NEW YORK CITY DEPARTMENT OF FINANCE

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SOFTWARE VENDOR TEST PACKAGE FOR UNINCORPORATED BUSINESS TAX FOR PARTNERSHIPS WITH BUSINESS TAX E-FILE

Tax Year 2018 Version 1.0 January 10, 2019

Revision History

Version	Author	Date	Change Highlights
1.0	Lani Mcleod	1/10/2019	Initial Version

This package describes the New York City (NYC) Acceptance Testing System procedures for software developers participating in the NYC Business Tax e-File Program (BTeFile).

WHO MUST TEST

All software developers participating in the NYC BTeFile Program must test.

WHAT TO TEST

The tests verify that the e-file software creates a complete return, carries appropriate values from one line/form to another, formats and transmits NYC returns according to the XML specifications.

Software developers must test all the NYC Unincorporated Business Tax for Partnerships (UBTP) forms that they support. Before testing you should inform NYC which UBTP forms you support by email to <u>BTeFile@finance.nyc.gov</u>.

TEST CASES TO SUBMIT

All vendors participating in Unincorporated Business Tax - Partnerships e-File must submit the following test scenarios:

Test Case	Taxpayer Name	EIN	Primary Form	Associated Forms
1	SAM UBTP TC ONE	00-2000001	NYC-204	NYC-399Z
2	DAN UBTP TC TWO	00-2000006	NYC-204	NYC-114.5 NYC-114.6 NYC-114.7 NYC-399Z NYC-NOLD-UBTP
3	JENN UBTP TC THREE	00-2000002	NYC-204	NYC-114.8 NYC-114.10 NYC-114.12 NYC-399Z NYC-WPE
4	EAST UBTP TC THREE	00-2000004	NYC-204EZ	None

5	SHOE UBTP TC FOUR	00-2000005	NYC-EXT	None
6	CARL UBTP TC FIVE	00-2000003	NYC-5UB	None

- If you do not support one of the primary forms do not submit that test.
- If you do not support one or more of the forms associated with a specific test case, submit the test with the unsupported form(s) as a PDF attachment(s). If this is done, an email must be sent to BTeFile@finance.nyc.gov indicating the forms sent as PDF attachments.
- Contact BTeFile@finance.nyc.gov if you desire to send additional test returns not covered in this test package.

WHEN TO TEST

Testing for UBT Partnership filers is scheduled to begin January 10, 2018. To ensure adequate time for testing before the filing season, software developers should submit their initial NYC test files as soon as possible. There is no cutoff date for testing with NYC, as long as the IRS is still accepting test returns. We do not require software developers to pass federal testing before testing with NYC. Software developers may conduct federal and City testing concurrently if the IRS allows it.

TRANSMITTING TEST FILES

Software developers must transmit NYC test files through the IRS Me-F system. You will get an acknowledgment from the IRS. If your test files are accepted by the IRS, NYC will retrieve your test files. If your test files are rejected by the IRS, you must correct the error and re-transmit. You may transmit an incomplete set of test cases during testing. However, a final set of acceptable test returns must be submitted in order to be accepted into the NYC BTeFile Program.

When your file test has been transmitted to the IRS, you must send an email to <u>BTeFile@Finance.nyc.gov</u>. This email must include the test case(s) being submitted, and any deviation from the test data.

COMMUNICATING TEST RESULTS

Software Developers will be given confirmation by telephone and email from the New York City Business Tax e-File Coordinator when software has been successfully tested and approved. Only approved software may be released and distributed by the developer. NYC will make every effort to provide test results to software developers within 48 hours, Monday through Friday.

TEST ACKNOWLEDGMENT

For each submission a software developer sends through the IRS, DOF will acknowledge. The acknowledgment they receive will be either positive (ACK) or negative (NACK). The acknowledgment will be sent back to the IRS system for the vendor to pick up.

APPROVAL OF E-FILE SOFTWARE

To be accepted into the NYC Business Tax e-file program, software developers are required to successfully complete the NYC testing, in addition to completing the IRS testing. Once software developers successfully complete the NYC test, NYC will inform them by email that their e-file software has been approved for NYC BTeFile. A list of approved BTeFile software packages will be posted on NYC Department of Finance's Web site, with a link to the software Web site (if provided by the software developers).

UBTP Test Case One

Begins on the next page

Taxpayer name	SAM UBTP TC ONE
EIN	00-2000001
Primary Form	NYC-204
Associated Form(s)	NYC-399Z
Attachments	None
Purpose of test	100% Allocation 2 Partners
Other instructions	If you are not supporting one or more of the credit forms, you may complete this test case leaving the corresponding lines on Schedule A blank



Single member LLCs using SSN as their primary identifier must use Form NYC-202 UNINCORPORATED BUSINESS TAX RETURN FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

	For CALENDAR YEAR 2018 or FISCAL YEAR beginning1/	1		B, and ending <u>12/31/2</u>	018_
	Name Name SAM 2018 UBTP TC ONE Change		TAX	PAYER'S EMAIL ADDRESS	
	In Care of		EMPLOYE	R IDENTIFICATION NUMBER	1
	Address (number and street) Address 631 N Mckinley Drive Change		0 0 -	20000001	
	City and State Zip Code Country (if not US) Reno, NV 895010	BUSI		E NUMBER AS PER FEDERAL RE	TURN
	Business Telephone Number Date business began in NYC Date business ended in NYC		Ę	5 4 1 1 1 0	
	Entity Type:	x limite	d partnersh	nip limited liability	company
		of Final rmination			
	Final return - ceased operations Federal Return filed: 🖾 106	5	1065-B		
	č Engaged in a fully exempt unincorporated business activity	empt unii	ncorporate	d business activity	
				e, if applicable (see instructions	,
	CHEDULE A Computation of Tax BEGIN WITH SCHEDULE B ON PAGE 3. COMPLETE ALL OTHER SCHED		RANSFER A	PPLICABLE AMOUNTS TO SCHE Payment Amount	DULE A.
Α.	Payment Amount being paid electronically with this return	A .			
1.	Business income (from page 3, Schedule B, line 31)	1.		117,474	
2.	Business allocation percentage from Schedule E, Part 3, line 2. (if not allocating, enter 100%) 2.).0	0 %	
3a.	If line 2 is less than 100%, enter income or loss on NYC real property (see instructions)	3a.			
3b.	Enter allocated business income, or subtract business loss, from other partnerships (see instructions)	3b.			
4.	Balance (line 1 less line 3a)	4.		117,474	
5.	Multiply line 4 by the business allocation percentage from line 2	5.		117,474	
6.	Total of lines 3a and 3b. (see instructions)	6.			
7a.	Investment income (from page 3, Schedule B, line 30)	7a.			
7b.	Add allocated investment income, or subtract investment loss, from other partnerships (see instr.)	7b.			
8.	Investment allocation percentage (IAP) (from page 4, Schedule D, line 2) 8.			%	
9.	Multiply line 7a by the IAP from line 8. Add the amount on line 7b. (see instructions)	9.			
10.	Total before NOL deduction (See instructions)	10.		117,474	
11.	Deduct NYC net operating loss deduction (from Form NYC-NOLD-UBTP, line 11) (see instructions).	11.		0	
12.	Balance before allowance for active partners' services (line 10 less line 11)	12.		117,474	
13.	Less: allowance for active partners' services (if line 12 is a loss, enter "0") (see instructions)				
	Number of active partners claimed # 2	13.		5,000	
14.	Balance before specific exemption (line 12 less line 13)	ŀ		97,474	
15.	Less: specific exemption (see instructions and attach schedule) (if line 12 is a loss, enter "0")	ŀ		5,000	
16.	Taxable income (line 14 less line 15)	ŀ		92,474	
17.	Tax before business tax credit (4% of amount on line 16)	17.		3699	
18.	Less: business tax credit (select the applicable credit condition from the sch. on page 2 and enter amount) (see instructions)	18.		3,146	
19.	Total tax before Unincorporated Business Tax paid credit (line 17 less line 18) (see instructions).	19.		553	
20.	Less: UBT Paid Credit (from Schedule A, line 3 of attached Form NYC-114.7) (see instructions).	20.			
21.	UNINCORPORATED BUSINESS TAX (line 19 less line 20) (if the balance is less than "0", enter "0") (see instr.).	21.		553	

THIS RETURN MUST BE SIGNED, (SEE PAGE 6 FOR SIGNATURE BOX AND MAILING INSTRUCTIONS)

Name

EIN

s	CHEDULE A Computation of Tax - Continued			
22a.	Credits from Form NYC-114.5 (attach form) (see instructions) 22a.			
22b.	Credits from Form NYC-114.6 (attach form) (see instructions) 22b.			
22c.	Credits from Form NYC-114.8 (attach form) (see instructions) 22c.			
22d.	Credits from Form NYC-114.10 (attach form) (see instructions) 22d.			
22e.	Credits from Form NYC-114.12 (attach form) (see instructions) 22e.			
23.	Net tax after credits (line 21 less sum of lines 22a through 22e)	23.	553	
24.	Payment of estimated tax, including credit from preceding year and payment with extension, NYC-EXT (see instr.)	24.	7,800	
25.	If line 23 is larger than line 24, enter balance due	25.		
26.	If line 23 is smaller than line 24, enter overpayment	26.	7,247	
27a.	Interest (see instructions)			
27b.	Additional charges (see instructions) 27b.			
27c.	Penalty for underpayment of estimated tax (attach Form NYC-221) 27c.			
28.	Total of lines 27a, 27b and 27c	28.		
29.	Net overpayment (line 26 less line 28) (see instructions)	29.	7,247	
30.	Amount of line 29 to be: (a) Refunded - Direct deposit - <i>fill out line 30c</i> OR Paper check	30a.		
	(b) Credited to 2019 estimated tax on Form NYC-5UB	30b.	7,247	
30c.	Routing Account Account TYPE Number Number Checking	s 🗆 🛛		
31.	TOTAL REMITTANCE DUE (see instructions)	31.		
32.	NYC rent deducted on federal tax return or NYC rent from Schedule E, Part 1	32.	75,600	
33.	Gross receipts or sales from federal return	33.	4,922,266	
34.	Total assets from federal return	34.	611,644	

Business Tax Credit Computation

- If the amount on page 1, line 17, is \$3,400 or less, your credit on line 18 is the entire amount of tax on line 17. (NO TAX WILL BE DUE)
- 2. If the amount on page 1, line 17, is \$5,400 or over, no credit is allowed. Enter "0" on line 18.
- 3. If the amount on page 1, line 17, is over \$3,400 but less than \$5,400, your credit is computed by the following formula:

tax on page 1, line 17 X $\left(\frac{\$5,400 \text{ minus tax on line 17}}{\$2,000}\right) = -----= \text{your credit}$

	Payments of Estimated Tax Computation								
PRI	EPAYMENTS CLAIMED ON SCHEDULE A, LINE 24	DATE	AMOUNT						
Α.	Payment with declaration, Form NYC-5UB (1)								
В.	Payment with Notice of Estimated Tax Due (2)								
C.	Payment with Notice of Estimated Tax Due (3)								
D.	Payment with Notice of Estimated Tax Due (4)								
E.	Payment with extension, Form NYC-EXT	03/15/19	7,800						
F.	Overpayment credited from preceding year		,						
G.	TOTAL of A through F. (Enter on Schedule A, line 24)								

