

New York State Department of Taxation and Finance

Corporation Tax Modernized Electronic Filing Acceptance Testing System for Tax Year 2025

Test 9-CTEF56

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

Extension form: CT-5.6

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

Employer Identification Number: 00219XX09

Legal name: CTEF56 (followed by a space, then your software ID)

File number: Software calculated **Telephone number**: 518-555-2626

Address: 56 WA Harriman Campus, Albany, NY 12227

State of incorporation: New York State

Date of incorporation: 03-25-1995 **Main returns:** CT-186, CT-186-M

Line 1. Tax from worksheet: 15,000

Line 2. First installment of estimated tax for the next tax year: 3,750

Line 6. Metropolitan Transportation Authority Surcharge from worksheet: 2,550

Line 7. First installment of estimated Metropolitan Transportation Authority surcharge for the next tax year: 638

| Composition of prepayments | | | |
|----------------------------|------------|--------------------------|---|
| Date Paid | | A Business Tax | B Metropolitan Transportation Authority surcharge |
| Line 12 | 3-15-2025 | 3,500 | 500 |
| Line 13a | 6-15-2025 | 3,500 | 500 |
| Line 13b | 9-15-2025 | 3,500 | 500 |
| Line 13c | 12-15-2025 | 3,500 | 500 |