New York State Department of Taxation and Finance

Partnership, Limited Liability Company, and Limited Liability Partnership Filing Fee Payment Form

IT-204-LL

2012

For calendar year 2012 or fiscal year beginning 02-01-2012 and ending 01-31-2013

Legal name TEST V-1202	Identification number *(see instructions)* 115365984
Trade name of business if different from legal name above LL Production	Change of business information ☒ Mark ***X*** here if you have changed your mailing address and have not previously notified us *(see instr.)*
Address *(number and street or rural route)* 1202 State Campus	Date business started 04-15-2007
City, village, or post office: Albany; State: NY; ZIP code: 12227	Contact person's telephone number (518) 555-1212
Principal business activity Haircuts	Enter your **2-digit special condition code if applicable** *(see instructions)*..... B5

Mark an ***X*** in the box identifying the entity for which you are filing this form *(mark only **one** box)*:

☐ Regular partnership ☒ Limited liability company (LLC) or limited liability partnership (LLP)

Part 1 — General information *(mark an **X** in the appropriate box(es))*

Mark applicable box(es): ☒ Amended Form IT-204-LL ☒ Refund ☐ Final Form IT-204-LL *(see instructions)*

1 Did this entity have any income, gain, loss, or deduction derived from New York sources during the tax year? *(see instructions)* ..... Yes ☒ No ☐

2 Did this entity have an interest in real property in New York State during the last three years? ..... Yes ☐ No ☒

3 Has there been a transfer or acquisition of the controlling interest in the entity during the last three years? ..... Yes ☒ No ☐

If you answered *No* to question 1, **stop**; you do not owe a fee. Do not file this form.

Part 2 — Partnerships, and LLCs and LLPs treated as partnerships for federal income tax purposes

4 Enter the amount from line 15, column B, of the *New York source gross income worksheet* in the instructions **4** 2000000.00

5 NYS filing fee — Enter the amount from the appropriate filing fee table in the instructions..... **5** 1500.**00**

Make check or money order for the line 5 amount payable to ***NYS filing fee;*** write your EIN and ***2012 filing fee*** on the remittance and submit it with this form.

Part 3 — LLCs that are disregarded entities for federal income tax purposes

6 LLC disregarded entity: Enter the identification number (EIN or SSN) of the entity or individual who will be reporting the income or loss **6**

7 LLC disregarded entity NYS filing fee — Enter ***25*** on this line ..... **7** .**00**

Make check or money order for $25 payable to ***NYS filing fee***; write your EIN or SSN and ***2012 filing fee*** on the remittance and submit it with this form.

Certification: I certify that all information contained on this form is true and correct to the best of my knowledge and belief.

▼ **Paid preparer must complete** *(see instr.)* ▼	
Date 02-02-2013	
Preparer's signature: Mr. Test V-1202	Preparer's NYTPRIN 54680692
Firm's name *(or yours, if self-employed)*: Test Takers	Preparer's PTIN or SSN 726411816
Address: Broadway Suite 10 New York,NY 11111-4922	Employer identification number 621499121 Mark an ***X*** if self-employed ☒
E-mail: paid-preparer@pp.com	

▼ **Sign here** ▼	
Signature of general partner: Robert Burns	
Date 02-02-2013	Daytime phone number (518) 555-1212
E-mail: general-partner@gp.com	

Note to Software Vendor- Include the following information;

File this form with payment within 60 days after the last day of the tax year *(see instr.)*.
Mail to: **STATE PROCESSING CENTER, PO BOX 15150, ALBANY NY 12212-5150.**
For private delivery services, see instructions.

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ABA_NUMBER: 021000322 BANK_ACCT_NUMBER: 6542011001Ban2202
BNK_ACCT_ACH_IND: Business Savings Account. There is a preparer declaration only
Electronic Authorization Effective Date: 2013-02-07