Name

S	CHEDULE B Computation of Total Income	9							
Р	art 1 Items of income, gain, loss or deduction								
1. 2.	Ordinary income (loss) from federal Form 1065, line 22 or 10 Net income (loss) from all rental real estate activity not include Dart L line 25 but included on federal 2 she table 1/		111,494						
2	Part I, line 25 but included on federal Schedule K 2. All portfolio income such as interest, dividends, royalties, annuity income and gain (loss) on the disposition of property not								
3.	All portfolio income such as interest, dividends, royalties, annuity income and included in Form 1065, line 22 or 1065-B, Part I, line 25, but included on fede								
4.	Guaranteed payments to partners from federal Schedule K (
 5.	Payments to current and retired partners included in other deductions from fede								
6.	Other income not included in Form 1065, line 22 or 1065-B, Part I, line 25, but include								
7.	Charitable contributions from federal Schedule K		103,030						
8.	Other deductions included in Form 1065, line 22 or 1065-B, Part I, line 25 and Part II, line			nst.) 8.					
9.	Other income and expenses not included above that are req to partners (attach schedule) (see instructions)	uired to be repor	ted separately	9.					
10.	Total federal income (combine lines 1 through 9, do not inclu			10.		111,494			
11.	Subtract net income or gain (or add net loss) from rental, sa situated outside NYC if included in line 10 above (attach sch			11.					
12.	Total income before New York City modifications (combine lin	ne 10 and line 11)	12.		111,494			
P	art 2 New York City modifications (see instructions for S	Schedule B, par	t 2)						
		PARTNER A	PARTNER B	PARTNER C		TOTAL			
	ADDITIONS EIN OR SSN	000000001	000000002						
13.	All income taxes and Unincorporated Business Taxes 13.				13.				
14.	(a) Relocation credits				14a.				
	(b) Expenses related to exempt income14b.				14b.				
	(c) Depreciation adjustments (see instr. and attach Form	14,689	148		14c.				
	NYC-399 and/or NYC-399Z) 14c. (d) Exempt Activities 14d.	,			14c.				
15.	Other additions (attach schedules) (see instructions)15.				140.				
16.	Total additions (add lines 13 through 15) 16 .	14,689	148		16.				
	SUBTRACTIONS	PARTNER A				TOTAL			
		PARINERA	PARTNER B	PARTNER C	+	TOTAL			
17.	All income tax and Unincorporated Business Tax refunds (included in part 1)17.				17.				
18.	Wages and salaries subject to federal jobs credit (see instructions)				18.				
19.	Depreciation adjustment (see instr. and attach Form NYC-399 and/or NYC-399Z)19.	2,647	27		19.	2,674			
20.	Exempt income (included in part 1, line 10) (see instr.)20.				20.	, -			
21.	50% of dividends (<i>see instructions</i>)				20.				
22.	Exempt Activities				21.				
23.	Other subtractions (attach schedule) (see instructions)23.				23.				
24.	Total subtractions (add lines 17 through 23)24.	2,647	27		24.	2,674			
	25. Combine lines 16 and 24 (total)			25.		12,163			
	26. Total income (combine lines 12 and 25)					123,657			
	27 . Less: Charitable contributions (not to exceed					6,183			
			117,474						
	29. Investment income - (complete lines a throu	28. Balance (line 26 less line 27) 29. Investment income - (complete lines a through g below) (see instructions)							
	(a) Dividends from stocks held for investment								
	 28. Balance (line 26 less line 27) 29. Investment income - (complete lines a throu. (a) Dividends from stocks held for investment (b) Interest from investment capital (include nor (c) Net capital gain (loss) from sales or exc (d) Income from assets included on line 3 c (e) Add lines 29a through 29d inclusive (f) Deductions directly or indirectly attributation (g) Interest on bank accounts included in income rep 								
	(c) Net capital gain (loss) from sales or exc	(c) Net capital gain (loss) from sales or exchanges of securities held for investment							
	(d) Income from assets included on line 3 c				<u> </u>				
	(e) Add lines 29a through 29d inclusive								
	(f) Deductions directly or indirectly attributa			29f. 0					
	(g) Interest on bank accounts included in income rep 30. Investment income (line 29e less line 29f) (en		-	-					
	31. Business income (line 28 less line 30) (enter her					117,474			
				.,					

EIN

Form NYC-20	04 - 2018		Page 4
Name			EIN
SCHED	ULE C	Partnership Information -	THIS SCHEDULE MUST BE COMPLETED FOR PARTNERSHIPS TO CLAIM ALLOWANCE FOR PARTNER'S SERVICES AND FOR PARTNERS TO CLAIM THE UBT PAID CREDIT ON THEIR UBT, GCT,BCT OR PIT RETURNS.
.			

How many partners are in this partnership? 2

Number of active partners ------>

2

Please provide the following information: Full Name and Address, Employer Identification Number or Social Security Number, check Yes or No if individual partner is a resident of NYC, enter type of partner (C if Corporation, S if S Corporation, I if Individual, P if Partnership, LLP or LLC, O if Other), check the appropriate box if partner is a general or a limited partner.

A		В	С	[כ	E	F		G		Н	I	
Name and Zip Code (if within USA) Name and Country (if outside of USA)		Interest %	Percentage of Time Devoted	Part	ividual ner a lent of ? (✔)	Partner Type	Pari (•		Employer Identific - or - Social Securit		Partner's Distributive Share	Percentag Distribut Share	ive e
	1		to Business	YES	NO		GENERAL	LIMITED			(see instr.)	(see instr.)	
(a)	Lea Partner 1 11219	99 %	%	х			x		0000000	01	116,299	99	%
(b)	Jacob Partner 2 11219	1 %	%	х				x	0000000	02	1 , 175	1	%
(c)		%	%										%
(d)		%	%										%
(e)		%	%										%
				*					·	TOTALS:	117,474	100%)

SCHEDULE D Investment Capital and Allocation and Cash Election										
	F	0								
A	В	С	D	E	F	G				
DESCRIPTION OF INVESTMENT	No. of Shares or	Average	Liabilities	Net Average Value	Issuer's	Value Allocated				
LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	Amount of Securities	Value	Attributable to Invest- ment Capital	(column C minus column D)	Allocation Percentage	to NYC (column E X column F)				
					%					
1. Totals (including items on rider)										
2. Investment allocation percentage (line 1G divid	led by line 1E.	Round to the ne	arest hundredth of	a percent)	%					
3. Cash - (To treat cash as investment capital, you must include it on this line.)										
4. Investment capital. Total of line 1e and 3e			>							

ATTACH FEDERAL FORM 1065 OR 1065-B AND ALL ACCOMPANYING SCHEDULES INCLUDING THE INDIVIDUAL K-1s



Name

SCHEDULE E Locations of Places of Business Inside and Outside New York City

All taxpayers must complete Schedule E, Parts 1 and 2.

Com	plete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
JMBER AND STREET						-	
ТҮ	STATE	ZIP	_				
JMBER AND STREET							
TY	STATE	ZIP	_				
JMBER AND STREET							
TY	STATE	ZIP	_				
JMBER AND STREET							
ТҮ	STATE	ZIP	_				

Part 2 ^{Loca}	tion for each place of	of business O	UTSIDE New Yo	ork City (see instructions; attach	rider, if necessa	ry)	
(Complete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
NUMBER AND STREET							
СІТҮ	STATE	ZIP					
NUMBER AND STREET							
CITY	STATE	ZIP					
Total		•					

Part 3 Single Receipts Factor Business Allocation Percentage

Taxpayers who do not allocate business income outside New York City must enter 100% on Schedule E, Part 3, line 2 and Schedule A, line 2. Taxpayers who are allocating business income inside and outside New York City must complete Schedule E, Part 3 and enter the percentage from line 2 on Schedule A, line 2.

	DESCRIPTION OF ITEM USED AS FACTOR	COLUMN A - NEW YORK	CITY	COLUMN B -	EVERYWHERE
1.	Gross sales of merchandise or charges for services during the year 1.				
2.	Business Allocation Percentage (line 1, column A divided by line 1, column B rounded to the nearest hundredth of a percenter here and on Page 1, Schedule A, line 2)		2.	100	%



EIN_

lar	me		E	IN			
S	CHEDULE F	If you are taking a Net Operatin NYC-NOLD-UBTP. If you have a forward, please attach Form N	a loss on Page 1, I	Line 10 whic	h you a	are cari	rying
s	CHEDULE G	The following information must b	e entered for this r	return to be c	omple	te	
1.	Nature of business or p	rofession: <u>WEB</u> and Retail					
		ax ID Number:					
3.	Did vou file a New York	City Partnership Return for the following years:			2017:	x YES	
					-		
4.		luring the current taxable year, state date terminat howing disposition of business property.)	ed. (mm-dd-yy)				
5.		ue Service or the New York State Department of					_
		ble income reported in any tax period, or are you					X NO
	If "YES", by whom?	Internal Revenue Service	State period(s): Beg.:		End.:	MM-DD-YY	
		New York State Department of Taxation and Finance	State period(s): Beg.:	_	End.:	MM-DD-YY	
6.	If "YES" to question 5:						
		/15, has Form(s) NYC-115 (Report of Federal/State Cha					X NO
		on or after 1/1/15, has an amended return(s) been filed?					
7.		eciation deduction by the application of the federal Acce					
8.		n a "Safe Harbor Leasing" transaction during the peri-				🗆 YES	LX NO
9.	At any time during the ta interest) located in NYC	xable year, did the partnership have an interest in re- or in an entity owning such real property?	al property (including a lease	ehold		YES	
10.	If "YES" to 9: a) Attach a schedule of t	the property, indicating the nature of the interest and ind	oluding the street address he	rough block and late	numbor		
	,	property (including a leasehold interest) or interest in a	.		number.		
	acquired or transferr	ed with or without consideration?				🗌 YES	
		or complete liquidation of the partnership?					
	d) Was 50% or more of	the partnership ownership transferred during the tax yea	ar, over a three-year period, or	r according to a plan?	?	YES	
11.	If "YES" to 10b, 10c or 1	0d, was a Real Property Transfer Tax Return filed?				VES	🗌 NO
12.	If "NO" to 11, explain:						
13.		rent greater than \$200,000 for any premises in N					
	96th Street for the purp	ose of carrying on any trade, business, profession	, vocation or commercial a	ctivity?		VES	x NO
14.		red Commercial Rent Tax Returns filed?					x NO
	Please enter Employer	Identification Number which was used on the Corr	nmercial Rent Tax Return:_				
			ERTIFICATION				

Form NYC-204 - 2018

	I hereby certify that this return, including I authorize the Department of Finan			• •		-	e@none.com
SIGN	Signature of taxpayer:		Title:	Partner	Date:3/15		Preparer's Social Security Number of
•	Preparer's signature:	Preparer's printed name:			 Date:3/14	/2018	Firm's Employer Identification Nu
EPARER'S	Electronic Tax File:	rs, Inc. 1065 Efi	le Di	rive Anytown,NV	⁸⁹⁵⁰¹ Check i		
	Firm's name	▲ Address		▲ Zip Code	self-emplo	oyed	

MAILING INSTRUCTIONS

ALL RETURNS EXCEPT REFUND RETURNS NYC DEPARTMENT OF FINANCE UNINCORPORATED BUSINESS TAX P.O. BOX 5564 BINGHAMTON, NY 13902-5564	REMITTANCES PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/ESERVICES OR Mail Payment and Form NYC-200V ONLY to: NYC DEPARTMENT OF FINANCE P.O. BOX 3933 NEW YORK, NY 10008-3933	RETURNS CLAIMING REFUNDS NYC DEPARTMENT OF FINANCE UNINCORPORATED BUSINESS TAX P.O. BOX 5563 BINGHAMTON, NY 13902-5563
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Name (Print or Type)

See instructions.

DEPRECIATION ADJUSTMENTS FOR CERTAIN POST 9/10/01 PROPERTY

For CALENDAR YEAR <u>2018</u> or FISCAL YEAR beginning

▲ Federal Form 4562 must accompany this form.

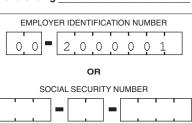
utility vehicles, not Schedule A1. See instructions.

▲ This schedule must be attached to your applicable New York City tax return.

Use Schedule A2 to report modifications to the deductions for certain sport

SAM 2018 UBTP TC ONE

and ending



SCHEDULE A1	Com	putation	of allowable New	York City depred	ciation for currer	nt year	Attach	rider if necessary
A Description of Property	B Class of Property	C Date Placed in Service: mm-dd-yy	D Cost or Other Basis	E Accumulated NYC Depreciation Taken in Prior Years	F Federal Depreciation	G Method of Figuring NYC Depreciation	H Life or Rate	Allowable New York City Depreciation
Construction	15YR	7/15	20,000	2,000	667	SL	15	1,334
New Sign	15YR	7/15	5,000	501	167	SL	15	334
Store Display	15YR	7/16	1,600	53	53	SL	15	107
Improvements	15YR	7/17	27,000		13,950	SL	15	899
	_							
1a. Total columns D, E	E, F, and	I	53,600	2,554	14,837			2,674

Enter total of columns F and I on line 4 and line 5 of Schedule C below. (See instructions on back.)

CHEDULE A2	Co	Computation of NYC deductions for current year for sport utility vehicles						Attach rider if necessary		
A Description of Property	B Class of Property	C Date Placed in Service: mm-dd-yy	D Cost or Other Basis	E Accumulated NYC Deductions Taken in Prior Years	F Federal Depreciation and Section 179 Deductions	G Method of Figuring NYC Depreciation	H Life or Rate	Total Allowable New York City Deductions		
. Total columns D, E	E, F, and	I								

Form NYC-399Z

SCHEDULE B		Dispo	osition adjustment			Attac	h rider if necessary
 For each item of property listed below, determine the difference between federal and New York City deductions used in the computation of federal and New York City taxable income in prior years. If federal deduction exceeds New York City deduction, subtract column E from column D and enter in column F. If New York City deduction exceeds federal, subtract column D from column E and enter in column G. 							
Α	В	С	D	E	F		G
Description of Property	Class of Property (ACRS)		Total Federal Depreciation Taken	Total NYC Depreciation Taken	Adjustment (D <i>minus</i> E		Adjustment (E <i>minus</i> D)

2. Total excess federal deductions over NYC deductions (see instructions)

3. Total excess NYC deductions over federal deductions (see instructions)

SCHEDULE C Computation of adjustments to New York City income

	A. Federal	B. New York City
4. Enter amount from Schedule A1, line 1a, column F4.	14,837	
5. Enter amount from Schedule A1, line 1a, column I5.		2,674
6a. Enter amount from Schedule A2, line 1b, Column F6a.	0	
6b. Enter amount from Schedule A2, line 1b, Column I6b.		0
7a. Enter amount from Schedule B, line 27a.		0
7b. Enter amount from Schedule B, line 37b.	0	
8. Totals: column A, lines 4, 6a and 7b; column B, lines 5, 6b and 7a .8.	14,837	2,674

Enter the amount on line 8, column A, as an addition and the amount on line 8, column B, as a deduction on the applicable New York City return. (See instr.)

