GENERAL	CORPORATION	TAX RETURN
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20	13

		NEW YORK CITY DEP	PARTMENT OF FINANCE	GENER	RAL CORP	ORA	TIO	N TA	XI	RET	URN		20	13
		Finance	YEAR 2013 or FISCAL Y	EAR beginning		013 and	endina						box if you ar	
		Amended re			eck box if the corp							Special	short period ret	•
			t if a pro-forma federa								 elated fer	,	structions) enefits. (See	Inet)
			er special condition co					u ciuiiii	uny 5/	11,011	ciated ice	iciui tux b	cricins. (occ	iliou,
		Name				, L					Taxpayer	's Email A	ddress:	
		In Care Of												
		Address (number	r and street)							EMPLO	YER IDE	NTIFICAT	ION NUMBE	R.
		City and State			Ž	ip Code						DED 40 DE	D 5505041 0	
		Business Telepho	one Number		Date business began	in NYC			BUSII	NESS C	ODE NOM	DER AS PE	R FEDERAL R	EIURN
		CCHEDIII	LE A Computati	on of Tay -	PECINI WITH COHEDING	ON DACE	2 COMPLE	TE ALL OT	UED COL	IEDIII EE	TDANSEED	ADDI ICADI E	MOUNTS TO SCI	IEDIII E A
											TRANSFER A		nt Amount	IEDULE A.
			Amount included w		-200V or being	aid ele	ctronic	ally		A.				
	Allocated net incon	•		H-				X .088	35	1.				
	Allocated capital (fi			_				X .001	15	2a.				
2b.	Total allocated capit	al - Cooperativ	ve Housing Corps.	2b.				X .000)4	2b.				
2c.	Cooperatives - ent	ter: BORO		BLOCK		LC	Т							
3.	Alternative tax (see	e instructions)	(see page 2 for wor	ksheet)						3.				
4.	Minimum tax (see i	nstructions)	- NYC Gross Re	eceipts:						4.				
5.	Allocated subsidiary	capital (see in	nstructions)	5.			x .0	0075		5.				
6.	Tax (line 1, 2a, 2b,	3 or 4, which	ever is largest, Pl	L US line 5)						6.				
7.	UBT Paid Credit (a	attach Form N	IYC-9.7)							7.				
8a.	REAP Credit (attac	ch Form NYC-	-9.5)							8a.				
8b.	LMREAP Credit (a	ttach Form N	YC-9.8)							8b.				
9a.	Real Estate Tax Esc	alation, Employ	yment Opportunity F	Relocation and	d IBZ Credits (a	tach F	orm NY	/C-9.6))	9a.				
9b.	Biotechnology Cre	dit <i>(attach Foi</i>	rm NYC-9.10)							9b.				
10.	Net tax after credit	s (line 6 less t	total of lines 7, 8a,	8b, 9a and	9b)					10.				
11.	First installment of	estimated tax	c for period following	ng that cove	red by this retu	rn:								
	(a) If application for	or extension ha	as been filed, enter	r amount fron	n line 2 of Form	NYC-	EXT			11a.				
	(b) If application for	or extension ha	as not been filed ar	nd line 10 exc	ceeds \$1,000, e	nter 28	5% of li	ine 10		11b.				
12.	Sales tax addback p	er Admin. Cod	le §11-604.12(c) an	d 11-604.17a	(c) (see instruct	ons)				12.				
13.	Total of lines 10,11a	, 11b and 12								13.				
14.	Prepayments (from	n Prepayment	s Schedule, page	2, line G) (s	ee instructions)				14.				
15.	Balance due (line	13 less line 14	4)							15.				
16.	Overpayment (line	14 less line 1	3)							16.				
17a.	Interest (see instru	ıctions)			17a.									
17b.	Additional charges	(see instructi	ions)		17b.									
17c.	Penalty for underp	ayment of est	imated tax (attach	Form NYC-2	222) 17c.									
18.	Total of lines 17a,	17b and 17c								18.				
19.	Net overpayment (line 16 less lir	ne 18)							19.				
20.	Amount of line 19 t								k	20a.				
			dited to 2014 estir	-			-			20b.				
20c.	Routing		Account				ACCOUN							
	Number 1 1		Number			Checki	ng 🗌	Savin	gs 🗌					
21.	TOTAL REMITTAN	NCE DUE (see	<i>e instructions)</i> Ent	er payment	amount on line	A abo	ve			21.				

