	62.
63 Apportioned combined New York ANOLD (see instructions)	63.
64 Combined alternative investment income before allocation (<i>subtract line 63 from line 62</i>)	64.
65 Combined alternative business income before allocation (<i>subtract line 64 from line 59</i>)	65.
66 Allocated combined alternative business income (<i>multiply line 65 by _____ % from line 128, line 163, or line 195</i>)	66.
67 Allocated combined alternative investment income (<i>multiply line 64 by _____ % from line 199</i>)	67.
68 Allocated combined MTI (<i>add lines 66 and 67</i>)	68.
69 Optional depreciation adjustment from line 23, column E	69.
70 Combined MTI base (<i>line 68 plus or minus line 69</i>)	70.
71 Tax on combined MTI base (<i>multiply line 70 by .015</i>)	71.

	A Parent	B Total subsidiaries	C Subtotal (column A + column B)	D Intercorporate eliminations		E Combined total (column C - column D)
42.					42.	

43.					43.	•
44.					44.	•
45.					45.	•
46.					46.	•
47.					47.	•
48.					48.	•
49.					49.	•
50.					50.	•
51.					51.	•

52.					52.	•
53.					53.	•
54.					54.	•
55.					55.	•
56.					56.	•
57.					57.	•
58.					58.	•
59.					59.	•
60.					60.	
61.					61.	•
62.					62.	•
63.					63.	•
64.					64.	•
65.					65.	•
66.					66.	•
67.					67.	•
68.					68.	•
69.					69.	•
70.					70.	•
71.					71.	•

Name	Employer identification number
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Computation of tax

72 Tax on combined ENI base from line 25	• 72.	
73 Tax on combined capital base from line 40 (<i>see instructions</i>) (if new small business, mark an X in applicable box: first year • <input type="checkbox"/> second year • <input type="checkbox"/>)	• 73.	
Fixed dollar minimum tax (<i>see instructions</i>)		
74a Gross payroll everywhere (<i>see instructions</i>)	• 74a.	
74b Total receipts everywhere (<i>see instructions</i>)	• 74b.	
74c Average value of gross assets everywhere (<i>see instructions</i>)	• 74c.	
74d Fixed dollar minimum tax (<i>for the corporation filing this form</i>)	• 74d.	
75 Amount from line 71, 72, 73, or 74d, whichever is greatest (<i>see instructions</i>)	• 75.	
76 Combined subsidiary capital base tax from line 224	• 76.	
77 Combined tax due before credits (<i>add lines 75 and 76</i>)	• 77.	
78 Tax credits from line 101a (<i>attach appropriate form for each credit claimed</i>)	• 78.	
79 Balance (<i>subtract line 78 from line 77</i>)	• 79.	
80 Amount from line 71 or line 74d, whichever is greater	• 80.	
81 Combined franchise tax (<i>see instructions</i>)	• 81.	
82 Number of subsidiaries: • <input type="text"/> Number of taxable subsidiaries: • <input type="text"/>	82.	
See instructions before completing lines 83a and 83b		
83a Fixed dollar minimum tax for subsidiaries (\$1,500)	• 83a.	
83b Fixed dollar minimum tax for subsidiaries (\$100, \$225, \$325, \$425, or \$800)	• 83b.	
84 Total combined tax due (<i>add lines 81, 83a, and 83b</i>)	84.	
First installment of estimated tax for next period:		
85a If you filed a request for extension, enter amount from Form CT-5.3, line 5	• 85a.	
85b If you did not file Form CT-5.3 and the total of lines 81 and 83a is over \$1,000, see instructions	85b.	
86 Add line 84 and line 85a or 85b	86.	
87 Total prepayments from line 108	87.	
88 Balance (<i>subtract line 87 from line 86; if line 87 is more than line 86, enter 0</i>)	88.	
89 Estimated tax underpayment penalty (mark an X in the box if Form CT-222 is attached) • <input type="checkbox"/>	• 89.	
90 Interest on late payment (<i>see instructions</i>)	• 90.	
91 Late filing and late payment penalties (<i>see instructions</i>)	• 91.	
92 Balance (<i>add lines 88 through 91</i>)	92.	
Voluntary gifts/contributions (<i>see instructions</i>):		
93a Return a Gift to Wildlife	93a.	00
93b Breast Cancer Research & Education Fund	93b.	00
93c Prostate Cancer Research, Detection, and Education Fund	93c.	00
93d World Trade Center Memorial Foundation Fund	93d.	00
94 Balance due (<i>if line 87 is less than the total of lines 86, 89, 90, 91, and 93a through 93d, enter the difference here. This is the amount due; enter the payment amount on line A on page 1</i>)	94.	
95 Overpayment (<i>if line 87 is more than the total of lines 86, 89, 90, 91, and 93a through 93d, enter the difference here. This is the amount overpaid</i>)	95.	
96 Amount of overpayment to be credited to next period	96.	
97 Balance of overpayment (<i>subtract line 96 from line 95</i>)	• 97.	
98 Amount of overpayment to be credited to Form CT-3M/4M	• 98.	
99 Refund of overpayment (<i>subtract line 98 from line 97</i>)	99.	
100a Refund of unused tax credits (<i>see instructions and attach appropriate forms</i>)	100a.	
100b Tax credits to be credited as an overpayment to next year's return (<i>see instructions and attach appropriate forms</i>)	100b.	

