



CT-3 Final Return (see procedure in instr.)

New York State Department of Taxation and Finance

General Business Corporation Franchise Tax Return

Tax Law — Article 9-A

1997 calendar yr. filers, check box Other filers enter tax period:

beginning ending

Main form section with fields for Employer identification number, Mailing Name and Address, Trade name, and various checkboxes.

Metropolitan Transportation Business Tax (MTA Surcharge)

During the tax year did you do business, employ capital, own or lease property or maintain an office in the Metropolitan Commuter Transportation District? If Yes, you must file Form CT-3M/4M

A. Payment — pay amount shown on line 93. Make check payable to: New York State Corporation Tax

Computation of Entire Net Income Base

Table with 25 rows for computation of net income base, including lines 1 through 25 with descriptions and numerical inputs.

Attach a complete copy of your federal return.

Mail your return to: NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 1909, ALBANY NY 12201-1909

**Computation of Capital Base** (use whole dollars for lines 26 through 31)

		A Beginning of Year	B End of Year	C Average Value	
26	Total assets from federal return .....	●	●	●	
27	Real property and marketable securities included on line 26 .....			●	
28	Subtract line 27 from line 26 .....			●	
29	Real property and marketable securities at fair market value .....			●	
30	Adjusted total assets (add lines 28 and 29) .....			■	
31	Total liabilities .....			●	
32	Total capital (subtract line 31, column C, from line 30, column C) .....				32 ■
33	Subsidiary capital (from Form CT-3-ATT, line 52) .....				33 ●
34	Business and investment capital (subtract line 33 from line 32) .....				34 ●
35	Investment capital (from Form CT-3-ATT, line 35, column E) .....				35 ●
36	Business capital (subtract line 35 from line 34) .....				36 ●
37	Allocated investment capital (multiply line 35 by <input type="text"/> % from Form CT-3-ATT, line 33) .....				37 ●
38	Allocated business capital (multiply line 36 by <input type="text"/> % from line 119 or line 139) .....				38 ●
39	Capital base (add lines 37 and 38) .....				39 ■
40	Capital base tax (multiply line 39 by .00178; enter here and on line 73) .....				40 ●
41	Issuer's allocation percentage (see instructions) .....				41 ■ %

**Computation of Minimum Taxable Income Base**

42	Entire net income 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 (personal holding companies only) .....				45 ●
46	Basis adjustments in determining gain or loss from sale or exchange of property .....				46 ●
47	Long term contracts entered into after 2/28/86 .....				47 ●
48	Installment sales of certain property .....				48 ●
49	Merchant marine capital construction funds .....				49 ●
50	Passive activity loss (closely held and personal service corporations only) .....				50 ●
51	Combine lines 42 through 50 .....				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 .....				55 ■
56	Net operating loss deduction from line 13 .....				56 ●
57	Total (add lines 55 and 56) .....				57 ●
58	Alternative net operating loss deduction (see instructions) .....				58 ●
59	Minimum taxable income (subtract line 58 from line 57) .....				59 ●
60	Investment income before apportioned net operating loss deduction (add line 18 and Form CT-3-ATT, line 45) .....				60 ■
61	Investment income not included in entire net income but included in minimum taxable income .....				61 ●
62	Investment income before apportioned alternative net operating loss deduction (add line 60 and line 61) .....				62 ●
63	Apportioned New York alternative net operating loss deduction (see instructions) .....				63 ●
64	Alternative investment income before allocation (subtract line 63 from line 62) .....				64 ■
65	Alternative business income before allocation (subtract line 64 from line 59) .....				65 ●
66	Allocated alternative business income (multiply line 65 by <input type="text"/> % from line 119 or line 159) .....				66 ●
67	Allocated alternative investment income (multiply line 64 by <input type="text"/> % from Form CT-3-ATT, line 33) .....				67 ●
68	Allocated minimum taxable income (add lines 66 and 67) .....				68 ■
69	Optional depreciation adjustments from line 23 .....				69 ■
70	Minimum taxable income base (line 68 plus or minus line 69) .....				70 ■
71	Tax on minimum taxable income base (multiply line 70 by 3½% (.035)) .....				71 ●