SCHEDULE A - Continued Computation of Tax - BEGIN WITH SCHEDULE B ON PAGE 3. COMPLETE ALL OTHER SCHEDULES. TRANSFER APPLICABLE AMOUNTS TO SCHEDULE A. 21a. 96 22a. 96 22a. 96 22b. NYC rent deducted on federal tax return or NYC rent from Schedule G, Part 1. THIS LINE MUST BE COMPLETED (see instr.) 22. 23c. Federal return filed: 1120 1120S 1120F 1120-RIC 1120-REIT 1120H 24d. Gross receipts or sales from federal return 24d. 25d. EIN of Parent Corporation 26d. 27c. 28d. 28d. 27d. EIN of Common Parent Corporation 28d. 28d. 29d. Business allocation percentage (from Schedule H, line 5) - if not allocating, enter 100% 29d. 36d. COMPOSITION OF PREPAYMENTS SCHEDULE 28d. 29d. PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 DATE AMOUNT A. Mandatory first installment paid with preceding year's tax. 3d. 3d.
22. NYC rent deducted on federal tax return or NYC rent from Schedule G, Part 1. THIS LINE MUST BE COMPLETED (see instr.) 23. Federal return filed: 1120
THIS LINE MUST BE COMPLETED (see instr.) 22. 23. Federal return filed: 1120
23. Federal return filed: 1120
24. Gross receipts or sales from federal return 25. EIN of Parent Corporation 26. Total assets from federal return 27. EIN of Common Parent Corporation 28. Compensation of stockholders (from Sched. F, line 1) 29. Business allocation percentage (from Schedule H, line 5) - if not allocating, enter 100% 29. COMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 A. Mandatory first installment paid with preceding year's tax.
25. EIN of Parent Corporation
26. Total assets from federal return
26. Total assets from federal return
28. Compensation of stockholders (from Sched. F, line 1)
28. Compensation of stockholders (from Sched. F, line 1)
COMPOSITION OF PREPAYMENTS SCHEDULE PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14 A. Mandatory first installment paid with preceding year's tax
A. Mandatory first installment paid with preceding year's tax
A. Mandatory first installment paid with preceding year's tax
B. Payment with Declaration, Form NYC-400 (1)
C. Payment with Notice of Estimated Tax Due (2)
D. Payment with Notice of Estimated Tax Due (3)
E. Payment with extension, Form NYC-EXT
F. Overpayment from preceding year credited to this year
G. TOTAL of A through F (enter on Schedule A, line 14)
Alternative Tax Worksheet Refer to page 7 of instructions before computing the alternative tax.
Atternative Tax Worksheet Relet to page 7 of instructions before computing the alternative tax.
Net income/loss (See instructions)
Enter 100% of salaries and compensation for the taxable year paid to stockholders owning more than 5% of the taxpayer's stock. (See instr.) 2. \$
Total (line 1 plus line 2)
Statutory exclusion - Enter \$40,000. (if return does not cover an entire year, exclusion must be prorated based on the period covered by the return). 4. \$
Net amount (line 3 minus line 4)
15% of net amount (line 5 x 15%)
Investment income to be allocated (amount on Schedule B, line 23b x 15%. Do not enter more than the amount on line 6 above. Enter "0" if not applicable.)
Business income to be allocated (line 6 minus line 7)
Allocated investment income (line 7 x investment allocation % from Schedule. D, line 2F)
Allocated business income (line 8 x business allocation % from Schedule H, line 5)
Taxable net income (line 9 plus line 10) 11. \$
Tax rate
Alternative tax (line 11 x line 12) Transfer amount to page 1, Schedule A, line 3