GENERAL INFORMATION

The New York City Administrative Code, as amended pursuant to the authority granted under Part G of Chapter 93 of the Laws of 2002, limits the depreciation deduction for "qualified property," other than "qualified Resurgence Zone property," to the deduction that would have been allowed for such property under IRC §167 had the property been acquired by the taxpayer on September 10, 2001, and therefore, not been eligible for the enhanced deductions allowed by the IRC §168(k). "Qualified Resurgence Zone property" is "qualified property" used substantially in the Resurgence Zone in connection with the active conduct of a trade or business where the original use began with the taxpayer in the Resurgence Zone after September 10, 2001. The Resurgence Zone (defined in sections 11-507(22), 11-602.8(m) and 11-641(p) of the Administrative Code) generally encompasses the area in Manhattan between Canal Street and Houston Street. The Administrative Code also requires appropriate adjustments to the amount of any gain or loss included in entire net income or unincorporated business entire net income upon the disposition of any property for which the federal and New York City depreciation deductions differ.

NOTE

Deductions for "qualified Resurgence Zone property," are not affected by the above decoupling provisions other than for certain sport utility vehicles. The additional first-year expense deductions under IRC §179 also are not affected other than for certain sport utility vehicles. See below.

NOTE

Any exceptions to the decoupling provisions provided in the Administrative Code for Qualified New York Liberty Zone property or Qualified New York Liberty Zone leasehold improvements as defined in IRC §1400L have expired.

UBTP Test Case Two

Begins on the next page

Taxpayer name	DAN UBTP TC TWO
EIN	00-2000006
Primary Form	NYC-204
Associated Form(s)	NYC-114.5 NYC-114.6 NYC-114.7 NYC-399Z NYC-NOLD-UBTP
Attachments	None
Purpose of test	Allocate Outside of NYC
Other instructions	If you are not supporting one or more of the credit forms, you may complete this test case leaving the corresponding lines on Schedule A blank



Single member LLCs using SSN as their primary identifier must use Form NYC-202 UNINCORPORATED BUSINESS TAX RETURN FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

			For CALENDAR YEAR 2018 or FI	SCAL YEAR beginning		-	and ending	
	Name I	DAN 2018 UBTP TO	C TWO	Name Change	dar		ayer's EMAIL ADDRESS	
	In Care	eof Jennifer Dani	els		uai			
		ss (number and street) Route 1, Box 843		Address Change		0 0 = 2	2000006	
		nd State Bar Harbor, ME	Zip Code 0 4 6 0	Country (if not US)	BUSI	NESS CODE	NUMBER AS PER FEDERAL R	ETURN
		ss Telephone Number		ate business ended in NYC		4	4 1 2 2 2	
	Ent	ntity Type: x general par	tnership registered limite	ed liability partnership	limite	d partnership	b limited liability	company
	тнат а		bose of the amended return is to report a state change, check the appropriate box:		of Final rmination			
		Final return - ceased operations		Federal Return filed: X 106	5	1065-B		
		Engaged in a fully exempt uni		Engaged in a partially exe	•	•		
0.4			ral tax benefits (see instructions) BEGIN WITH SCHEDULE B ON PAGE 3				if applicable (see instruction	
		mputation of Tax				KANSFER AF	Payment Amount	EDULE A.
Α.	Payment Amount b	eing paid electronically wi	th this return		A .			
1.	Business income (from	n page 3, Schedule B, I	ine 31)		1.		107,271,290	
2.	Business allocation perce	entage from Schedule E,	Part 3, line 2. (if not allocatin	g, enter 100%) 2.	4	3.3	0 %	
3a.	If line 2 is less than 10	00%, enter income or lo	oss on NYC real property <i>(s</i>	ee instructions)	3a.			
3b.	Enter allocated business	income, or subtract busir	less loss, from other partnersh	ips (see instructions)	3b.			
4.	Balance (line 1 less lin	ne 3a)			4.		107,271,290)
5.	Multiply line 4 by the b	ousiness allocation perc	entage from line 2		5.		46,450,296	5
6.	Total of lines 3a and 3l	b. (see instructions)			6.			
7a.	Investment income (fro	om page 3, Schedule B	, line 30)		7a.			
7b.	Add allocated investme	ent income, or subtract in	vestment loss, from other pa	rtnerships <i>(see instr.)</i>	7b.			
8.	Investment allocation p	percentage (IAP) (from	page 4, Schedule D, line 2)) 8.			%	
9.	Multiply line 7a by the	IAP from line 8. Add th	e amount on line 7b. <i>(see i</i>	nstructions)	9.		C)
10.	Total before NOL dedu	uction (See instructions))		10.		46,450,296	
11.	Deduct NYC net operation	ting loss deduction (from	Form NYC-NOLD-UBTP, line	e 11) (see instructions).	11.		85,145	
12.	Balance before allowa	ance for active partners'	services (line 10 less line 1	1)	12.		46,365,151	
13.			12 is a loss, enter "0") (see ins	·	13.		20,000	
14.	Balance before specifi	ic exemption (line 12 les	ss line 13)		14.		46,345,151	
15.	Less: specific exemption	ion (see instructions and	d attach schedule) (if line 12	2 is a loss, enter "0")	15.		5,000	
16.	Taxable income (line 1	14 less line 15)			16.		46,340,151	
17.	Tax before business ta	ax credit (4% of amount	on line 16)		17.		1,853,606	
18.		· · · ·	credit condition from the se		18.			
19.	Total tax before Uninco	orporated Business Tax	paid credit (line 17 less line	18) (see instructions).	19.		1,853,606	
20.	Less: UBT Paid Credit	t (from Schedule A, line	3 of attached Form NYC-11	4.7) (see instructions).	20.		230,400	
21.	UNINCORPORATED BUSINE	ESS TAX (line 19 less line 2	20) (if the balance is less than	'0", enter "0") <i>(see instr.)</i> .	21.		1,623,206	

Name

SCHEDULE A Computation of Tax - Continued		
22a. Credits from Form NYC-114.5 (attach form) (see instructions) 22a. 3,000		
22b. Credits from Form NYC-114.6 (attach form) (see instructions) 22b. 2,500		
22c. Credits from Form NYC-114.8 (attach form) (see instructions) 22c.		
22d. Credits from Form NYC-114.10 (attach form) (see instructions)		
22e. Credits from Form NYC-114.12 (attach form) (see instructions) 22e.		
23. Net tax after credits (line 21 less sum of lines 22a through 22e)	23.	1,617,706
24. Payment of estimated tax, including credit from preceding year and payment with extension, NYC-EXT (see instr.)	24.	1,300,000
25. If line 23 is larger than line 24, enter balance due	25.	317,706
26. If line 23 is smaller than line 24, enter overpayment	26.	
27a. Interest (see instructions)		
27b. Additional charges (see instructions) 27b. 1,450		
27c. Penalty for underpayment of estimated tax (attach Form NYC-221) 27c.		
28. Total of lines 27a, 27b and 27c	28.	1,450
29. Net overpayment (line 26 less line 28) (see instructions)	29.	
 30. Amount of line 29 to be: (a) Refunded - Direct deposit - <i>fill out line 30c</i> OR Paper check 	30a.	
(b) Credited to 2019 estimated tax on Form NYC-5UB	30b.	
30c. Routing Account Account TYPE Number Number Checking Saving	s 🗌	
31. TOTAL REMITTANCE DUE (see instructions)	31.	319,156
32. NYC rent deducted on federal tax return or NYC rent from Schedule E, Part 1	32.	16,593,251
33. Gross receipts or sales from federal return	33.	323,455,613
34. Total assets from federal return	34.	108,367,919

Business Tax Credit Computation

- If the amount on page 1, line 17, is \$3,400 or less, your credit on line 18 is the entire amount of tax on line 17. (NO TAX WILL BE DUE)
- 2. If the amount on page 1, line 17, is \$5,400 or over, no credit is allowed. Enter "0" on line 18.
- 3. If the amount on page 1, line 17, is over \$3,400 but less than \$5,400, your credit is computed by the following formula:

tax on page 1, line 17 X $\left(\frac{\$5,400 \text{ minus tax on line 17}}{\$2,000}\right) = -----= \text{your credit}$

	Payments of Estimated Tax Computation								
PRI	EPAYMENTS CLAIMED ON SCHEDULE A, LINE 24	DATE	AMOUNT						
Α.	Payment with declaration, Form NYC-5UB (1)	1/5/2018	250,000						
В.	Payment with Notice of Estimated Tax Due (2)	3/12/2018	300,000						
C.	Payment with Notice of Estimated Tax Due (3)	6/15/2017							
D.	Payment with Notice of Estimated Tax Due (4)	9/15/2018	300000						
E.	Payment with extension, Form NYC-EXT	3/15/2018	150,000						
F.	Overpayment credited from preceding year								
G.	TOTAL of A through F. (Enter on Schedule A, line 24)		1,300,000						



Nan	ne			E	EIN			
S	CHEDULE E	Computation of Total Incom	ne					
Р	art 1 Items of inc	come, gain, loss or deduction						1
1.	Ordinary income (Ic	oss) from federal Form 1065, line 22 or	1065-B, Part I, line	e 25 <i>(see instr.)</i>	1.		80,681,403	
2.	· · ·	om all rental real estate activity not incluced on federal Schedule K					203,125	
3.	All portfolio income such included in Form 1065, li	not		92 , 650				
4.		nts to partners from federal Schedule K			,			
5.		retired partners included in other deductions from fea					22,675,031	
6.	Other income not included	in Form 1065, line 22 or 1065-B, Part I, line 25, but inc	luded on federal Sch. K	attach sch. of other inc	ome) 6.			
7.	Charitable contribut	tions from federal Schedule K	7.					
8.		Form 1065, line 22 or 1065-B, Part I, line 25 and Part II, li			nst.) 8.			
9.		expenses not included above that are re schedule) (see instructions)	•		9.			
10.	Total federal income	e (combine lines 1 through 9, do not inc	lude line 7)		10.		103,652,209	
11.		ie or gain (or add net loss) from rental, s 'C if included in line 10 above <i>(attach sc</i>			11.			
12.	Total income before	New York City modifications (combine	line 10 and line 11	I)	12.		103,652,209	
Р	art 2 New York C	ity modifications (see instructions for	Schedule B. par	<i>t 2</i>)				1
			PARTNER A	PARTNER B	PARTNER C	;	TOTAL	
	ADDITIONS	EIN OR SSN	001061001	001061002				
13.		d Unincorporated Business Taxes13.	1,400,000	962,500		13.	2,362,500	
14.	.,	lits14a		2,500		14a.	2,500	
		ed to exempt income14b	•			14b.		
		ljustments (see instr. and attach Form	79,300	118,951		14c.	198,251	
		NYC-399Z)14c es14d		110,951		14c.	100,201	
15.	· ·	ach schedules) (see instructions)15.	445,341	000 602		15.	1,336,024	
16.		l lines 13 through 15)16.	1,924641	890,683 1,974,634		16.	3,899,275	
	SUBTRACTION	- ·	PARTNER A	PARTNER B	PARTNER C		TOTAL	1
47			TANINENA	FARMEND	PARIMENC	,	TOTAL	
17.		Unincorporated Business Tax 1 part 1)17.				17.		
18.	,	s subject to federal jobs credit				17.		
10.	0					18.		
19.	,	ment (see instr. and attach Form						
		- <i>399Z</i>) 19 .	64,684	97,026		19.	161,710	
20.	Exempt income (inc	cluded in part 1, line 10) (see instr.)20.	38,661	77,322		20.	115 , 983	
21.	•	see instructions)21.				21.		
22.						22.		
23.		(attach schedule) (see instructions)23.		2,501		23.	2,501	
24.	lotal subtractions (a	add lines 17 through 23) 24 .	100/010	176,849		24.	280,194	
	25.	Combine lines 16 and 24 (total)					3,619,081	
	26.	Total income (combine lines 12 and 25)					107,271,290	
	27.	Less: Charitable contributions (not to exce					107,271,290	
	28. 29.	Balance (line 26 less line 27) Investment income - (complete lines a three					107,271,290	
	25.	(a) Dividends from stocks held for investment	· ·			a		
		(b) Interest from investment capital (include n						
	29.	(c) Net capital gain (loss) from sales or ex						
		(d) Income from assets included on line 3	-			d		
		(e) Add lines 29a through 29d inclusive			29	ə		
		(f) Deductions directly or indirectly attributed	table to investment	income	291	i.		
		(g) Interest on bank accounts included in income re	eported on line 29d 29)g.				
	30.	Investment income (line 29e less line 29f) (enter on page 1, Sch.	A, line 7a)			107 271 290	

31. Business income (line 28 less line 30) (enter here and transfer this amount to page 1, Sch. A, line 1.).....31.

Form NYC-20	04 - 2018		Page 4
Name			EIN
SCHED	ULE C	Partnership Information -	THIS SCHEDULE MUST BE COMPLETED FOR PARTNERSHIPS TO CLAIM ALLOWANCE FOR PARTNER'S SERVICES AND FOR PARTNERS TO CLAIM THE UBT PAID CREDIT ON THEIR UBT, GCT,BCT OR PIT RETURNS.
.			

How many partners are in this partnership? 2

Number of active partners

2

Please provide the following information: Full Name and Address, Employer Identification Number or Social Security Number, check Yes or No if individual partner is a resident of NYC, enter type of partner (C if Corporation, S if S Corporation, I if Individual, P if Partnership, LLP or LLC, O if Other), check the appropriate box if partner is a general or a limited partner.

