Test 30-CTEF3ABC1

Blank or zero field values are not included. Fields requiring software calculations are not provided. Automated clearing house debit payment is required if test results in a balance due. Please use the two-digit codes provided to you to replace the 6th and 7th digits in each test employer identification number.

Test Scenario

Return type: CT-3-A/BC

Liability period: 01-01-2025–12-31-2025

Employer Identification Number: 00219XX30

Legal name: CTEF3ABC1

File number: Software calculated

Telephone number: 518-555-2626

Address: 3ABC1 Harriman Campus, New York, NY 10001

State of incorporation: New York State

Date of incorporation: 01-01-2023

North American Industry Classification System business code number: 236220

New York State principal business activity: Commercial construction

Legal name of designated agent: CTEF3A

Employer Identification Number of designated agent: 00219XX29

Part 1

Line 1. Subject to Metropolitan Transportation Authority surcharge: Yes

Line 9. Federal separate taxable income: -90,000

Part 2

Line 1. New York receipts: 100,000

Line 2. Fixed dollar minimum tax: 25

Part 4

	A Beginning of year	**B** End of year
Line 1	3,125,000	3,175,000
Line 6	2,250,000	2,750,000

Part 5–No content

Part 6

	A-Everywhere	**B-**New York State	**C-**New York State Fixed Dollar Minimum
Line 1	1,500,000	100,000	100,000
Line 3	20,000		