Form NYC-3L - 2013	NAME:		EIN:	F	Page	3
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	SCHEDULE B Computation and Allocation of Entire Net Income		
	<u> </u>		
1.	Federal taxable income before net operating loss deduction and special deductions (see instructions)		
2.	Interest on federal, state, municipal and other obligations not included in line 1 above (see instructions)		
3.	Deductions directly attributable to subsidiary capital (attach list) (see instructions)	I	
4.	Deductions indirectly attributable to subsidiary capital (attach list) (see instructions)		
5a.	NYS Franchise Tax, including MTA taxes and other business taxes deducted on the federal return (attach rider) (see instr.)		
5b.	NYC General Corporation Tax deducted on federal return (see instructions)	5b.	
6.	New York City adjustments relating to (see instructions):		
	(a) Sales and compensating use tax credit		
	(b) Employment opportunity relocation costs credit and IBZ credit		
	(c) Real estate tax escalation credit		
7.	(d) ACRS depreciation and/or adjustment (attach Form NYC-399 and/or NYC-399Z)	6d.	
	(a) Payment for use of intangibles	7a.	
	(b) Domestic Production Activities Deduction (see instructions)	7b.	
	(c) Other (see instructions) (attach rider)	7с.	
8.	Total additions (add lines 1 through 7c)	8.	
9a.	Dividends from subsidiary capital (itemize on rider) (see instr.)		
9b.	Interest from subsidiary capital (itemize on rider) (see instructions)		
9c.	Gains from subsidiary capital		
10.	50% of dividends from nonsubsidiary corporations (see instructions) 10.		
11.	New York City net operating loss deduction (attach Form NYC-NOLD-GCT) (see instr.) 11.		
12.	Gain on sale of certain property acquired prior to 1/1/66 (see instructions)12.		
13.	NYC and NYS tax refunds included in Sch. B, line 8 (see instructions)13.		S CORPORATIONS
14.	Sales tax refunds or credits from vendors or New York State.		see instructions
15	Also include on page 1, Sch. A, line 12 (see instr.)		for line 1
13.	Form 5884 (see instructions)		
16.	Depreciation and/or adjustment calculated under pre-ACRS or pre - 9/11/01 rules		
	(attach Form NYC-399 and/or NYC-399Z) (see instr.) 16.		
17.	Other deductions: (see instructions) (attach rider)		
18.	Total deductions (add lines 9a through 17)	18.	
19.	Entire net income (line 8 less line 18) (see instructions)	19.	
20.	If the amount in line 19 is not correct, enter correct amount here and explain on rider (see instr.)	20.	
21.	Investment income - (complete lines a through h below) (see instructions)		
	(a) Dividends from nonsubsidiary stocks held for investment (see instructions)		
	(b) Interest from investment capital (include federal, state and municipal obligations) (itemize on rider)	21b.	
	(c) Net capital gain (loss) from sales or exchanges of nonsubsidiary securities held for investment		
	(itemize on rider or attach Federal Schedule D)		
	(d) Income from assets included on line 3 of Schedule D		
	(e) Add lines 21a through 21d inclusive		
	(f) Deductions directly or indirectly attributable to investment income (attach list) (see instructions)	_	
	(g) Balance (subtract line 21f from line 21e)	21g.	
	(h) Interest on bank accounts included in income reported on line 21d 21h.		
22.	New York City net operating loss deduction apportioned to investment income (attach rider) (see instr.)	22.	
	, , , , , , , , , , , , , , , , , , ,		
	Investment income (line 21g less line 22)		