	А	В	С	[כ	E	F		G	Н	I
Name and Zip Code (if within USA) Name and Country (if outside of USA)		Interest %	Percentage of Time Devoted	Part	ividual ner a lent of ? (✔)	Partner Type	Pari (•		Employer Identification Numbe - or - Social Security Number	Distributive Share	Percentage of Distributive Share
			to Business	YES	NO		GENERAL	LIMITED		(see instr.)	(see instr.)
(a)	Partner B1 10021	40 %	100 %		X	I	x		001061001	42,908,51	6 ₄₀ %
(b)	Partner B2 89501	60 %	100 %		x	I	x		001061002	64,362,774	60 %
(c)		%	%								%
(d)		%	%								%
(e)		%	%								%
									TOTALS:	107,271,2	100%

Α	В	С	D	E	F	G
DESCRIPTION OF INVESTMENT	No. of Shares or	Average	Liabilities	Net Average Value	Issuer's	Value Allocated
LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	Amount of Securities	Value	Attributable to Invest- ment Capital	(column C minus column D)	Allocation Percentage	to NYC (column E X column F)
ABCD Investors Corporation	500	250,000	25,000	225,000	0.00%	
3765 West Street REIT	1,000	325,000	32,500	292,500	0.00	
3765 South Street	750	337,500	33,750	303,750	0.00	
1. Totals (including items on rider)		912 , 500	91,250	821,250		
2. Investment allocation percentage (line 1G divid	led by line 1E.	Round to the n	earest hundredth of	a percent)	%	
3. Cash - (To treat cash as investment capital, you must include it on this line.)						
4. Investment capital. Total of line 1e and 3e			►	821,250		

ATTACH FEDERAL FORM 1065 OR 1065-B AND ALL ACCOMPANYING SCHEDULES INCLUDING THE INDIVIDUAL K-1s



EIN_

SCHEDULE E Locations of Places of Business Inside and Outside New York City

All taxpayers must complete Schedule E, Parts 1 and 2.

		1 1	City (see instructions; attach	-	-	
Complete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
JUMBER AND STREET 345 West 18th Stree Data New York NY	t 10033	16,593,251	Legal Services	427	66,321,015	Various
UMBER AND STREET	ZIP	-				
UMBER AND STREET						
ITY STATE	ZIP	-				
UMBER AND STREET						
STATE STATE	ZIP	-				
otal	> 16,59	3,251		427	66,321,015	

Part 2	Location for each place of bu	siness OUTSIDE New Yo	ork City (see instructions; attach	rider, if necessa	ıry)	
	Complete Address	Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
NUMBER AND STRE 631 Nor city Reno NUMBER AND STRE	th McKinley Drive	9,328,922	Legal Services	221	44,214,010	Professional
CITY	STATE	>				
CITY	STATE	,				
CITY	STATE ZIF					
Total	►	9,328,922		221	44,214,010	

Part 3 Single Receipts Factor Business Allocation Percentage

Taxpayers who do not allocate business income outside New York City must enter 100% on Schedule E, Part 3, line 2 and Schedule A, line 2. Taxpayers who are allocating business income inside and outside New York City must complete Schedule E, Part 3 and enter the percentage from line 2 on Schedule A, line 2.

	DESCRIPTION OF ITEM USED AS FACTOR	COLUMN A - NEW YOR	CITY	COLUMN B - EVERYWHEI	RE
1.	Gross sales of merchandise or charges for services during the year1.	140,056,280		323,455,613	
2.	Business Allocation Percentage (line 1, column A divided by line 1, column B rounded to the nearest hundredth of a percenter here and on Page 1, Schedule A, line 2)		2.	43.30	%



	11111110-204 - 2010						raye
laı	me				EIN		
s	CHEDULE F	NYC-NOLD-UB	ng a Net Operatin BTP. If you have a se attach Form N	a loss on Page	e 1, Line 10 wh	ich you a	re carrying
s	CHEDULE G	The following in	formation must b	e entered for t	his return to b	e complet	е
1.	Nature of business or p	rofession: Legal	Services				
2.	New York State Sales T	ax ID Number:					
3.		City Partnership Return f			YES 🗌 NO	2017:	X YES NO
4.		during the current taxable howing disposition of b		ed. (mm-dd-yy)			
5.		nue Service or the New Y					
		ole income reported in ar					
	If "YES", by whom?	Internal Revenue Service	e	State period(s): Be	eg.:	End.:	
c	If "YES" to question 5:	New York State Departm	nent of Taxation and Finance		eg.:		
6.		/15, has Form(s) NYC-115 (Report of Federal/State Cha	unge in Taxable Income) been filed?		
		on or after 1/1/15, has an am					
7.		eciation deduction by the ap					
8.		n a "Safe Harbor Leasing"					
9.	At any time during the ta	axable year, did the partner	ship have an interest in re	al property (including a	a leasehold		
	interest) located in NYC	or in an entity owning such	h real property?				Lx YES NO
10.	. If "YES" to 9:	the property, indicating the r	natura of the interact and in	luding the street addre	an baraugh block and	l lot numbor	
		property (including a lease		•		not number.	
	acquired or transferr	red with or without conside	ration?				
		or complete liquidation of th					
		the partnership ownership tr					
11.		0d, was a Real Property T					
12.	If "NO" to 11, explain:						
12		rent greater than \$200,0	00 for any promises in N	(C in the borough of	Manhattan couth of		
15.		ose of carrying on any tra		-			
14.		red Commercial Rent Tax			=		
	•	Identification Number wh					
			C	ERTIFICATION			
	I her	eby certify that this return, including any			ct and complete. Firm's En	nail Address:	
	► I aut	thorize the Department of Finance to	discuss this return with the prepare	er listed below. (see instruction	ns)YES 🔯		
		nature of taxpayer:	Title:	Partner	Date: 3/19 MM-DD-YY		Security Number or PTIN
		parer's nature:	Preparer's printed name: J	Smith	Date: 3/19		
			printed indirier		MM-DD-YY		Identification Number
		<u>Smith & Co 6</u>	66 5th Ave, NY,	<u>NY 10020</u>	Check if self-employed	<u> </u>	5,6,7,8,9

MAILING INSTRUCTIONS

Address

Attach federal form 1065 or 1065-B and all accompanying schedules including the individual K-1s

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 2018 return is on or before March 15, 2019.

For fiscal years beginning in 2018, file on or before the 15th day of the third month following the close of the fiscal year.

▲ Zip Code

ALL RETURNS EXCEPT REFUND RETURNS NYC DEPARTMENT OF FINANCE UNINCORPORATED BUSINESS TAX P.O. BOX 5564 BINGHAMTON, NY 13902-5564	REMITTANCES PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/ESERVICES OR Mail Payment and Form NYC-200V ONLY to: NYC DEPARTMENT OF FINANCE P.O. BOX 3933	RETURNS CLAIMING REFUNDS NYC DEPARTMENT OF FINANCE UNINCORPORATED BUSINESS TAX P.O. BOX 5563 BINGHAMTON, NY 13902-5563
	NEW YORK, NY 10008-3933	

PREI

Firm's name

Form NYC-204 - 2018

Department of Finance	REAP CREDIT APPL UNINCORPORATED		2018
	ATTACH TO FORM NYC-202, NYC-2	202EIN OR NYC-204	
For CALENDAR YEA	R 2018 or FISCAL YEAR beginning	2018 and ending	
Print or Type Name as shown on NYC-202, NYC-202EIN or N DAN 2018 UBTP TC T		PARTNERSHIPS, ESTATES AN ENTER EMPLOYER IDENTIFIC	
Type of Business: Check one:		0012000	0 0 6
Unincorporated Business Tax year for which claim is made: ended: MONTH		SOCIAL SECURITY N	UMBER
Principal Business Activity:			

Form NYC-114.5 must be attached to and submitted with Unincorporated Business Tax Return (Form NYC-202 or NYC-202EIN) or Partnership Tax Return (Form NYC-204) in order to claim the REAP credit.

Relocation and Employment Assistance Program (REAP) Credit

If you have carryover credits from preceding years, complete the carryover schedule below regardless of whether you will carry over credits to the current year. Enter in column B (the applied column) the amount applied to each carryover year until the total applied agrees with the amount on line 6.

Nonrefundable Credit applied against Unincorporated Business Tax

1. Current year's tax (amount from NYC-202 or NYC-202EIN, Schedule A, line 19 or NYC-204,		
Schedule A, line 21)	1,623,206	
2. Computation of current year's credit:		
(number of eligible aggregate employment shares: <u>1.25</u> X the applicable amount (see instructions)) 2.	3,000	
3. If line 2 is greater than line 1, enter the difference and skip lines 4 through 7. Transfer amount		
on line 1 to line 9 (see instructions)		
4. If line 2 is less than line 1, enter the difference. Complete carryover schedule below 4.	1,620,206	
5. Total carryover credits from prior taxable years (line 8f, column A below)		
6. Amount of carryover credit that may be carried over to the current year.		
Enter lesser of line 4 or line 5		
7. Total allowable credit for current year. Sum of the current year credit plus the applicable		
carryover from prior years. Add lines 2 and 6. Go to line 9	3,000	

REAP carryover schedule	COLUMN A	COLUMN B	COLUMN C	
You may not carry over the 5th preceding year's credit to next year.	CARRYOVER TO CURRENT YEAR (unused credit)	Applied	CARRYOVER TO NEXT YEA (column A minus column B)	١R
8a. Carryover from 5th preceding year 8a.				
8b. Carryover from 4th preceding year 8b.				
8c. Carryover from 3rd preceding year 8c.				
8d. Carryover from 2nd preceding year. 8d.				
8e. Carryover from 1st preceding year 8e.				
8f. Total				
9. Allowable nonrefundable REAP credit for	current year (amount from line 1	or line 7, whichever is less) 9.	3,000	
Refundable Credit applied against Unincorpo	orated Business Tax			
10. COMPUTATION OF REFUNDABLE CREE	ЛГ			
Number of eligible aggregate employment	shares: X \$	63,000 10.		
TOTAL of Nonrefundable and Refundable Cre	edits			
11. Line 9 plus line 10. Transfer amount to Form NYC-204, Sch. A, line 22a			3,000	
FUTTI NTO-204, SCH. A, IIIIe 228			5,000	
61011891			NYC - 114	.5 2018



CLAIM FOR CREDIT APPLIED TO Unincorporated business tax



ATTACH TO FORM NYC-202, NYC-202EIN OR NYC-204

Use this form to claim:

- A. the Real Estate Tax Escalation Credit
- B. the Employment Opportunity Relocation Costs Credit
- C. the Industrial Business Zone Credit.

USE FORM NYC-114.5 IF YOU ARE FILING A CLAIM FOR EITHER A SALES AND COM-PENSATING USE TAX CREDIT OR A RELO-CATION AND EMPLOYMENT ASSISTANCE PROGRAM (REAP) CREDIT.

Print or Type V	2018 and ending	
Name as shown on Form NYC-202, NYC-202EIN or NYC-204:	Former address v	PARTNERSHIPS, ESTATES AND TRUSTS ONLY, ENTER EMPLOYER IDENTIFICATION NUMBER
DAN 2018 UBTP TC TWO		0,0=2,0,0,0,0,0,6
Date moved into New York City: 01 01 17	123 S Main St. Newark, NJ	07101 SOCIAL SECURITY NUMBER
Inception date of lease:		
UNINCORPORATED BUSINESS TAX YEAR FOR WHICH	CLAIM IS MADE. YEAR ENDED:	
	L RETAIL TYPE OF RETURN FILED:	(✔) NYC-202 NYC-202EIN NYC-204
PRINCIPAL BUSINESS ACTIVITY:		

PART I Computation of credit

2,500	
2,500	

The modifications in PART II below must be included in the New York City Unincorporated Business Tax Return (NYC-202, NYC-202EIN or NYC-204) for the tax year covered by this claim for credit. If the Unincorporated Business Tax Return has been filed without these modifications, an amended return <u>must</u> be submitted with this claim form.

PART II Modifications increasing federal gross income

	2,500	

INSTRUCTIONS FOR PARTS I AND II

Form NYC-114.6 must be attached to and submitted with the Unincorporated Business Tax Return (Form NYC-202 or NYC-202EIN) or Partnership Tax Return (Form NYC-204) in order to claim the credits described in Schedules A, B and C.

PART I

Enter the amounts of the credits claimed in Schedules A, B and C on the appropriate lines (lines 1 and 2) of part I. The total credit amount claimed (line 3) is to be included on Form NYC-202 or NYC-202EIN, Schedule A, line 20b, or Form NYC-204, Schedule A, line 22b, whichever is applicable.

PART II

Taxpayers claiming these credits must make certain modifications in computing unincorporated business gross income. The amounts of the various credit items claimed must be *added* to the gross income if an exclusion or deduction for the credit item was taken in computing federal taxable income. (*See Administrative Code Section 11-506(b), paragraphs (6) and (7) and Section* 11-503(n)(6).)

Enter the required modifications at lines 4 and 5 of part II, and on Form NYC-202 or NYC-202EIN, Schedule B, part 2, line 10a or on Form NYC-204, Schedule B, part 2, line 14a, whichever is applicable.

SCHEDULE A Real estate tax escalation credit (Administrative Code Section 11-503(e))

The real estate tax escalation credit may be claimed only if the taxpayer's eligibility to receive the credit has been approved and certified by the Industrial and Commercial Incentive Board. **No** credit will be allowed unless a copy of the Certificate of Eligibility issued by the Industrial and Commercial Incentive Board is attached to Schedule A.