Summary of credits claimed on line 78 against current year's franchise tax (see instructions for lines 78, 100a and 100b, 101a and 101b)

CT-38 ... •		CT-241 •		CT-601.1 ... •		CT-631	•	
CT-40 ... •		CT-242 •		CT-602 •		DTF-619	•	
CT-41 ... •		CT-243 •		CT-603 •		DTF-621	•	
CT-43 ... •		CT-246 •		CT-604 •		DTF-622	•	
CT-44 ... •		CT-248 •		CT-605 •		DTF-624	•	
CT-46 ... •		CT-249 •		CT-606 •		DTF-630	•	
CT-47 ... •		CT-250 •		CT-611 •		Servicing mortgages credit ... •		
CT-238... •		CT-259 •		CT-612 •		Other credits..... •		
CT-239... •		CT-601 •		CT-613 •				

If you claimed the QEZE tax reduction credit and you had a 100% zone allocation factor, mark an **X** in the box •

101a Total credits listed above (enter here and on line 78; attach appropriate form or statement for each credit claimed) **101a.**

101b Total refund eligible tax credits (see instructions; the amount of the credit claimed as a refund should be shown only on line 100a) • **101b.**

Composition of prepayments included on line 87 (see instructions)	Date paid	Amount
102 Mandatory first installment of combined group	102.	
103a Second installment of combined group from Form CT-400.....	103a.	
103b Third installment of combined group from Form CT-400.....	103b.	
103c Fourth installment of combined group from Form CT-400	103c.	
104 Payment with extension request, from Form CT-5.3, line 8	104.	
105 Overpayment credited from prior years	105.	
106 Overpayment credited from Form CT-3M/4M <input type="text"/> Period	106.	
107 Total prepayments from subsidiaries not previously included in the combined return (from Form(s) CT-3-A/C)	107.	
108 Total prepayments (add lines 102 through 107; enter here and on line 87)	108.	

109 Interest deducted in computing federal taxable income..... • **109.**

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

111 If a member of an affiliated federal group, enter name of primary corporation and EIN:

Name EIN

112 If more than 50% owned by another corporation, enter name of parent corporation and EIN:

Name EIN

113 Corporations organized outside New York State, complete the following for capital stock issued and outstanding:

Number of par shares	Value \$	Number of no-par shares	Value \$
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Interest paid to shareholders

114 Did this corporation make any payments treated as interest in the computation of ENI to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock (mark an **X** in the appropriate box)? If Yes, complete the following and mark an **X** in the appropriate box on line 115 (if more than one, attach separate sheet)

114. Yes • No •

Shareholder's name	Social security number or EIN
• Interest paid to shareholder	Total indebtedness to shareholders described above • Total interest paid

115 Is there written evidence of the indebtedness?

115. Yes • No •

116a Is the combined group claiming small business taxpayer status for lower ENI tax rates?

116a. Yes • No •

116b If you marked Yes on line 116a, enter total capital contributions (see instructions)

116b. Yes • No •

117a Is the combined group claiming manufacturer status for lower capital base tax limitation?