Form NYC-3L - 2013 NAME:				=	IN:					Page 4
SCHEDULE C Subsidiar	v Capit	al and A	Illocation							
A	,	В	С		D		Е		F	G
DESCRIPTION OF SUBSIDIARY CAPITA	۸L	% of Voting	Average	Liabilit	ies Directly or In-	Not	Average Value	e le	suer's	Value Allocated
LIST EACH ITEM EMPLOYER IDENTI		Stock	Value	direct	ly Attributable to	(co	lumn C minus	Allo	ocation	to NYC
(USE RIDER IF NECESSARY) NUMBER		Owned		Sub	sidiary Capital		column D)	Per	,	olumn E x column F)
		%							%	
1. Total Cols C, D and E (including item	ns on ride	er) 1.								
2. Total Column G - Allocated subsidiar	y capital	: Transfer	this total to Sc	hedule A	, line 5				2.	
					7					
SCHEDULE D Investr	nent C	apital	and Alloca	tion						
Α	В	С)	Е		F		G	Н
DESCRIPTION OF INVESTMENT	No. of Share			Directly or	Net Average		Issuer's		ue Allocated	Gross Income
LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	or Amount of Securities	of Valu		Attributable nent Capital	(column C minus	column D)	Allocation Percentage		to NYC in E x column	from F) Investment
(OCETIBELTI NECESCATT)				·			9/	/		
							7	′o		
								-		
								-		
 Totals (including items on rider) 										
2. Investment allocation percentage (line 1G d	livided by line	e 1E rounded to	the nearest one hun	dredth of a p	percentage point)	2.	. 9	6		
3. Cash - (To treat cash as investment capital, you must include it on this line.)		2						_		
				4						
4. Investment capital (total of lines 1E and	ı 3⊑ - ente	er on Sched	ule E, line 10)	4.						
SCHEDULE E Compu	tation	and Al	location of	f Capi	tal					
Basis used to determine average value in column C. Che	ck one. (Att	ach detailed si	chedule.)							
		uon uotunou ot	onouuror,							
- Annually - Semi-annually	Qu	arterly	CO	LUMN A		COLUI	MN B		CC	DLUMN C
- Monthly - Weekly	- Da	ilv		ning of Ye	ar	End of			1	erage Value
		•								
Total assets from federal return Pack property and marketable acquirities.								1. 2.		
 Real property and marketable securities Subtract line 2 from line 1 								3.	1	
								4.		
4. Real property and marketable securities at fair t5. Adjusted total assets (add lines 3 and	iliai ket vali ⊿)	ue						5.		
6. Total liabilities (see instructions)	+)							6.		
7. Total capital (column C, lin										
8. Subsidiary capital (Sch			,							
9. Business and investme										
10. Investment capital (Sc		•	, ,		•					
11. Business capital (line 9										
12. Allocated investment of		,								
13. Allocated business cap										
14. Total allocated business										
15. Issuer's allocation perce	entage (si	um of Sch.	E, line 14 and S	ch. C, co	I. G, line 2 ÷	Sch. E	E, line 7			
rounded to the nearest	one hund	redth of a p	ercentage point) (enter o	n page 2 - <i>lir</i>	ne 21a.	See Instr	ː) 15.		%
SCHEDULE	Ce	rtain Si	tockholder	s						
Include all stockholders owning in exc					compensation in	cluding co	mmissions			
include all stockholders owning in exc	7633 OI 3 76 OI	taxpayer 3 133u	ied capital stock who i	eceived arry	compensation, in	cidding co	11111113310113.		Salany & All C	Other Compensation
13. Allocated business cap 14. Total allocated business 15. Issuer's allocation percorder rounded to the nearest of the second s	Code (At	tach rider if	necessary)	Socia	l Security Num	ber	Official T	Title	Received 1	rom Corporation
									(If nor	ie, enter "0")
1 Total including any an	nount on	ridor (Ent	or on Schodul	ο Λ lino	28/			4		