A. General information

1.	Number of industrial employment opportunities relocated to New York City 1.	Ļ	
2.	Number of commercial employment opportunities relocated to New York City		427
2			427

This should be the same as amount entered on line 6 (if not, explain on rider) - (enter on page 1, parts I

B. Computation of real estate tax escalation credit (see instructions)

1.	<i>Current rent information</i> - For the period covered by this report, enter the following amounts if payment is required under lease:	COLUMN A		COLUMN B	COLUMN C
	a. Basic rent paid or required to be paid to landlord for premises		. 1a.	16,593	
	b. Real estate tax payments attributable to premises		. 1b.	6,593,251	
	 c. Fuel adjustment expense paid to landlord (enter in columns A and B)				
	 d. Maintenance expense paid to landlord (enter in columns A and B)				
	e. Other amounts paid to landlord (enter in columns A and B) 1e.	117,500		117,500	
2.	<i>Initial rent information</i> - Compute amounts as if the specified rent items below were paid for same number of months as covered by this report <i>(see instructions)</i>	COLUMN A		COLUMN B	COLUMN C
	a. Original basic rent (see instructions) 2a.	16,593,251			
	 b. Original payments required for real estate taxes attributable to premises (see instructions)	6,593,251			
3.	Increase in basic rent (line 1a less line 2a) 3.				
4.	TOTAL column B. Add lines 1a through 1e. (enter total in columns B and C)		4.	23,304,002	23,304,002
5.	TOTAL column A. Add lines 1c through 3. (enter total in columns A and C) 5.	23,304,002			23,304,002
6.	Line 4 less line 5			6.	0
7.	Enter amount claimed as real estate tax escalation credit (paymen this report attributable to an increase or addition to the real estate				

INSTRUCTIONS FOR SCHEDULE A

A taxpayer subject to the Unincorporated Business Tax that has relocated to leased premises in New York City from a location outside New York State and has created at least 100 industrial or commercial employment opportunities in the City is allowed a credit against the Unincorporated Business Tax for the amount of any additional lease payments actually made to the taxpayer's landlord that are based solely and directly upon increased real estate taxes imposed upon the relocation premises. To the extent this credit exceeds the taxpayer's UBT liability calculated without this credit, it shall be refunded without interest. Before a taxpayer can claim the credit, the taxpayer's eligibility must be approved and certified by the Industrial and Commercial Incentive Board. The credit can be claimed annually for the length of the lease term, or for a period not to exceed ten years from the date of relocation, whichever period is shorter.

"Employment opportunity" means the creation of a full-time position (not less than 30 hours per week of gainful employment) for an industrial employee (one engaged in the manufacturing or assembling of tangible goods or the processing of raw materials) or commercial employee (one engaged in the buying, selling or otherwise providing of goods or services other than on a retail basis directly to the ultimate user or consumer) and the actual hiring of such employee for that position.

"Basic rent" means the rent provided for under a written lease for the use or occupancy of premises, excluding separately stated amounts required to be paid under the lease for such items as real estate taxes, maintenance expenses or fuel adjustments.

If more than one premises is included in the computation of the credit, attach a separate rider in the form of Schedule A for each such premises, and enter the sum of the amounts shown on such separate riders on Schedule A.

2,500

PART B, LINE 2a

Since the real estate tax escalation credit is the amount of the increased payments actually made that are solely and directly attributable to an increase or addition to the real estate taxes imposed upon the leased premises, the basic rent originally to be paid under the lease for the premises must be determined. It should be computed as an amount due for one month notwithstanding the manner in which it is expressed in the lease for the premises. The basic monthly rent as thus determined must then be multiplied by the number of months in the taxable period covered by this report so that the period covered by this report may be compared to a comparable period based upon the basic rent originally required to be paid.

PART B, LINE 2b

If, beginning with the inception of the term, the lease for the premises requires that an amount separate from the basic rent must be paid for real estate taxes attributable to the premises, you must enter on line 2b an amount to be determined by computing the amount that would be due per month, if such required payment were figured on a monthly basis and multiplying such amount by the number of months in the period covered by this report.

Page 3

SCHEDULE B Employment opportunity relocation costs credit (Administrative Code Section 11-503(f))

If the taxpayer did not both relocate from outside New York State and create a minimum of ten (10) industrial or commercial employment opportunities in New York City, **do not** complete Schedule B and make **no** entry on page 1, parts I and II, lines 2 and 5 respectively.

	Number of industrial employment opportunities	x \$500.00 x \$300.00	1.	0	
	relocated to New York City	+	2.	0	
3.	TOTAL		3.	0	
4.	Employment opportunity relocation costs incurred by the taxpayer in the reloc		er		
	from outside the State of New York into the City of New York (Section 11-503 a. Cost of moving furniture, files, papers and office equipment		4a.		
	b. Cost of moving and installing machinery and equipment				
	c. Cost of installing telephones and other communication equipment required as a result of relocation		4c.		
	d. Cost incurred in purchasing office furniture and fixtures required as a resu	It of relocation	4d.		
	e. Cost of renovating the premises to be occupied as a result of the relocatio only to the extent that it does not exceed seventy-five cents (75¢) per squ	on, allowable	4e.		
5.	TOTAL (lines 4a through 4e)				
6.	Enter line 3 or line 5, whichever is less. Enter on page 1, parts I and II, lines 2	2 and 5	6.		

INSTRUCTIONS FOR SCHEDULE B

Effective August 30, 2005, taxpayers relocating to premises within an Industrial Business Zone established pursuant to section 22-626 of the Administrative Code for which a binding contract to purchase or lease was entered into by the taxpayer after June 30, 2005 MAY NOT take the relocation credit provided on this schedule for industrial employment opportunities but are entitled to a new one time credit for tax years beginning after December 30, 2005. See Administrative Code §§11-503(f) and 11-503(n) as added by Chapter 635 of the Laws of 2005 and Schedule C below.

Taxpayers subject to the Unincorporated Business Tax are allowed a credit against the tax for certain costs incurred in relocating commercial or industrial employment opportunities to New York City from an area outside the State of New York. To the extent this credit exceeds the taxpayer's UBT liability calculated without this credit, it shall be refunded without interest. In order to be eligible for this credit, a taxpayer must relocate to the City a minimum of ten such employment opportunities. The relocation costs for which the credit may be claimed are those incurred during the tax year in connection with employment opportunities relocated to the City during the tax year.

The allowable credit is based upon "employment opportunity relocation costs" incurred by the taxpayer during its taxable year, but may not exceed a maximum of:

- a) \$300 for each commercial employment opportunity; and
- b) \$500 for each industrial employment opportunity, relocated to the City from an area outside the State.

The relocation costs credit may be taken by the taxpayer in whole or in part in the year in which the employment opportunities are relocated by such taxpayer or in either of the two years succeeding such event.

For purposes of the credit, "employment opportunity relocation costs" means:

a) the costs incurred by the taxpayer in moving furniture, files, papers and office equipment into the City from a location outside the State;

- b) the costs incurred by the taxpayer in moving and installing machinery and equipment into the City from a location outside the State;
- c) the costs of installing telephones and other communication equipment required as a result of the relocation to the City from a location outside the State;
- d) the cost incurred in the purchase of office furniture and fixtures required as a result of the relocation to the City from a location outside the State; and
- e) the cost of renovation of the premises to be occupied as a result of the relocation, provided, however, that such renovation costs shall be allowable only to the extent that they do not exceed seventyfive cents per square foot of the total area utilized by the taxpayer in the occupied premises.

OTHER DEFINITIONS

- a) "Employment opportunity" means the creation of a full-time position of gainful employment for an industrial or commercial employee and the actual hiring of such employee for the position.
- "Industrial employee" means one engaged in the manufacturing or assembling of tangible goods or the processing of raw materials.
- c) "Commercial employee" means one engaged in the buying, selling or otherwise providing of goods or services other than on a retail basis.
- d) "Retail" means the selling or otherwise disposing of tangible goods directly to the ultimate user or consumer.
- e) "Full-time position" means a position of gainful employment where the number of hours worked by the employee is not less than 30 hours during any given work week.

SCHEDULE C Industrial Business Zone Credit (Administrative Code Section 11-503(n))

1. Location(s) of business operations continuously during the 24 months immediately preceding relocation

PROPERTY LOCATION					
Street Address	City & State	Zip Code			

2. Date of relocation

3. Address of business operations in the Industrial Business Zone

	PROPERTY LOC	ATION		
	Street Address	C	ity & State	Zip Code
4.	Description of Business:			
5.	Number of employees working at least 35 hours per weekX	\$1,000 =	5	0
6.	Number of employees working at least 15 hours but less than 35 hours per week	X 1/2 =	X \$1,000 (see instr.) .6	0
7.	Total of lines 5 and 6		7.	0
8.	Relocation costs incurred by the taxpayer (see instructions):			
	a. cost of moving furniture, files, papers and office equipment			
	b. cost of moving and installing machinery and equipment		8b	
	c. cost of installing telephones and other communication equipment required as a			
	d. Cost of floor preparation		8d	
	e. Other (description and costattach rider if needed):			
	· · · ·		8e	
			8e	
9.	Total (lines 8a-8e)		9	
10.	Lesser of line 7 and 9 or \$100,000. Enter on page 1, parts I and II lines 2 and 5			

INSTRUCTIONS FOR SCHEDULE C

For taxable years beginning on or after January 1, 2006, an eligible business that first enters into a binding contract on or after July 1, 2005 to purchase or lease eligible premises to which it relocates is allowed the industrial business zone tax ("IBZ") credit, a one-time credit to be credited against its UBT liability or refunded without interest to the extent it exceeds the taxpayer's UBT liability calculated without that credit. The amount of the credit is \$1,000 per full-time employee, provided that the amount of the credit may not exceed the lesser of the actual relocation costs or \$100,000. See Ad. Code \$ 11-503(n), as added by Chapter 635 of the Laws of 2005.

For purposes of this credit, the following definitions apply:

- 1. "eligible business" means any business subject to UBT that (1) has been conducting substantial business operations and engaging primarily in industrial and manufacturing activities at one or more locations within the City or outside New York State continuously during the 24 consecutive full months immediately preceding relocation, (2) has leased the premises from which it relocates continuously during the 24 consecutive full months immediately preceding relocation, (3) first enters into a binding contract on or after July 1, 2005 to purchase or lease eligible premises to which the business will relocate, (4) will be engaged primarily in industrial and manufacturing activities at the eligible premises, and (5) does not receive benefits under the REAP or Lower Manhattan REAP Program or through a grant program administered by the Business Relocation Assistance Corporation or through the New York City Printers Relocation Fund grant.
- "eligible premises" means premises located entirely within an industrial business zone. For any eligible business, an industrial business zone credit will not be granted with respect to more than one eligible premises.
- 3. "**industrial business zone**" means an area within New York City established pursuant to section 22-626 of the Administrative Code.
- 4. **"industrial and manufacturing activities**" means activities involving the assembly of goods to create a different article, or the processing, fabrication, or packaging of goods. Industrial and manufacturing activities shall not include waste management or utility services.

SPECIFIC LINE INSTRUCTIONS:

Line 2: "relocation" means the physical relocation of furniture, fixtures, equipment, machinery and supplies directly to an eligible premises, from one or more locations of an eli-

gible business, including at least one location at which such business conducts substantial business operations and engages primarily in industrial and manufacturing activities. For purposes of determining the **"date of relocation"**, enter the earlier of (1) the date of the completion of the relocation to the eligible premises, or (2) ninety days from the commencement of the relocation to the eligible premises.

Lines 5 and 6

The amount of the credit is calculated based on the number of "full-time employees." **"Full-time employee"** means (1) one person gainfully employed in an eligible premises by an eligible business where the number of hours required to be worked by such person is not less than 35 hours per week; or (2) two persons gainfully employed in an eligible premises by an eligible business where the number of hours required to be worked by each such person is more than fifteen hours per week but less than 35 hours per week. The number of full-time employees for purpose of completing lines 5 and 6 is the average number of full-time employees, calculated on a weekly basis, employed in the eligible premises by the eligible business in the fifty-two week period immediately following the earlier of (1) the date of the completion of the relocation to eligible premises. This credit must be taken in the taxable year in which such fifty-two week period ends.

Line 5

Enter the average number of employees working not less than 35 hours per week.

Line 6

Enter the average number of employees working more than 15 hours but less than 35 hours per week. If after multiplying by 1/2, the number is not a whole number, round down to the whole number.

Line 8

"Relocation costs" means costs incurred in the relocation of the furniture, fixtures, equipment, machinery and supplies, including, but not limited to, the cost of dismantling and reassembling equipment and the cost of floor preparation necessary for the reassembly of the equipment. Relocation costs include only such costs that are incurred during the ninety-day period immediately following the commencement of the relocation to an eligible premises. Relocation costs do not include costs for structural or capital improvements or items purchased in connection with the relocation.

PRIVACY ACT NOTIFICATION - The Federal Privacy Act of 1974, as amended, requires agencies requesting Social Security Numbers to inform individuals from whom they seek this information as to whether compliance with the request is voluntary or mandatory, why the request is being made and how the information will be used. The disclosure of Social Security Numbers for taxpayers is mandatory and is required by section 11-102.1 of the Administrative Code of the City of New York. Such numbers disclosed on any report or return are requested for tax administration purposes and will be used to facilitate the processing of tax returns and to establish and maintain a uniform system for identifying taxpayers who are or may be subject to taxes administered and collected by the Department of Finance, and, as may be required by law, or when the taxpayer gives written authorization to the Department of Finance for another department, person, agency or entity to have access (limited or otherwise) to the information contained in his or her return.