(see instructions; mark an **X** in the appropriate box)

117a. Yes • No

117b For tax years beginning on or after January 31, 2007, is the combined group claiming qualified

New York manufacturer status for lower ENI tax rates? (see instructions; mark an **X** in the appropriate box)

117b. Yes • No

Name	Employer identification number
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Computation of combined business allocation percentage for aviation corporations (use the combined totals when dividing)

118a	New York aircraft arrivals and departures (revenue flights only)	118a.
118b	Adjusted New York aircraft arrivals and departures (revenue flights only) (multiply line 118a by 60% (.60))	118b.
119	Total aircraft arrivals and departures (revenue flights only)	119.
120	Combined New York aircraft arrivals and departures percentage (divide line 118b, column E, by line 119, column E)	120.
121a	New York revenue tons handled	121a.
121b	Adjusted New York revenue tons handled (multiply line 121a by 60% (.60))	121b.
122	Total revenue tons handled	122.
123	Combined New York revenue tons handled percentage (divide line 121b, column E, by line 122, column E)	123.
124a	New York originating revenue	124a.
124b	Adjusted New York originating revenue (multiply line 124a by 60% (.60))	124b.
125	Total originating revenue	125.
126	Combined New York originating revenue percentage (divide line 124b, column E, by line 125, column E)	126.
127	Total combined New York percentages (add lines 120, 123, and 126)	127.
128	Combined New York business allocation percentage (divide line 127 by three)	128.

Computation of combined business allocation percentage (use combined totals when dividing)

Mark an **X** in the box if the companies in the combined group are air freight forwarders acting as principal or like indirect air carriers, or are qualified foreign air carriers. (see instructions) •

If the companies in the combined group are **not** air freight forwarders acting as principal or like indirect air carriers, or qualified foreign air carriers, complete **only** lines 142 through 154 and enter on line 160 the receipts factor computed on line 154. The receipts factor is the business allocation percentage.

129	New York real estate owned	129.
130	Total real estate owned	130.
131	New York real estate rented	131.
132	Total real estate rented	132.
133	New York inventories owned	133.
134	Total inventories owned	134.
135	New York tangible personal property owned	135.
136	Total tangible personal property owned	136.
137	New York tangible personal property rented	137.
138	Total tangible personal property rented	138.
139	Total New York property (add lines 129, 131, 133, 135, and 137)	139.
140	Total property everywhere (add lines 130, 132, 134, 136, and 138)	140.
141	Combined New York State property factor (divide line 139, column E, by line 140, column E)	141.

142	Sales of tangible personal property allocated to New York State	142.
143	Total sales of tangible personal property	143.
144	New York services performed	144.
145	Total services performed	145.
146	New York rentals of property	146.
147	Total rentals of property	147.
148	New York royalties	148.
149	Total royalties	149.
150	Other New York business receipts	150.
151	Total other business receipts	151.
152	Total New York receipts (add lines 142, 144, 146, 148, and 150)	152.
153	Total receipts everywhere (add lines 143, 145, 147, 149, and 151)	153.
154	Combined New York State receipts factor (divide line 152, column E, by line 153, column E)	154.
155	Combined New York State additional receipts factor (see instructions)	155.

Receipts in the regular course of business from:

(continued)

	A Parent	B Total subsidiaries	C Subtotal (column A + column B)	D Intercorporate eliminations	E Combined total (column C - column D)
118a.					118a. •
118b.					118b. •
119.					119. •
120.					120. • %
121a.					121a. •
121b.					121b. •
122.					122. •
123.					123. • %
124a.					124a. •
124b.					124b. •
125.					125. •
126.					126. • %
127.					127. • %
128.					128. • %

129.								129. •
130.								130. •
131.								131. •
132.								132. •
133.								133. •
134.								134. •
135.								135. •
136.								136. •
137.								137. •
138.								138. •
139.								139. •
140. •								140. •
141.								141. • %
142.								142. •
143.								143. •
144.								144. •
145.								145. •
146.								146. •
147.								147. •
148.								148. •
149.								149. •
150.								150. •
151.								151. •
152.								152. •
153. •								153. •
154.								154. • %
155.								155. • %