**Computation of Tax**

72 Tax on entire net income base from line 25.....	72 ●	
73 Tax on capital base from line 40 (New small business: <input type="checkbox"/> First year <input type="checkbox"/> Second year) ....	73 ●	
74 Fixed dollar minimum tax .....	74 ●	
You must enter an amount in each of the boxes below; if none, enter "0".		
<input type="checkbox"/> Gross payroll	<input type="checkbox"/> Total receipts	<input type="checkbox"/> Gross assets
75 Amount from line 71, 72, 73, or 74, whichever is largest (see instructions for exception).....	75 ●	
76 Subsidiary capital base from Form CT-3-ATT, line 53 .....	76	
77 Tax from Form CT-3-ATT, line 54.....	77 ●	
78 Tax due before credits (add lines 75 and 77).....	78 ●	
79 Tax credits (from line 100; attach appropriate form for each credit claimed).....	79	
80 Balance (subtract line 79 from line 78).....	80 ●	
81 Amount from line 71 or 74, whichever is larger .....	81 ●	
82 Tax due (amount from line 80 or 81, whichever is larger) .....	82	
First installment of estimated tax for next period		
83a If a request for extension was filed, enter amount from Form CT-5, line 2.....	83a	
83b If Form CT-5 was not filed and line 82 is over \$1,000, enter 25% of line 82 .....	83b	
84 Add line 82 and line 83a or 83b.....	84	
85 Total prepayments from line 106 .....	85	
86 Balance (subtract line 85 from line 84; if line 85 is more than line 84, enter "0").....	86	
87 Penalty for underpayment of estimated tax (check box if Form CT-222 is attached <input type="checkbox"/> if none, enter "0").....	87	
88 Interest on late payment (see instructions).....	88	
89 Late filing and late payment penalties (see instructions).....	89	
90 Balance (add lines 86 through 89).....	90	
91 If you want to Return a Gift to Wildlife, enter amount (see instructions).....	91	00
92 If you want to give a Gift for Breast Cancer Research and Education, enter amount (see instructions).....	92	00
93 Balance due (if line 85 is less than the total of lines 84, 87, 88, 89, 91, and 92, the difference is the amount due; enter payment on line A on page 1).....	93	
94 Overpayment (if line 85 is more than the total of lines 84, 87, 88, 89, 91, and 92, the difference is the amount overpaid).....	94	
95 Amount of overpayment to be credited to next period .....	95	
96 Balance of overpayment (subtract line 95 from line 94).....	96	
97 Amount of overpayment to be credited to Form CT-3M/4M .....	97	
98 Refund of overpayment (subtract line 97 from line 96).....	98	
99 Refund of unused tax credits (see instructions and attach appropriate forms) .....	99	

**Recap of Credits Claimed on Line 79 Against Current Year's Franchise Tax** (see instructions for lines 79, 99, and 100)

Form DTF-601.....	<input type="checkbox"/>	Form DTF-603.....	<input type="checkbox"/>	Form CT-45.....	● <input type="checkbox"/>
Form DTF-601.1.....	<input type="checkbox"/>	Form CT-43.....	● <input type="checkbox"/>	Form CT-46.....	● <input type="checkbox"/>
Form DTF-602.....	<input type="checkbox"/>	Form CT-43.1.....	● <input type="checkbox"/>	Form CT-47.....	● <input type="checkbox"/>
Servicing mortgages credit.....	<input type="checkbox"/>				
Minimum tax credit from Form CT-3-ATT, line 27.....	<input type="checkbox"/>				
100 Total credits listed above (enter here and on line 79; attach appropriate form or statement for each credit claimed; the portion of the credit claimed as a refund should be shown on line 99).....	100				

**Composition of Prepayments on line 85**

		Date Paid	Amount
101	Mandatory first installment .....		
102	CT-400 installments .....	1	
		2	
		3	
103	Payment with extension (Form CT-5, line 5) .....		
104	Credit from prior years .....		104
105	Credit from Form CT-3M/4M <input type="text" value="Period"/>		105
106	Total prepayments (add lines 101 through 105; enter here and on line 85) .....		106

107 Was this corporation involved in a merger, acquisition or consolidation on or after April 19, 1989?  
If Yes, complete and attach Form CT-244 (see instructions) ..... 107  Yes  No

**Interest Paid to Shareholders**

108 Did this corporation make any payments treated as interest in the computation of entire net income to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock? If Yes, complete the following (if more than one, attach separate sheet) ..... 108  Yes  No

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

109 Is there written evidence of the indebtedness? ..... 109  Yes  No

110 Are you claiming small business taxpayer status for lower entire net income tax rates? ... 110  Yes  No

111 Enter total capital contributions (see worksheet in instructions) ..... 111

Federal return filed  1120  1120-A  1120-S  Consolidated basis  Other: \_\_\_\_\_

**Attach a complete copy of your federal return.**

Check box and attach Form CT-60-QSSS to notify the department that a qualified subchapter S subsidiary (QSSS) is included in this return

Interest deducted in computing federal taxable income .....

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

If a member of an affiliated federal group - primary corporation: 

Name	EIN
<input type="checkbox"/>	<input type="checkbox"/>

If more than 50% owned by another corporation - parent corporation: 

Name	EIN
<input type="checkbox"/>	<input type="checkbox"/>

**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
	/ \$		/ \$

If you do not need forms mailed to you next year, check box. We will send you a label for use on next year's return (see instructions.) .....