3. 6th preceding year 4. 5th preceding year 5. 4th preceding year 6. 3rd preceding year 7. 2nd preceding year

61111891

UBT PAID CREDIT UNINCORPORATED BUSINESS TAXPAYERS

2018

		ATTACH T	O FORM NYC-204	1							
	For CALENDAR	RYEAR 2018 or FISCAL YEA	AR beginning		20	018 and en	ding				
	Print or Type name as shown on For	m NYC-204			▼ EN	MPLOYER	IDENTIF	ICATIC		3ER	
				0 0		2 0	0		0	0	6
	DAN 2018 UBTP T	С ТЖО								<u> </u>	
	SCHEDULE A										
1a.	Add total of amounts f with respect to which y					1a.			23	30,4	00
1b.	Enter amount from Scl	hedule D, line 9				1b.					
1c.	Total of lines 1a and 1	b				1c.			23	30,4	00
2.	Enter amount from For	rm NYC-204, Sched	ule A, line 19			2.			1,62	3,2	06
3.	UBT PAID CREDIT - E amount to Form NYC-					3.			23	30,4	0.0
-	le B must be complet	ted for each partn				-			-		
Name of partnership from whick share or guaranteed payment			EMPI			TION NUM	BER OF	DISTR		3 PART	
XYZ Partn				1 1	=	1 0	0	0	0 0) 1	_
	siness tax paid by distrib	uting partnership (from	n its Form NYC-204				<u> </u>			6,0	
	distributing partnership of	6 1 1 4								010	00
	22a through 22d) <i>(see ir</i>	•									
	d 2	,							25	6,0	0.0
	hare percentage with re									90.	
	the percentage on line 4	•	- · ·							0,4	
	C-204, Schedule A, line								1,85		
	a Form NYC-204, Sche								1,62		
•	m line 6		,							3,3	
	e 5 and line 8 here									, 0,4	
	ES C AND D IF YOU HAV	E UBT PAID CREDITS	FROM PRECEDING		HAI	YOUMA		(RY F	ORWA	ARD	10 201
	ar percentage1a.		current ye	ar percer	ntage	1b.					
	ar percentage2a.			-	-						
	ar percentage3a		-	-	-						
	ar percentage4a.		-	-	-						
			-	•	Ũ						
	rd preceding year percentage5a current year percentage5b. nd preceding year percentage6a current year percentage6b.										
			•	•	•						
	ar percentage7a		current ye	ar perce	mage	≠/D.					
SCHEDULE I APPLICABLE YEAR	D (see instruction COLUMN A Credit Available in 2018	COLUMN B	COLUMN C Credit Percentaç		(COLUMN	D		Credit Car Credit Car Column A	A Minus	ard to 20 Columr
. Current year			NA	N	A			+			
-											
. 7th preceding year	1		1								



NET OPERATING LOSS DEDUCTION COMPUTATION

2018

FOR UNINCORPORATED BUSINESS TAX FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

Attach to Form NYC-204

Print or Type V	For CALENDAR	YEAR 2018 or FI	SCAL YEAR begi	inning	2	018 and ending _			-	
Name as shown on NYC-204:						E	ľ		IUMBER	Т
DAN 2018 UBTP TC TWO							-			
	YE	AR 1	YE	AR 2	YE	EAR 3 YE		AR 4	YEAR 5	
	MM-DD-YYYY		MM-DD-YYYY		MM-DD-YYYY		MM-DD-YYYY		MM-DD-YYYY	
1a. Loss year ended	12/13/14	4	12/31/	16						
1b. Allocated NYC net operating loss incurred		125,000		75,145						
2. Amount of Line 1b previously absorbed by year ended	MM-DD-YYYY: 12/31/1	AMOUNT: 7115,000	MM-DD-YYYY:	AMOUNT:	MM-DD-YYYY:	AMOUNT:	MM-DD-YYYY:	AMOUNT:	MM-DD-YYYY:	AMOUNT:
 Add line 2 plus any additional year(s) (Attach schedules) 										
4. Subtract Line 3 from Line 1b		125,00		75,145					-	
5. Enter the amount from Page 1, Schedule A, Line 10 (See instructions)	-		-				_		-	
6. Enter the lesser of Line 4 or Line 5		10,000		75,145						
7. Compute and enter the total percentage interests in income and deductions for the loss year partners who were also partners during the current year.		100.00 %		100.00 %	-	%	_	%		%
 Is this percentage equal to or greater than 80%? If "NO," the loss deduction is absorbed and cannot be applied to the current year. 			YES 🗵		YES 🗌	NO	YES 🗌	NO	YES 🗌	
9. Compute and enter the total percentage interests in income and deductions for the current year of those partners who were partners in both the loss year and the current year.		100.00 %		100.00 %		%		%		%
10. Multiply amount on Line 6 by Loss Limitation Percentage on Line 9		10,000		75 , 145						
11. Sum of the amounts on Line 10 . Enter here and	on Form NYC	-204, Page 1	I, Schedule A	A, Line 11. Th	is is your Ne	et Operating L	oss Deductio	on.	85,2	145

NYC-NOLD-UBTP - 2018



DEPRECIATION ADJUSTMENTS FOR CERTAIN POST 9/10/01 PROPERTY

 For CALENDAR YEAR _ 2018 or FISCAL YEAR beginning _______ and ending _______

 Name (Print or Type)

 DAN 2018 UBTP TC TWO

 A Federal Form 4562 must accompany this form.

 This schedule must be attached to your applicable New York City tax return. See instructions.

 A Use Schedule A2 to report modifications to the deductions for certain sport utility vehicles, not Schedule A1. See instructions.

SCHEDULE A1	Com	putation	of allowable New	York City depre	ciation for curre	nt year	Attach	rider if necessary
A Description of Property	B Class of Property	C Date Placed in Service: mm-dd-yy	D Cost or Other Basis	E Accumulated NYC Depreciation Taken in Prior Years	F Federal Depreciation	G Method of Figuring NYC Depreciation	H Life or Rate	Allowable New York City Depreciation
Office Equip	10yr	1/1/15	5 1,832,514	305,419	183,251	S/L	12	152,710
1a. Total columns D, E	, F, and	I	1,832,514	305,419	183,251			152,710

Enter total of columns F and I on line 4 and line 5 of Schedule C below. (See instructions on back.)

SCHEDULE A2	Со	mputatio	n of NYC deductio	ons for current ye	ear for sport utilit	y vehicles	Attach ri	der if necessary
A Description of Property	B Class of Property	C Date Placed in Service: mm-dd-yy	D Cost or Other Basis	E Accumulated NYC Deductions Taken in Prior Years	Federal Depreciation and Section 179 Deductions	G Method of Figuring NYC Depreciation	H Life or Rate	Total Allowable New York City Deductions
BMW X5	3yr	1/1/10	45,000	9,000	15,000	SL	5	9,000
1b. Total columns D, E	E, F, and	I	45,000	9,000	15,000			9,000

Form NYC-399Z

SCHEDULE B		Disposition adjustment Attach rider if necessary								
 For each item of property listed below, determine the difference between federal and New York City deductions used in the computation of federal and New York City taxable income in prior years. If federal deduction exceeds New York City deduction, subtract column E from column D and enter in column F. If New York City deduction exceeds federal, subtract column D from column E and enter in column G. 										
А	В	С	D	E	F		G			
Description of Property	Class of Property (ACRS)		Total Federal Depreciation Taken	Total NYC Depreciation Taken	Adjustment (D <i>minus</i> E		Adjustment (E <i>minus</i> D)			

2. Total excess federal deductions over NYC deductions (see instructions)

3. Total excess NYC deductions over federal deductions (see instructions)

SCHEDULE C Computation of adjustments to New York City income

	A. Federal	B. New York City
4. Enter amount from Schedule A1, line 1a, column F4.	183,251	
5. Enter amount from Schedule A1, line 1a, column I5.		152,710
6a. Enter amount from Schedule A2, line 1b, Column F6a.		
6b. Enter amount from Schedule A2, line 1b, Column I6b.		
7a. Enter amount from Schedule B, line 27a.		9,000
7b. Enter amount from Schedule B, line 37b.	15,000	
8. Totals: column A, lines 4, 6a and 7b; column B, lines 5, 6b and 7a .8.	198,251	161,710

Enter the amount on line 8, column A, as an addition and the amount on line 8, column B, as a deduction on the applicable New York City return. (See instr.)

GENERAL INFORMATION

The New York City Administrative Code, as amended pursuant to the authority granted under Part G of Chapter 93 of the Laws of 2002, limits the depreciation deduction for "qualified property," other than "qualified Resurgence Zone property," to the deduction that would have been allowed for such property under IRC §167 had the property been acquired by the taxpayer on September 10, 2001, and therefore, not been eligible for the enhanced deductions allowed by the IRC §168(k). "Qualified Resurgence Zone property" is "qualified property" used substantially in the Resurgence Zone in connection with the active conduct of a trade or business where the original use began with the taxpayer in the Resurgence Zone after September 10, 2001. The Resurgence Zone (defined in sections 11-507(22), 11-602.8(m) and 11-641(p) of the Administrative Code) generally encompasses the area in Manhattan between Canal Street and Houston Street. The Administrative Code also requires appropriate adjustments to the amount of any gain or loss included in entire net income or unincorporated business entire net income upon the disposition of any property for which the federal and New York City depreciation deductions differ.

NOTE

Deductions for "qualified Resurgence Zone property," are not affected by the above decoupling provisions other than for certain sport utility vehicles. The additional first-year expense deductions under IRC §179 also are not affected other than for certain sport utility vehicles. See below.

NOTE

Any exceptions to the decoupling provisions provided in the Administrative Code for Qualified New York Liberty Zone property or Qualified New York Liberty Zone leasehold improvements as defined in IRC §1400L have expired.

UBTP Test Case Three

Begins on the next page

Taxpayer name	JENN UBTP TC THREE
EIN	00-2000002
Primary Form	NYC-204
	NYC-114.8
	NYC-114.10
Associated Form(s)	NYC-114.12
	NYC-399
	NYC-WPE
Attachments	None
Purpose of test	Allocate Outside NYC
Other instructions	If you are not supporting one or more of the credit forms, you may complete this test case leaving the corresponding lines on Schedule A blank



Single member LLCs using SSN as their primary identifier must use Form NYC-202 UNINCORPORATED BUSINESS TAX RETURN FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

		For CALENDAR YEAR 2018 or FISCAL YEAR beginning			, and ending	
		Name Name Jennings 2018 UBTP TC THREE Change 🔀			PAYER'S EMAIL ADDRESS	
		In Care of Daniel Jennings			R IDENTIFICATION NUMBER	
		Address (number and street) Address Change		0 0 =	2000002	
		City and State Zip Code Country (if not US) Bar Harbor, ME 04609	BUSI	INESS CODE	NUMBER AS PER FEDERAL RET	TURN
		Business Telephone Number Date business began in NYC 555-555-5555 Jan 1, 2012		4	4 1 2 2 2	
		Image: State of the state o	limite	ed partnershi	ip limited liability c	ompany
		Amended return If the purpose of the amended return is to report a IRS change Date	of Final			
		federal or state change, check the appropriate box: NYS change	mination			
		Final return - ceased operations	5	1065-B		
		Engaged in a fully exempt unincorporated business activity	•	•		
6(CHEDULE A	Claim any 9/11/01-related federal tax benefits (see instructions)			e, if applicable (see instructions)	
					Payment Amount	JULE A.
А.	Payment Ame	ount being paid electronically with this return	A.			
1.	Business income	(from page 3, Schedule B, line 31)	1.		5,902,444	
2.	Business allocation	n percentage from Schedule E, Part 3, line 2. (if not allocating, enter 100%) 2.	6	5.1	1 %	
3a.	If line 2 is less the	an 100%, enter income or loss on NYC real property (see instructions)	3a.			
3b.	Enter allocated bus	siness income, or subtract business loss, from other partnerships (see instructions)	3b.			
4.	Balance (line 1 le	ess line 3a)	4.		5,902,444	
5.	Multiply line 4 by	the business allocation percentage from line 2	5.		3,843,081	
6.	Total of lines 3a a	and 3b. (see instructions)	6.			
7a.	Investment incon	ne (from page 3, Schedule B, line 30)	7a.			
7b.	Add allocated inve	estment income, or subtract investment loss, from other partnerships (see instr.)	7b.			
8.	Investment alloca	ation percentage (IAP) (from page 4, Schedule D, line 2) 8.			%	
9.	Multiply line 7a b	y the IAP from line 8. Add the amount on line 7b. (see instructions)	9.		0	
10.	Total before NOL	deduction (See instructions)	10.		3,843,081	
11.	Deduct NYC net c	operating loss deduction (from Form NYC-NOLD-UBTP, line 11) (see instructions).	11.			
12.	Balance before a	llowance for active partners' services (line 10 less line 11)	12.		3,843,081	
13.		r active partners' services (if line 12 is a loss, enter "0") (see instructions)				
		partners claimed # 2	13.		20,000	
14.		pecific exemption (line 12 less line 13)	14.		3,823,081	
15.		emption (see instructions and attach schedule) (if line 12 is a loss, enter "0")	15.		5,000	
16.	Taxable income (line 14 less line 15)	16.		3,818,081	
17.	Tax before busine	ess tax credit (4% of amount on line 16)	17.		152,723	
18.		x credit (select the applicable credit condition from the sch. on page 2 and ee instructions)	18.			
19.	Total tax before U	Inincorporated Business Tax paid credit (line 17 less line 18) (see instructions).	19.		152,723	
20.	Less: UBT Paid C	Credit (from Schedule A, line 3 of attached Form NYC-114.7) (see instructions).	20.			
21.	UNINCORPORATED E	BUSINESS TAX (line 19 less line 20) (if the balance is less than "0", enter "0") (see instr.).	21.		152,723	