Name	Employer identification number
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Computation of combined business allocation percentage (use combined totals when dividing) (continued)

Payroll	156 New York wages and other compensation of employees except general executive officers	156.
	157 Total wages and other compensation of employees except general executive officers	157.
	158 Combined New York State payroll factor (<i>divide line 156, column E, by line 157, column E</i>)	158.
	159 Total combined New York State factors (<i>add lines 141, 154, 155, and 158</i>)	159.
	160 Combined business allocation percentage (<i>see instructions; enter here and in the boxes on line 21 and line 38</i>).....	160.

**Computation of combined business allocation percentage for trucking and railroad corporations
(use the combined totals when dividing)**

161 New York revenue miles	161.
162 Total revenue miles.....	162.
163 Combined New York business allocation percentage (<i>divide line 161, column E, by line 162, column E</i>)	163.

Computation of combined alternative business allocation percentage for combined MTI base

(use the combined totals when dividing)

If the companies in the combined group are **not** air freight forwarders acting as principal or like indirect air carriers, or qualified foreign air carriers, complete **only** lines 177 through 189 and enter on line 195 the receipts factor computed on line 189. The receipts factor is the alternative business allocation percentage.

Receipts in the regular course of business from: <i>Average value of property (see instructions)</i>	164 New York real estate owned	164.
	165 Total real estate owned	165.
	166 New York real estate rented	166.
	167 Total real estate rented	167.
	168 New York inventories owned	168.
	169 Total inventories owned	169.
	170 New York tangible personal property owned	170.
	171 Total tangible personal property owned.....	171.
	172 New York tangible personal property rented	172.
	173 Total tangible personal property rented	173.
	174 Total New York property (<i>add lines 164, 166, 168, 170, and 172</i>)	174.
	175 Total property everywhere (<i>add lines 165, 167, 169, 171, and 173</i>)	175.
	176 Combined New York State property factor (<i>divide line 174, column E, by line 175, column E</i>)	176.
Payroll	177 Sales of tangible personal property allocated to New York State	177.
	178 Total sales of tangible personal property	178.
	179 New York services performed	179.
	180 Total services performed	180.
	181 New York rentals of property	181.
	182 Total rentals of property	182.
	183 New York royalties	183.
	184 Total royalties	184.
	185 Other New York business receipts	185.
	186 Total other business receipts	186.
	187 Total New York receipts (<i>add lines 177, 179, 181, 183, and 185</i>).....	187.
	188 Total receipts everywhere (<i>add lines 178, 180, 182, 184, and 186</i>)	188.
	189 Combined New York State receipts factor (<i>divide line 187, column E, by line 188, column E</i>)	189.
	190 Combined New York State additional receipts factor (<i>see instructions</i>)	190.
	191 New York wages and other compensation of employees except general executive officers	191.
	192 Total wages everywhere and other compensation of employees except general executive officers	192.
	193 Combined New York State payroll factor (<i>divide line 191, column E, by line 192, column E</i>)	193.
	194 Total combined New York State factors (<i>add lines 176, 189, 190, and 193</i>)	194.
	195 Combined alternative business allocation percentage (<i>see instructions</i>).....	195.

	A Parent	B Total subsidiaries	C Subtotal (column A + column B)	D Intercorporate eliminations	E Combined total (column C - column D)
156.					156.●
157.					157.●
158.					158.● %
159.					159.● %
160.					160.● %
161.					161.●
162.					162.●
163.					163.● %
164.					164.
165.					165.
166.					166.
167.					167.
168.					168.
169.					169.
170.					170.
171.					171.
172.					172.
173.					173.
174.					174.●
175.					175.●
176.					176.● %
177.					177.
178.					178.
179.					179.
180.					180.
181.					181.
182.					182.
183.					183.
184.					184.
185.					185.
186.					186.
187.					187.●
188.					188.●
189.					189.● %
190.					190.● %
191.					191.●
192.					192.●
193.					193.● %
194.					194.● %
195.					195.● %

Name	Employer identification number
------	--------------------------------

Computation of combined investment capital and investment allocation percentage (see instructions)

196	Section 1 - Corporate and governmental debt instruments	196.
A	Average value (see instructions)	A.
B	Liabilities directly or indirectly attributable to investment capital (see instructions)	B.
C	Net average value (subtract line B from line A)	C.
D	Net average value allocated to New York State	D.
197	Section 2 - Corporate stock, stock rights, stock warrants, and stock options	197.
A	Average value (see instructions)	A.
B	Liabilities directly or indirectly attributable to investment capital (see instructions)	B.
C	Net average value (subtract line B from line A)	C.
D	Net average value allocated to New York State	D.
198	Total Section 1 and Section 2	198.
A	Average value (add lines 196A and 197A)	A.
B	Liabilities directly or indirectly attributable to investment capital (add lines 196B and 197B)	B.
C	Net average value (add lines 196C and 197C)	C.
D	Net average value allocated to New York State (add lines 196D and 197D)	D.
199	Combined investment allocation percentage (divide line 198D by line 198C; use to compute lines 20, 37, 67)	199.
200	Cash (optional).....	200.
201	Combined investment capital (add lines 198C, column E, and 200, column E).....	201.

Computation of combined investment income for allocation

202	Interest income from investment capital, listed on line 196, Section 1 (see instructions)	202.
203	Interest income from bank accounts	203.
204	All other interest income from investment capital.....	204.
205	Dividend income from investment capital.....	205.
206	Net capital gain or loss from investment capital.....	206.
207	Investment income other than interest, dividends, capital gains or capital losses	207.
208	Total combined investment income (add lines 202 through 207)	208.
209	Interest deductions directly attributable to investment capital	209.
210	Noninterest deductions directly attributable to investment capital	210.
211	Interest deductions indirectly attributable to investment capital	211.
212	Noninterest deductions indirectly attributable to investment capital	212.
213	Balance (subtract the sum of lines 209 through 212, column E, from line 208, column E)	213.
214	Apportioned New York combined NOLD	214.
215	Combined investment income before allocation (subtract line 214 from line 213; enter here and on line 18)	215.

Computation of income from combined subsidiary capital (see instructions)

216	Interest from combined subsidiary capital (attach list)	216.
217	Dividends from combined subsidiary capital (attach list).....	217.
218	Capital gains from combined subsidiary capital (see instructions; attach list)	218.
219	Total income from combined subsidiary capital (add lines 216 through 218; enter here and on line 10).....	219.

Computation and allocation of combined subsidiary capital base and tax (see instructions for lines 220 through 223)

Include all corporations (except a DISC) in which you own more than 50% of the voting stock. Eliminate the value of subsidiaries included in the combined return in column D, *Intercorporate eliminations*.

220	Average value	220.
221	Liabilities directly or indirectly attributable to subsidiary capital	221.
222	Net average value (subtract line 221 from line 220)	222.
223	Net average value allocated to New York State.....	223.
224	Combined subsidiary capital base tax (multiply line 223, column E, by .0009; enter here and on line 76)	224.

	A Parent	B Total subsidiaries	C Subtotal (column A + column B)	D Intercorporate eliminations	E Combined total (column C — column D)
196.					196.
A.					A.
B.					B.
C.					C.
D.					D.
197.					197.
A.					A.
B.					B.
C.					C.
D.					D.
198.					198.
A.					A.
B.					B.
C.					C.
D.					D.
199.					199.
200.					200.
201.					201.

202.							202.●
203.							203.●
204.							204.●
205.							205.●
206.							206.●
207.							207.●
208.							208.●
209.							209.●
210.							210.●
211.							211.●
212.							212.●
213.							213.●
214.							214.●
215.							215.●

216.							216.●
217.							217.●
218.							218.●
219.							219.●

220.							220.●
221.							221.●
222.							222.●
223.							223.●
224.							224.●

Third – party designee	Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes <input type="checkbox"/> (complete the following) No <input type="checkbox"/>	
	Designee's name 	Designee's phone number ()
	Personal identification number (PIN)	

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

Signature of authorized person		Official title	Date			
Paid preparer use only	Signature of individual preparing this return	Firm's name (or yours if self-employed)				
	Address	City	State	ZIP code	ID number	Date

See instructions for where to file.