orm NYC-3L - 2	013	NAME:				EIN:				Page 5
SCHED	UL	E G Comp	lete thi	s schedule	if busine	ess is carrie	d on both i	inside and	outside I	NYC
		n of, and rent paid or								
ecutive office, pu	blic wa	arehouse, contractor,	converter, et	c.), and number of	f employees, the	ir wages, salaries ar	nd duties at each I	ocation.		
	Compl	ete Address		Rent	Natur	re of Activities	No. of Employees	Wages, Salaries,	, Etc.	Duties
UMBER AND STREET										
ITY		STATE	ZIP							
UMBER AND STREET										
ITY		STATE	ZIP	-						
UMBER AND STREET										
ITY		STATE	ZIP	_						
UMBER AND STREET										
ITY		STATE	IZIP							
11 7		SIAIE	ZIP							
Total										
Dowt O					- f b i O 1	TOIDE Name Varia Oit				
		n of, and rent paid or warehouse, contractor							n (manufacturin	ig, sales oπice,
		ete Address	,,	Rent		re of Activities	No. of Employees	Wages, Salaries,	Ftc	Duties
UMBER AND STREET	Compi	oto riddi ooo		Tiont	rada	C OI / IOIIVIIICO	140. Of Employees	vages, calaries,		Datico
ITY		STATE	ZIP	-						
UMBER AND STREET										
ITY		STATE	ZIP							
		OTATE	211							
UMBER AND STREET										
ITY		STATE	ZIP							
UMBER AND STREET										
EITY		STATE	ZIP	_						
Fotol										
Total										
SCHED	UL	E H Busir	iess Al	location -	see instr	uctions befo	ore comple	eting this	schedule	
		ned				COLUMN A - N	IEW YORK CIT	1a.	IN B - EVER	/WHERE
		ted - multiply by 8						1b.		
		ned						1c.		
		al property owned						1d.		
		nal property rented		• '				1e.		
f. Total					1f.			1f.		
g. Percentag	ge in I	New York City (colu	umn A divi	ded by column I	B)			1g.		%
h. Multiply lir	ne 1g	by 16.5						1h.		
		Receipts in the	regular co	urse of business	s from:					
	2a.	Sales of tangible pe	rsonal prop	erty where shipm	nents					
		are made to point	s within Ne	ew York City	2a.					
	2b.	All sales of tangib	le persona	al property				2b.		
	2c.	Services performe	ed		2c.			2c.		
	2d.	Rentals of proper	y		2d.			2d.		
	2e.	Royalties			2e.			2e.		
	2f.	Other business re	ceipts		2f.			2f.		
	2g.	Total	-					2g.		
	2h.	Percentage in Ne			•	col B)		2h		%
	2i.	Multiply line 2h by	-							
		Wages, salaries an				[ZI.		
	Ja.	except general ex						3a.		
	26	Percentage in Ne								%
		•		•	-	•				70
	3c.	Multiply line 3b by						3c.		
		Weighted Facto								
		Add lines 1h, 2i a						4a.		
	4b.	Divide line 4a by 1 total of the weights								
		one hundredth of a				-		4h		%
		Business Alloc						TD.		
	5.	Enter percentage			edule I, enter	percentage from	part 1,			
		line 8 or part 2, lin				-		5.		%