Name

s	CHEDULE A Computation of Tax - Continued			
22a.	Credits from Form NYC-114.5 (attach form) (see instructions) 22a.			
22b.	Credits from Form NYC-114.6 (attach form) (see instructions) 22b.			
22c.	Credits from Form NYC-114.8 (attach form) (see instructions) 22c.			
22d.	Credits from Form NYC-114.10 (attach form) <i>(see instructions)</i>			
22e.	Credits from Form NYC-114.12 (attach form) <i>(see instructions)</i>			
23.	Net tax after credits (line 21 less sum of lines 22a through 22e)	23.	88,274	
24.	Payment of estimated tax, including credit from preceding year and payment with extension, NYC-EXT (see instr.)	24.	110,000	
25.	If line 23 is larger than line 24, enter balance due	25.		
26.	If line 23 is smaller than line 24, enter overpayment	26.	21,726	
27a.	Interest (see instructions) 27a.			
27b.	Additional charges (see instructions) 27b.			
27c.	Penalty for underpayment of estimated tax (attach Form NYC-221) 27c.			
28.	Total of lines 27a, 27b and 27c	28.		
29.	Net overpayment (line 26 less line 28) (see instructions)	29.	21,726	
30.	Amount of line 29 to be: (a) Refunded - 🖾 Direct deposit - <i>fill out line 30c</i> OR 🗌 Paper check	30a.	1,726	
	(b) Credited to 2019 estimated tax on Form NYC-5UB	30b.	20,000	
30c.	Routing 0 2 1 0 0 2 1 Account Account Account Checking Account Savings Number 2 1 0 0 2 1 Checking Savings	; 🗌		
31.	TOTAL REMITTANCE DUE (see instructions)	31.	0	
32.	NYC rent deducted on federal tax return or NYC rent from Schedule E, Part 1	32.	0	
33.	Gross receipts or sales from federal return	33.	9,100,000	
34.	Total assets from federal return	34.	5,749,483	

Business Tax Credit Computation

- If the amount on page 1, line 17, is \$3,400 or less, your credit on line 18 is the entire amount of tax on line 17. (NO TAX WILL BE DUE)
- 2. If the amount on page 1, line 17, is \$5,400 or over, no credit is allowed. Enter "0" on line 18.
- 3. If the amount on page 1, line 17, is over \$3,400 but less than \$5,400, your credit is computed by the following formula:

tax on page 1, line 17 X $\left(\frac{\$5,400 \text{ minus tax on line 17}}{\$2,000}\right) = -----= \text{your credit}$

Payments of Estimated	l Tax Compu	utation
PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 24	DATE	AMOUNT
A. Payment with declaration, Form NYC-5UB (1)	3-15-18	50,000
B. Payment with Notice of Estimated Tax Due (2)	6-15-18	10,000
C. Payment with Notice of Estimated Tax Due (3)	9-15-18	50,000
D. Payment with Notice of Estimated Tax Due (4)		
E. Payment with extension, Form NYC-EXT		
F. Overpayment credited from preceding year		
G. TOTAL of A through F. (Enter on Schedule A, line 24)		110,000



Nan	ne		E	EIN			
S	CHEDULE B Computation of Total Income)					
P	art 1 Items of income, gain, loss or deduction						
1.	Ordinary income (loss) from federal Form 1065, line 22 or 10	65-B, Part I, line	25 (see instr.) .	1.	4,708,60		
2.	Net income (loss) from all rental real estate activity not includ	5-В,					
	Part I, line 25 but included on federal Schedule K						
3.	All portfolio income such as interest, dividends, royalties, annuity income and			25,000			
4	included in Form 1065, line 22 or 1065-B, Part I, line 25, but included on feder					23,000	
4. 5.	Guaranteed payments to partners from federal Schedule K (a Payments to current and retired partners included in other deductions from feder	,					
6.	Other income not included in Form 1065, line 22 or 1065-B, Part I, line 25, but include						
7.	Charitable contributions from federal Schedule K		10,000				
8.	Other deductions included in Form 1065, line 22 or 1065-B, Part I, line 25 and Part II, line		,	nst.) 8.		840,722	
9.	Other income and expenses not included above that are requ	uired to be repor	ted separately	,			
	to partners (attach schedule) (see instructions)			9.			
10.	Total federal income (combine lines 1 through 9, do not inclu	,		10.		5,574,327	
11.	Subtract net income or gain (or add net loss) from rental, sa	0		44			
40	situated outside NYC if included in line 10 above (attach sch					5,574,327	
12.	Total income before New York City modifications (combine lin		,	12.		5,574,327	
P	art 2 New York City modifications (see instructions for S						
		PARTNER A	PARTNER B	PARTNER C		TOTAL	
13.	All income taxes and Unincorporated Business Taxes 13.	160,725	160,725		13.	321,450	
14.	(a) Relocation credits14a.	<u> </u>	100,720		14a.		
	(b) Expenses related to exempt income14b.				14b.		
	(c) Depreciation adjustments (see instr. and attach Form						
	NYC-399 and/or NYC-399Z)14c.	20,833	20,834		14c.	41,667	
45	(d) Exempt Activities				14d.		
15. 16.	Other additions (<i>attach schedules</i>) (see instructions) 15 . Total additions (add lines 13 through 15) 16 .	101 550			15. 16.	363,117	
10.		181,558	181,559		10.		
	SUBTRACTIONS	PARTNER A	PARTNER B	PARTNER C	<u> </u>	TOTAL	
17.	All income tax and Unincorporated Business Tax						
40	refunds (included in part 1)17.				17.		
18.	Wages and salaries subject to federal jobs credit (see instructions)				18.		
19.					10.		
	NYC-399 and/or NYC-399Z)19.	12,500	12,500		19.	25,000	
20.	Exempt income (included in part 1, line 10) (see instr.)20.		·		20.		
21.	50% of dividends (see instructions)21.				21.		
22.	Exempt Activities				22.		
23.	Other subtractions (<i>attach schedule</i>) (<i>see instructions</i>)23.				23.		
24.	Total subtractions (add lines 17 through 23)24.	12,500	12,500		24.	25,000	
	25. Combine lines 16 and 24 (total)					338,117	
	26. Total income (combine lines 12 and 25)					5,912,444 10,000	
	27. Less: Charitable contributions (not to excee	,		5,902,444			
		 28. Balance (line 26 less line 27)					
	 29. Investment income - (complete lines a throw (a) Dividends from stocks held for investment (b) Interest from investment capital (include non (c) Net capital gain (loss) from sales or exc (d) Income from assets included on line 3 of (e) Add lines 29a through 29d inclusive (f) Deductions directly or indirectly attributate (g) Interest on bank accounts included in income report 	/ /	,	29a.			
	(b) Interest from investment capital (include non						
	(c) Net capital gain (loss) from sales or exc						
	(d) Income from assets included on line 3 of						
	(e) Add lines 29a through 29d inclusive						
	(f) Deductions directly or indirectly attributa			29f.			
	(g) Interest on bank accounts included in income repr		-				
	30. Investment income (line 29e less line 29f) (en						

31. Business income (line 28 less line 30) (enter here and transfer this amount to page 1, Sch. A, line 1.).....31. 5, 902, 444

Form NYC-204 - 2018		Page 4
Name		EIN
SCHEDULE C	Partnership Information -	THIS SCHEDULE MUST BE COMPLETED FOR PARTNERSHIPS TO CLAIM ALLOWANCE FOR PARTNER'S SERVICES AND FOR PARTNERS TO CLAIM THE UBT PAID CREDIT ON THEIR UBT, GCT,BCT OR PIT RETURNS.
A		

How many partners are in this partnership? 2

Number of active partners
 2

Please provide the following information: Full Name and Address, Employer Identification Number or Social Security Number, check Yes or No if individual partner is a resident of NYC, enter type of partner (C if Corporation, S if S Corporation, I if Individual, P if Partnership, LLP or LLC, O if Other), check the appropriate box if partner is a general or a limited partner.

A		В	С	I	D	E	F		G	Н	I	
Name and Zip Code (if within USA) Name and Country (if outside of USA)		Interest %	Percentage of Time Devoted	Partner a Resident of NYC? (✓)		Partner Type	Partner (✔)		Employer Identification Numbe - or - Social Security Number	Distributive Share	Percentage of Distributive Share	
			to Business	YES	NO		GENERAL	LIMITED		(see instr.)	(see instr.)	
(a)	Partner Al 04609	50 [%]	100 %		x	I	x		401001001	2,951,222	2 50 %	
(b)	Partner A2 04609	50 [%]	100 %		x	I	x		401001002	2,951,22	2 50 [%]	
(c)		%	%								%	
(d)		%	%								%	
(e)		%	%								%	
									TOTALS:	5,902,44	4 100%	

S	CHEDULE D Investment Capita	al and Allo	cation and	Cash Election			
	А	В	С	D	Е	F	G
	DESCRIPTION OF INVESTMENT LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	No. of Shares or Amount of Securities	Average Value	Liabilities Attributable to Invest- ment Capital	Net Average Value (column C minus column D)	Issuer's Allocation Percentage	Value Allocated to NYC (column E X column F)
						%	
1.	Totals (including items on rider)						
2.	Investment allocation percentage (line 1G divid	led by line 1E.	Round to the ne	arest hundredth of	a percent)	%	
3.	Cash - (To treat cash as investment capital, you must include it on this line.)						
4.	Investment capital. Total of line 1e and 3e			>			

ATTACH FEDERAL FORM 1065 OR 1065-B AND ALL ACCOMPANYING SCHEDULES **INCLUDING THE INDIVIDUAL K-1s**



Name

SCHEDULE E Locations of Places of Business Inside and Outside New York City

All taxpayers must complete Schedule E, Parts 1 and 2.

Com	plete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
JMBER AND STREET	-					-	
ТҮ	STATE	ZIP	-				
IMBER AND STREET							
ТҮ	STATE	ZIP	-				
JMBER AND STREET							
TY	STATE	ZIP	-				
MBER AND STREET							
Ŷ	STATE	ZIP	-				

Part 2 L	ocation for each p	ace of b	usiness O	UTSIDE New Yo	ork City (see instructions; atta	ch rider, if necessa	ry)	
Complete Address			Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties	
NUMBER AND STREET								
CITY	STAT		ΊΡ					
NUMBER AND STREET								
CITY	STAT	- 2	ΊΡ					
NUMBER AND STREET	· ·							
CITY	STAT	2	ΊΡ					
NUMBER AND STREET								
CITY	STATI	2	IP					
Total		>						

Part 3 Single Receipts Factor Business Allocation Percentage

Taxpayers who do not allocate business income outside New York City must enter 100% on Schedule E, Part 3, line 2 and Schedule A, line 2. Taxpayers who are allocating business income inside and outside New York City must complete Schedule E, Part 3 and enter the percentage from line 2 on Schedule A, line 2.

	DESCRIPTION OF ITEM USED AS FACTOR	COLUMN A - NEW YORK	CITY	COLUMN B - EVERYWHERE	
1.	Gross sales of merchandise or charges for services during the year	5,347,471		8,212,980	
2.	Business Allocation Percentage (line 1, column A divided by line 1, column B rounded to the nearest hundredth of a percent; enter here and on Page 1, Schedule A, line 2)		2.	65.11	%



EIN_

60461	891
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s	CHEDULE F	If you are taking a Net Operatir NYC-NOLD-UBTP. If you have a forward, please attach Form NY	a loss on Page 1,	Line 10 whic	h you a	re carr	ying
s	CHEDULE G	The following information must b	e entered for this	return to be o	complete	е	
1.	Nature of business or pr	ofession: <u>Boat sales, resales, ser</u>	rvice and storage				
2.	New York State Sales Ta	x ID Number: 1 2 3 4 5 6 7 8 9					
		City Partnership Return for the following years:			2017:	X YES	
4.	If business terminated d	uring the current taxable year, state date terminate nowing disposition of business property.)	ed. (mm-dd-yy)				
5.		e Service or the New York State Department of					
	or decreased any taxab	le income reported in any tax period, or are you	currently being audited ? .			. YES	X NO
	If "YES", by whom?	Internal Revenue Service	State period(s): Beg.:		_ End.:		
		New York State Department of Taxation and Finance	State period(s): Beg.:				
6.	If "YES" to question 5:			<i>"</i> "			
		15, has Form(s) NYC-115 (Report of Federal/State Cha n or after 1/1/15, has an amended return(s) been filed?.					
7.		ciation deduction by the application of the federal Acce					
γ. R	Were you a participant in	a "Safe Harbor Leasing" transaction during the period	od covered by this return?		150.)		
9.	At any time during the tax	cable year, did the partnership have an interest in rea or in an entity owning such real property?	al property (including a leas	ehold		_	
10.	If "YES" to 9: a) Attach a schedule of t	he property, indicating the nature of the interest and inc	cluding the street address, bo	rough, block and lot			
	b) Was any NYC real pr	operty (including a leasehold interest) or interest in a ad with or without consideration?	an entity owning NYC real p	roperty,			
		r complete liquidation of the partnership?					
		he partnership ownership transferred during the tax yea					
11		d, was a Real Property Transfer Tax Return filed?					
	If "NO" to 11, explain:						
12	Doop this toypour pour	rent greater than \$200,000 for any premises in N	(C in the borough of Mash	attan couth of			
ı J.		use of carrying on any trade, business, profession				YES	
14.	If "YES", were all require	ed Commercial Rent Tax Returns filed?				. YES	NO

Please enter Employer Identification Number which was used on the Commercial Rent Tax Return:

	CERTIFICAT	TON				
I hereby certify that this return, including any ac	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 Department of Finance to d	liscuss this return with the preparer listed below. (se	e instructions)YES 🛛	Jsmith@etp.com			
Signature of taxpayer:	Title: Partner	Date: 3/15				
Preparer's signature:	Preparer's printed name:	Date: 3/1/	19 Firm's Employer Identification Number			
	ep 2 W. 12th St, NY, NY	self-employ				
토 별 Firm's name	▲ Address ▲ Zip 0	Code				
	MAILING INSTRU					
Make remittance payable to the ord To receive proper credit, y The	l form 1065 or 1065-B and all accompany	ying schedules includi Payment must be mad dentification Number o urn is on or before Mar	e in U.S. dollars and drawn on a U.S. bank. n your tax return and remittance. ch 15, 2019.			