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

Signature of elected officer or authorized person		Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)	ID number	Date
	Address	Signature of individual preparing this return	

**Schedule A, Part I — Computation of Business Allocation Percentage for Aviation Corporations**

	A New York State	B Everywhere	
112 Revenue aircraft arrivals and departures .....	112 ●	●	
113 New York percentage <i>(divide line 112, column A, by line 112, column B)</i> .....			113 ● %
114 Revenue tons handled .....	114 ●	●	
115 New York percentage <i>(divide line 114, column A, by line 114, column B)</i> .....			115 ● %
116 Originating revenue .....	116 ●	●	
117 New York percentage <i>(divide line 116, column A, by line 116, column B)</i> .....			117 ● %
118 Total <i>(add lines 113, 115, and 117)</i> .....			118 %
119 New York allocation percentage <i>(divide line 118 by three; use to compute lines 21, 38, and 66, and Form CT-3-ATT, line 6)</i> ..			119 ● %

**Schedule A, Part II — Computation of Business Allocation Percentage**

Did you make an election to use fair market value in your property factor? ..... ●  Yes    ●  No  
 If this is your first tax year, are you making the election to use fair market value in your property factor? ... ●  Yes    ●  No

	A New York State	B Everywhere	
<b>Average value of (see instructions):</b>			
120 Real estate owned .....	120 ●	●	
121 Real estate rented .....	121 ●	●	
122 Inventories owned .....	122 ●	●	
123 Tangible personal property owned .....	123 ●	●	
124 Tangible personal property rented .....	124 ●	●	
125 Total <i>(add lines 120 through 124)</i> .....	125 ●	■	
126 New York State property factor <i>(divide line 125, column A, by line 125, column B)</i> .....			126 ● %
<b>Receipts in the regular course of business from:</b>			
127 Sales of tangible personal property shipped to points within New York State .....	127 ●		
128 All sales of tangible personal property .....	128	●	
129 Services performed .....	129 ●	●	
130 Rentals of property .....	130 ●	●	
131 Royalties .....	131 ●	●	
132 Other business receipts .....	132 ●	●	
133 Total <i>(add lines 127 through 132)</i> .....	133 ●	■	
134 New York State receipts factor <i>(divide line 133, column A, by line 133, column B)</i> .....			134 ● %
135 Additional receipts factor <i>(enter factor from line 134)</i> .....			135 ● %
136 Wages and other compensation of employees except general executive officers .....	136 ●	■	
137 New York State payroll factor <i>(divide line 136, column A, by line 136, column B)</i> .....			137 ● %
138 Total New York State factors <i>(add lines 126, 134, 135, and 137)</i> .....			138 %
139 Business allocation percentage <i>(divide line 138 by four or by the number of factors)</i> Enter here and in the boxes on line 21 and line 38 .....			139 ● %

**Schedule A, Part III — Computation of Alternative Business Allocation Percentage for Minimum Taxable Income Base**

<b>Average value of (see instructions):</b>		<b>A</b>	<b>B</b>	
		<b>New York State</b>	<b>Everywhere</b>	
<b>140</b>	Real estate owned .....	<b>140</b>		
<b>141</b>	Real estate rented .....	<b>141</b>		
<b>142</b>	Inventories owned .....	<b>142</b>		
<b>143</b>	Tangible personal property owned .....	<b>143</b>		
<b>144</b>	Tangible personal property rented .....	<b>144</b>		
<b>145</b>	<b>Total (add lines 140 through 144) .....</b>	<b>145</b> ●	■	
<b>146</b>	<b>New York State property factor (divide line 145, column A, by line 145, column B) .....</b>			<b>146</b> ● %
<b>Receipts in the regular course of business from:</b>				
<b>147</b>	Sales of tangible personal property shipped to points within New York State .....	<b>147</b>		
<b>148</b>	All sales of tangible personal property .....	<b>148</b>		
<b>149</b>	Services performed .....	<b>149</b>		
<b>150</b>	Rentals of property .....	<b>150</b>		
<b>151</b>	Royalties .....	<b>151</b>		
<b>152</b>	Other business receipts .....	<b>152</b>		
<b>153</b>	<b>Total (add lines 147 through 152) .....</b>	<b>153</b> ●	■	
<b>154</b>	<b>New York State receipts factor (divide line 153, column A, by line 153, column B) .....</b>			<b>154</b> ● %
<b>155</b>	<b>Additional receipts factor (enter factor from line 154) .....</b>			<b>155</b> %
<b>156</b>	<b>Wages and other compensation of employees except general executive officers .....</b>	<b>156</b> ●	■	
<b>157</b>	<b>New York State payroll factor (divide line 156, column A, by line 156, column B) .....</b>			<b>157</b> ● %
<b>158</b>	<b>Total New York State factors (add lines 146, 154, 155, and 157) .....</b>			<b>158</b> %
<b>159</b>	<b>Alternative business allocation percentage (divide line 158 by four or by the number of factors) Enter here and in the box on line 66 and on Form CT-3-ATT, line 6 .....</b>			<b>159</b> ● %