-orm	NYC-3L - 2013	- 1	NAME:	EIN: _				Page 6
S	CHEDU	LE	Business Allocation for Aviation C	orporations	and Corporation	s Operating \	/esse	ls
P	art 1 Busin	ess a	allocation for aviation corporations					
					AVERAGE FO			
	A: () : 1				- NEW YORK CITY	COLUMN B - EV	ERYWHE	RE
_			I departures					
2.	-	•	entage (column A divided by column B)			l		%
			fled					
	-	-	entage (column A divided by column B)	• •				%
)	7.			_	
			entage (column A divided by column B)					%
			d 6				<u> </u>	%
В.	Allocation perce	ntage	(line 7 divided by three rounded to the nearest one hundre	dth of a percentage	e point) (enter on Schedu	ule H, line 5) 8.		%
Pa	art 2 Busine	ess al	location for corporations operating vessels in fe	oreign commerc	ce			
				COLUMN A	NEW YORK CITY	COLUMN B -	EVEDVI	WHEDE
					TERRITORIAL WATERS	COLUMN B -	EVENT	WHERE
۱.	Aggregate nui	mber	of working days	1.				
2.	Allocation perce	entage	(column A divided by column B rounded to the nearest one h	nundredth of a perce	entage point) (enter on Sci	hedule H, line 5) 2.		%
-	•	-	The following information must be entered for this r	·				OFOTION!
1a.			pal business activity	eturn to be compi	ete. (REFER TO INSTRUCTI	ONS BEFORE COMPLET	ING THIS	SECTION.)
	-							
1b.	_		siness activities (attach schedule, see instructions)					
2.			rting corporation, if different from name entered on page					
3.	Is this corpora	ition in	cluded in a consolidated federal return?			L Y	/ES	NO
	If "YES", give	parent	t's name	EI	enter here and on page	go 2 lino 25		
4.			member of a controlled group of corporations as defined		563,			
	disregarding a	any ex	clusion by reason of paragraph (b)(2) of that section?			Ц ү	ΈS	NO
	If "YES", give of	commo	n parent corporation's name, if any	EIN	V	0 lin- 07		
5.			venue Service or the New York State Department of Taxa		enter nere and on pag	ge 2, line 27		
٥.			le income or other tax base reported in a prior year, or a		nder audit?	D	YES	□ NO
	If "YES", by wl		Internal Revenue Service					
	II TES, by Wi	HOIH?	Internal Revenue Service	State period(s).	Beg.:	===================================	MMDDYY	
			New York State Department of Taxation and Finance	State period(s):	Beg.:	End.:		
							MMDDYY	
6.	If "YES" to que	estion	5, has Form(s) NYC-3360 (Report of Federal/State Cha	nge in Tax Base) b	een filed?	L 1	YES	NO
	7.		his corporation make any payments treated as interest in the					
		own	ing directly or indirectly, individually or in the aggregate, tanding capital stock? If "YES", complete the following (i	more than 50% of f more than one. a	the corporation's issued ittach separate sheet)	and	/ES	NO
			reholder's name:					
			st paid to Shareholder: Total Indebtedness to sl					
	8.	Was	this corporation a member of a partnership or joint vent	ure during the tax	year?	L 1	/ES	NO
	•		ES", attach schedule listing name(s) and Employer Iden			*		
	9.		ny time during the taxable year, did the corporation have an ted in NYC or a controlling interest in an entity owning si				/FS	NO
_			"YES" to 9, attach a schedule of such property, indicating	,				
			ddress, borough, block and lot number.	the flatare of the in	norcot and moldaring the	diodi		
			as any NYC real property (including a leasehold interest)					
			operty acquired or transferred with or without considera				YES	□ NO □ NO
		,	as there a partial or complete liquidation of the corporat as 50% or more of the corporation's ownership transferred during t				YES YES	□ NO
	11. 12. 13.	,	ES" to 10b, 10c or 10d, was a Real Property Transfer Ta	•	, ,		res Yes	
į						L 1	LO	□ NO
i	12.		O" to 11, explain:					
į	13.		s the corporation have one or more qualified subchapter ES": Attach a schedule showing the name, address and E				rES	NO
			SSS filed or was required to file a City business income			ICI		
	14.		ederal return was filed on Form 1120S, enter the number					
	15.		is taxpayer subject to the Commercial Rent Tax?				YES	NO
-	16.		ES", were all required Commercial Rent Tax Returns file			L 1	YES	NO
		Dicc	so onter Employer Identification Number		and Account ID			

SCI	HEDULE K	Federal F	Return Informati	on			
The foll	lowing information	must be entere	d for this return to be	complete.			
Enter or	n lines 1 through 10 ir	n the Federal Am	ount column the amounts	reported on y	our federal retu	ırn or pro-forr	na Federal return. (See instructions)
Federal 1	120						▼ Federal Amount ▼
1. Divid	dends					1. [
2. Inter	est income					2.	
3 . Cap	ital gain net income					3.	
						I	
5. Tota	I income					5.	
6. Bad	debts					6.	
7. Inter	est expense					7.	
8. Othe	er deductions					8.	
9. Tota	I deductions					9.	
10. Net	operating loss deduct	ion				10.	
						·	·
		CERTI	FICATION OF AN ELE	CTED OFFI	CER OF THE	CORPORA	TION
I horoby o	ortify that this raturn, inclu		ring rider, is, to the best of my				Firm's Email Address:
, ,	•	• • • •	return with the preparer lis	•			Time Emaily address.
Sign HERE:	Signature of officer			Title		Date	Preparer's Social Security Number or PTII
PREPARER'S USE → ONLY	Preparer's signature		Preparer's printed name		Check if self- employed ✔	Date	
UNLY	-		•				Firm's Employer Identification Number
	▲ Firm's name (or your	rs if self-employed)	▲ Address			▲ Zip Code	

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 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

Page 7

NYC DEPARTMENT OF FINANCE GENERAL CORPORATION TAX P.O. BOX 5563 BINGHAMTON, NY 13902-5563



Form NYC-3L - 2013

NAME: