



# Application for Certification of a Qualified Emerging Technology Company

Tax Law – Articles 9-A and 22

**DTF-620**  
(Revised 12/12)

This application is for the certification period:

beginning		ending	
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<b>Part 1 – Business information</b> <i>(all applicants must complete this section)</i>	<b>Department use only</b>
Print or type	

1 Legal name			
2 Trade name/DBA <i>(if different from line 1)</i>			
3 Address of business in New York State <i>(number and street)</i>		City	State
			ZIP code
4 Mailing address <i>(if different from business address)</i>		City	State
			ZIP code
5 County <i>(place of business in New York State)</i>	6 Business telephone number <i>(include area code)</i>	7 Date business began or will begin in NYS	
8 Federal employer identification number	9 Type of organization: <i>(mark an X in one box)</i>		
	Corporation <input type="checkbox"/>	Partnership <input type="checkbox"/>	LLC <input type="checkbox"/>
	Other <i>(specify)</i> <input type="checkbox"/> _____		

10 I authorize the Commissioner of Taxation and Finance to disclose publicly that the above company is a certified qualified emerging technology company (QETC) for the certification period shown on this application, if the company so qualifies. The disclosure of information may include the information shown on lines 1, 2, 3, and 4 of this application *(mark an X in one box)*..... Yes  No

## Part 2 – Eligibility requirements *(mark an X in the appropriate box; see instructions)*

11 Is the company located in New York State? ..... Yes  No

12 Are the total annual product sales of the company \$10,000,000 or less?..... Yes  No

If you answered Yes to questions 11 **and** 12, continue with line 13 to see if you are eligible to be certified as a QETC under Category 1. If you answered No to either question 11 or 12, you are **not** eligible to be certified as a QETC and should not complete this application.

### Category 1 – Primary products or services

13 Does the company develop or create products or services that are classified as emerging technologies?... Yes  No

If Yes, enter a description of the company's emerging technology products or services: \_\_\_\_\_

14 Enter gross receipts or sales from the company's emerging technology products or services described on line 13..... 14. \_\_\_\_\_

15 Enter total gross receipts or sales from all the company's products or services ..... 15. \_\_\_\_\_

If line 15 is zero, skip lines 16 and 17 and continue with line 18.  
If line 15 is greater than zero, continue with line 16.

16 Divide line 14 by line 15 and enter result as a percentage ..... 16. \_\_\_\_\_%

17 Is the percentage on line 16 greater than 50%?..... Yes  No

If you answered Yes to questions 13 and 17, you **are** eligible to be certified as a QETC under Category 1. Sign the application in the certification area and mail it to the address shown on page 2. If you answered No to either question 13 or 17, continue with line 18.

18 Enter the total expenditures attributable to the development or creation of emerging technology products or services included on your federal return..... 18. \_\_\_\_\_

19 Enter the total expenditures included on your federal return..... 19. \_\_\_\_\_

20 Divide line 18 by line 19 (round the result to the fourth decimal place and enter as a percentage) ..... 20. \_\_\_\_\_ %

21 Is the percentage on line 20 greater than 50%? ..... Yes  No

If you answered Yes, you are eligible to be certified as a QETC under Category 1. Sign the application in the certification area and mail it to the address shown below. If you answered No, complete lines 22 through 26 to determine if you are eligible to be certified under Category 2.

Category 2 – Research and development (R&D) activities

22 Does the company have R&D activities in New York State? ..... Yes  No

23 Enter the amount of R&D funds ..... 23. \_\_\_\_\_

24 Enter the amount of net sales (if you have any amount of R&D funds, but zero net sales, you are a QETC; skip line 25 and mark the Yes box on line 26) ..... 24. \_\_\_\_\_

25 R&D funds percentage (divide line 23 by line 24 and enter result as a percentage) ..... 25. \_\_\_\_\_ %

26 Does the percentage on line 25 equal or exceed the applicable percentage for the certification period for which you are applying (see instructions)? ..... Yes  No

If you answered Yes to questions 22 and 26, you are eligible to be certified as a QETC under Category 2. Sign the application in the certification area and mail it to the address shown below.

If you failed to qualify under Category 1, and answered No to either question 22 or 26 in Category 2, you are not eligible to be certified as a QETC and should not file this application.

Certification

I declare that to the best of my knowledge and belief this application is correct and complete. I understand that a willfully false representation is a crime punishable under section 1801 of the New York State Tax Law and sections 175.35 and 210.45 of the Penal Law.

Signature of authorized person | Title | Date

Mail the application to: NYS TAX DEPARTMENT CORPORATION TAX REGISTRATION UNIT W A HARRIMAN CAMPUS ALBANY NY 12227

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Telephone assistance

Business Tax Information Center: (518) 457-5342
To order forms and publications: (518) 457-5431



Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): If you have access to a TTY, contact us at (518) 485-5082. If you do not own a TTY, check with independent living centers or community action programs to find out where machines are available for public use.



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.