# NEW YORK CITY DEPARTMENT OF FINANCE **NYC - 45**EZ

## **GENERAL CORPORATION TAX RETURN**

204	2
<b>2</b> 0 I	2

		Finance							
		For CALENDAR YEAR 2013 or FISC	AL YEAR beginning	2013 and ending		Check box if you are filing a 52- 53-week taxable year			
		Amended return	Final return - Check box if th	ne corporation has ceased opera	tions.	pecial short-period return (see inst.)			
		Enter 2-character special condi							
		Name				Taxpayer's Email Address:			
		In Care Of							
		Address (number and street)			EMPLO	OYER IDENTIFICATION NUMBER			
		Address (number and street)							
		City and State		Zip Code	BUSINESS CO	ODE NUMBER AS PER FEDERAL RETURN			
		Business Telephone Number		Date business began in NYC	<b>⊣</b> ।	THE REPORT OF THE PERSON OF TH			
•	SCHEDULE	A Computation	of Tax BEGIN WIT	TH SCHEDULES B1 or B2 ON PAG	SE 2. TRANSFER APP	LICABLE AMOUNT TO SCHEDULE A.  Payment Amount			
A	. Payment Amo	unt included with Form NYC-	200V or being paid ele	ectronically	A.	,			
_			2) 4		V 0005 4				
	•	chedule B1, line 3 or B2, line			X .0885 1.				
		nstructions) - NYC Gross Re			2.				
		ichever is larger)			3.				
4.	First installment of a (a) If application for	2014 estimated tax: extension has been filed,	enter amount from	line 2 of Form NYC-EX	ΚΤ <b>4</b> a.				
		extension has <b>not</b> been f e 3 (see instructions)			4b.				
5.	Total before prepay	ments (add lines 3 and 4a	a 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 instruc	ctions)		9.					
10.	Amount of line 8 to	be: (a) Refunded - Dire	ect deposit - fill out line	e 10c OR Paper	check 10a.				
		(b) Credited to 2014 e	stimated tax						
10c.	Routing Number , , , ,	Account Number		Checking	Savings				
11.	TOTAL REMITTAN	ICE DUE (see instructions	s) Enter payment an	nount on line A above.	11.				
	Federal return file		20C 🗆 1120S		☐ 1120F				
13.	Gross income				13.				
ш	I hereby certify that this return	CERTIFICATION C rn, including any accompanying rider, is		OFFICER OF THE and belief, true, correct and com					
SIGN HERE	1	Finance to discuss this return wi							
SIG	signature:		Title:	Date:	F	Preparer's Social Security Number or PTIN			
RER'S	Preparer's signature:	Preparer' printed na		Check if self- employed: Date:		Firm's Employer Identification Number			
PREPARER'S USE ONLY									
	▲ Firm's name (or yours,	if self-employed)	▲ Address	4	Zip Code				

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NAN	ΛΕ	E	EIN		
S	CHEDULE B1				
То	be used by New York State C Corporations that elect to use NYS entire	net incom	ne. See ins	tructions.	
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.			
S	CHEDULE B2				
То	be used by New York State S Corporations and C Corporations that do	not elect t	o use Sche	dule B1. See i	nstructions.
	Federal Taxable Income before net operating loss deduction and special deductions	1.			
	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.			
	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 Instru	uctions			
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
	Please enter Employer Identification Number	and Acco	ount ID		

#### MAILING INSTRUCTIONS

Attach copy of all pages of your federal tax return or pro forma federal tax return.

Make remittance payable to the order of NYC DEPARTMENT OF FINANCE. Payment must be made in U.S. dollars and drawn on a U.S. bank. To receive proper credit, you must enter your correct Employer Identification Number on your tax return and remittance. The due date for the calendar year 2013 return is on or before March 17, 2014.

For fiscal years beginning in 2013, file on or before the 15th day of the 3rd month following the close of the fiscal year.

### ALL RETURNS EXCEPT REFUND RETURNS

NYC DEPARTMENT OF FINANCE **GENERAL CORPORATION TAX** P.O. BOX 5564 BINGHAMTON, NY 13902-5564

### REMITTANCES **PAY ONLINE WITH FORM NYC-200V** AT NYC.GOV/FINANCE

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 **GENERAL CORPORATION TAX** P.O. BOX 5563 BINGHAMTON, NY 13902-5563

