

For CALENDAR YEAR 2012 or FISCAL YEAR beginning _____ 2012 and ending _____ Check box if you are filing a 52- 53-week taxable year

Amended return Final return - Check box if the corporation has ceased operations. Special short-period return (See inst.)

Name		Taxpayer's Email Address:	
In Care Of			
Address (number and street)			
City and State	Zip Code		
Business Telephone Number	Date business began in NYC		

EMPLOYER IDENTIFICATION NUMBER	
<input type="text"/>	<input type="text"/>
BUSINESS CODE NUMBER AS PER FEDERAL RETURN	
<input type="text"/>	

SCHEDULE A Computation of Tax

BEGIN WITH SCHEDULES B1 or B2 ON PAGE 2. TRANSFER APPLICABLE AMOUNT TO SCHEDULE A.

		Payment Enclosed	
A. Payment	Amount included with Form NYC-200V or being paid electronically.....	<input type="checkbox"/>	
1.	Net income (from Schedule B1, line 3 or B2, line 6) ● 1.	<input type="checkbox"/>	
2.	Minimum tax (See instructions) - NYC Gross Receipts: ●	<input type="checkbox"/>	
3.	Tax (line 1 or 2, whichever is larger) ● 3.	<input type="checkbox"/>	
4.	First installment of 2013 estimated tax:		
	(a) If application for extension has been filed, enter amount from line 2 of Form NYC-EXT ● 4a.		
	(b) If application for extension has not been filed and line 3 exceeds \$1,000, enter 25% of line 3 (see instructions)..... ● 4b.		
5.	Total before prepayments (add lines 3 and 4a or 4b)..... ● 5.		
6.	Prepayments (see instructions)..... ● 6.		
7.	Balance due (line 5 less line 6)..... ● 7.		
8.	Overpayment (line 6 less line 5)..... ● 8.		
9.	Interest (see instructions) 9.		
10.	Amount of line 8 to be: (a) Refunded - <input type="checkbox"/> Direct deposit - fill out line 10c OR <input type="checkbox"/> Paper check ... ● 10a.		
	(b) Credited to 2013 estimated tax ● 10b.		
10c.	Routing Number <input type="text"/> Account Number <input type="text"/> ACCOUNT TYPE <input type="checkbox"/> Checking <input type="checkbox"/> Savings ●		
11.	TOTAL REMITTANCE DUE (see instructions) Enter payment amount on line A above ● 11.		
12.	Federal return filed: ● <input type="checkbox"/> 1120 ● <input type="checkbox"/> 1120C ● <input type="checkbox"/> 1120S ● <input type="checkbox"/> 1120H ● <input type="checkbox"/> 1120F		
13.	Gross income ● 13.		

CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION

SIGN HERE	I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete.		Firm's Email Address:
	I authorize the Dept. of Finance to discuss this return with the preparer listed below. (see instructions)... YES <input type="checkbox"/> ●		
PREPARER'S USE ONLY	Officer's signature:	Title:	Date:
	Preparer's signature:	Preparer's printed name:	Check if self-employed: <input type="checkbox"/> Date:
	▲ Firm's name (or yours, if self-employed)		▲ Address
			▲ Zip Code

Make remittance payable to the order of: NYC DEPARTMENT OF FINANCE. Payment must be made in U.S.dollars, drawn on a U.S. bank. Attach copy of all pages of your federal tax return or pro forma federal tax return.

To receive proper credit, you must enter your correct Employer Identification Number on your tax return and remittance.

NAME _____

EIN _____

SCHEDULE B1

To be used by New York State C Corporations that elect to use NYS entire net income. See instructions.

1. New York State Entire Net Income.....	1.		
2. General Corporation Tax deducted in computing amount on line 1	2.		
3. Total of lines 1 and 2 (Enter on page 1, Schedule A, Line 1)	3.		

SCHEDULE B2

To be used by New York State S Corporations and C Corporations that do not elect to use Schedule B1. See instructions.

1. Federal Taxable Income before net operating loss deduction and special deductions	1.		
2. State and local income and MTA taxes deducted on federal return (see instructions).....	2.		
3. Total of lines 1 and 2.....	3.		
4. New York City net operating loss deduction (see instructions)	4.		
5. New York City and New York State income tax refunds included in Schedule B2, line1	5.		
6. Taxable net income. Line 3 less the sum of lines 4 and 5. (Enter on page 1, Schedule A, Line 1).....	6.		

ADDITIONAL REQUIRED INFORMATION - See Instructions

- 1. Is this taxpayer subject to the Commercial Rent Tax?..... ● YES NO
- 2. If "YES", were all required Commercial Rent Tax Returns filed?..... ● YES NO



MAILING INSTRUCTIONS

ALL RETURNS EXCEPT REFUND RETURNS
 NYC DEPARTMENT OF FINANCE
 P.O. BOX 5564
 BINGHAMTON, NY 13902-5564

REMITTANCES
PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/FINANCE OR
Mail Payment and Form NYC-200V ONLY to:
 NYC DEPARTMENT OF FINANCE
 P.O. BOX 3646
 NEW YORK, NY 10008-3646

RETURNS CLAIMING REFUNDS
 NYC DEPARTMENT OF FINANCE
 P.O. BOX 5563
 BINGHAMTON, NY 13902-5563

The due date for the calendar year 2012 return is on or before March 15, 2013.
 For fiscal years beginning in 2012, file on or before the 15th day of the third month after the close of the fiscal year.