Form NYC-204 - 2018

Na	am	e	
			_

EIN





LOWER MANHATTAN RELOCATION EMPLOYMENT **ASSISTANCE PROGRAM (LMREAP) CREDIT APPLIED TO UNINCORPORATED BUSINESS TAX**

201

ATTACH TO FORM NYC-202, NYC-202EIN OR NYC-204

USE FORM NYC-114.5 IF YOU ARE FILING A CLAIM FOR A REAP CREDIT. USE FORM NYC-114.6 IF YOU ARE FILING A CLAIM FOR EITHER A REAL ESTATE TAX ESCALATION CREDIT OR AN EMPLOYMENT OPPORTUNITY RELOCATION COSTS CREDIT.

For CALENDAR YEAR 2018 or FISCAL YEAR beginning	2018 and ending
Name as shown on NYC-202, 202-EIN or NYC-204: JENN 2018 UBTP TC THREE	PARTNERSHIPS, ESTATES AND TRUSTS ONLY, ENTER EMPLOYER IDENTIFICATION NUMBER
Open Section Type of Business: COMMERCIAL INDUSTRIAL RETAIL Check one: COMMERCIAL INDUSTRIAL RETAIL	
Unincorporated Business Tax year for which claim is made: ended: MONTH: YEAR:	SOCIAL SECURITY NUMBER
Federal Business Code: 4 4 1 2 2 2	

Form NYC-114.8 must be attached to and submitted with Unincorporated Business Tax Return (Form NYC-202 or NYC-202EIN) or Partnership Tax Return (Form NYC-204) in order to claim the LMREAP credit.

Lower Manhattan Relocation and Employment Assistance Program (LMREAP) Credit

If the credit is refundable, fill in lines 1 and 11 and skip lines 2 through 10. If the credit is non-refundable, skip line 1 and fill in lines 2 through 11.

Refundable Credit applied against Unincorporated Business Tax

1. COMPUTATION OF REFUNDABLE CREDIT				
	12	V #0.000	1.260	
Number of eligible aggregate employment shares:	. 42	_ X \$3,0001.	1,200	

If you have carryover credits from preceding years, complete the carryover schedule below regardless of whether you will carry over credits to the current year. Enter in column B (the applied column) the amount applied to each carryover year until the total applied agrees with the amount on line 7. There is no non-refundable credit until the fifth taxable year after the year of the relocation.

Nonrefundable Credit applied against Unincorporated Business Tax

2. Current year's tax	2.	148,973
3. Computation of current year's credit:		
Number of eligible aggregate employment shares: <u>42</u> X \$3,000	3.	1,260
4. If line 3 is greater than line 2, enter the difference and skip lines 5 through 8. Transfer amount on line 2 to line 10	4.	
5. If line 3 is less than line 2, enter the difference. Complete carryover schedule below.	5.	147,723
6. Total carryover credits from prior taxable years (line 9f, column A below)	6.	0
7. Amount of carryover credit that may be carried over to the current year.		
Enter lesser of line 5 or line 6	7.	0
8. Total allowable credit for current year. Sum of the current year credit plus the applicable		
carryover from prior years. Add lines 3 and 7. Go to line 10.	8.	1,260

LMREAP carryover schedule You may not carry over the 5th preceding year's credit to next year.	COLUMN A CARRYOVER TO CURRENT YEAR (unused credit)	COLUMN B Applied	COLUMN C CARRYOVER TO NEXT YEAR (column A minus column B)
9a. Carryover from 5th preceding year			
9b. Carryover from 4th preceding year 9b.			
9c. Carryover from 3rd preceding year9c.			
9d. Carryover from 2nd preceding year 9d.			
9e. Carryover from 1st preceding year9e.			
9f. Total9f.			
10. Allowable nonrefundable LMREAP credit for	current year (amount from line 2 or	line 8, whichever is less) 10.	1,260
Credit			
11. Line 1 or line 10. Transfer amount to Form NYC-2	202 or NYC-202EIN, Sch. A, line 20c o	r Form NYC-204, Sch. A, line 22c; .11.	1,260
61211891			NYC - 114.8 2018



CLAIM FOR BIOTECHNOLOGY CREDIT ATTACH TO FORM NYC-202, NYC-202EIN OR NYC-204.

2018 and ending For CALENDAR YEAR 2018 or FISCAL YEAR beginning Print or Type PARTNERSHIPS, ESTATES AND TRUSTS ONLY, Name as shown on NYC-202, NYC-202EIN or NYC-204: ENTER EMPLOYER IDENTIFICATION NUMBER 0 0 2 0 0 0 0 0 2 JENN 2018 UBTP TC THREE SOCIAL SECURITY NUMBER Unincorporated Business tax year FEDERAL BUSINESS CODE 2018 December for which claim is made. Date ended: YEAR MONTH 4 4 1 2 2 2

	COMPUTATION OF CREDIT		
1.	Available Credit1.	1,250	
2	Enter your Unincorporated Business Tax from Form NYC-202 or NYC-202EIN, Schedule A,		
۷.	line 19 or Form NYC-204, Schedule A, line 21	148,973	
3.	Tax Credits claimed before Biotechnology Credit	1,250	
4.	Subtract line 3 from line 24.	147,723	
	Enter the lesser of line 1 and line 4 (not less than zero)5.	1,250	
	Amount of unused credit to be refunded or credited (line 1 less line 5)6.	0	
0.	Amount of unused credit to be refunded of credited (inte Tress line 5).		
7.	Add lines 5 and 6 and transfer the total to line 20d of Schedule A of Form NYC-202 or NYC-202EIN, or line 22d of Schedule A of Form NYC-2047.	1,250	

INSTRUCTIONS

GENERAL INFORMATION

Section 11-503(o) of the New York City Administrative Code provides a refundable biotechnology credit for tax years beginning on or after January 1, 2010 and before January 1, 2019 to certain qualified emerging technology companies for certain costs and expenses incurred.

In order to qualify for the credit, the taxpayer must:

- 1. meet the eligibility criteria as specified in the above Administrative Code section and
- 2. must have applied for the credit and received a Certificate of Tax Credit specifying the amount of credit the taxpayer is entitled to claim.

The Certificate of Tax Credit covering expenses incurred in calendar year 2018 will indicate the credit available for the tax year that includes December 31, 2018.

Example: Taxpayer A files on a fiscal year basis with a tax year beginning on April 1, 2018 and ending March 31, 2019. A Certificate of Tax Credit issued on or before February 15, 2019 will indicate the credit that may be claimed on the return covering the tax year ending March 31, 2019.

SPECIFIC LINE INSTRUCTIONS

Line 1

Enter the amount of the credit to which the taxpayer is entitled to claim as indicated on the Certificate of Tax Credit on Line 1 of this form.

Line 3

Enter the total amount of credits claimed on lines 20a, b, c and e of Form NYC-202 or NYC-202EIN, or Lines 22a, b, c and e of Form NYC-204.

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2018

CLAIM FOR BEER PRODUCTION CREDIT 2018 **NYC** - 114.12

ATTACH TO FORM NYC-204, NYC-202 OR NYC-202EIN

THIS CREDIT IS ONLY AVAILABLE TO THOSE PRODUCING BEER, NOT OTHER ALCOHOLIC BEVERAGES.

		For CALENDAR YEAR 207	18 or FISCAL YEAR beginning _		_ 2018 and ending	
		Name as shown on N	IYC-204, NYC-202 or NYC-2	02EIN:	Employer Iden	tification Number:
					0 0	2 0 0 0 0 0 2
		JENN 2018 1	UBTP TC THREE		OR	
		NYC form filed (check	appropriate box):		Social Security	
		Partnership	Sole Proprietorship	Estate or Trust	Federal Busine	ess Code:
		X NYC-204	NYC-202	NYC-202EIN	4 4 1	
SC	HEDULE A - EL	IGIBILITY				
Α.	If YES, proceed to li			he credit (not as a partner in a	partnership)?	X YES NO
в.		as a distributor under Ta				X YES NO
		ne, the EIN, and the State do not qualify for this cre		e number of the registered distrib	utor below and pro	ceed to line C.
Nar	ne of Registered Dist			EIN or SSN of Registered Dist	tributor SI	_A License Number of Registered Distributor
J	ennings Dra:	ft Beer		01-2000002		1234567
C.	For the tax year, did	you produce 60 million	gallons or less of beer in Ne	w York State? (See Eligibility ir	n the instructions)	. XYES NO
	If YES, complete So	chedules B and C. do not qualify for this cre	dit for this tox year			
		to not quality for this cre				
SC	HEDULE B - CC				K CITY IN TH	IIS TAX YEAR (See Instructions)
		A - Bee	er production facility's phy	sical address		B - Total gallons of beer
	900 10th Ave	enue, New Yor	k, NY 10154			550,000
_						
Tot	al from additional sl	heet(s)				
1.	Add column B amou	unts				
2.	Enter the lesser of li	ine 1 or 500,000				2. 500,000
3.	Subtract 500,000 fro	om line 1 (if less than ze	ro, enter zero)			3. 50,000
4.	Enter the lesser of li	ine 3 or 15,000,000				4. 50,000
5.	Credit for the first 50	00,000 gallons (multiply	line 2 by 0.12: see instruction	ns)		5. 60,000
6.	Credit for the remain	nder of the beer produce	d up to additional 15,000,00	0 gallons (multiply line 4 by .03	86)	6. 1,930
7.	Total credit for beer	produced in New York C	Sity (add lines 5 and 6)			7. 61,930
SC	HEDULE C - COM	PUTATION OF TAX (CREDIT USED, REFUND	ED OR CREDITED AS AN (OVERPAYMEN	T TO THE NEXT YEAR (See Instr.)
8.	Tax due before cred	lits				
9.	Tax credits claimed	before this credit				
						146 480
						61 000
						0
	Add lines 11 and 12	2. Enter here and on For	rm NYC-204, Schedule A, lin	e 22e, Form NYC-202, Schedu	le A, line 20e or	61,930



DEPRECIATION ADJUSTMENTS FOR CERTAIN POST 9/10/01 PROPERTY

For CALEN Name (Print JENN A Federal A This sch	DAR YEAR _ ²⁰¹⁸ or FISCAL YEAR beginning	and ending	
Name (Print	or Type)	EMPLOYER IDENTIFICATION NUMBER	
JENN	2018 UBTP TC THREE		
▲ Use Sch	Form 4562 must accompany this form. edule must be attached to your applicable New York City tax return. ructions. edule A2 to report modifications to the deductions for certain sport hicles, not Schedule A1. See instructions.	SOCIAL SECURITY NUMBER	

SCHEDULE A1	Com	putation	Attach rider if necessary					
A Description of Property	B Class of Property	C Date Placed in Service: mm-dd-yy	D Cost or Other Basis	E Accumulated NYC Depreciation Taken in Prior Years	F Federal Depreciation	G Method of Figuring NYC Depreciation	H Life or Rate	Allowable New York City Depreciation
Tools & Equip	3yr	1/15	125,000	50,000	41,677	S/L	5yr	25,000
1a. Total columns D, E	, F, and	I	125,000	50,000	41,667			25,000

Enter total of columns F and I on line 4 and line 5 of Schedule C below. (See instructions on back.)

SCHEDULE A2	Computation of NYC deductions for current year for sport utility vehicles Attach ride									
A Description of Property	в	C Date Placed	D Cost or Other Basis	E Accumulated NYC Deductions Taken in Prior Years	F Federal Depreciation and Section 179 Deductions	G Method of Figuring NYC Depreciation	H Life or Rate	Total Allowable New York City Deductions		
1b. Total columns D, E,	F, and	I								

Form NYC-399Z

SCHEDULE B		Dispo	osition adjustment			Attac	h rider if necessary	
and New York City taxa ▲ If federal deductio	 For each item of property listed below, determine the difference between federal and New York City deductions used in the computation of federal and New York City taxable income in prior years. ▲ If federal deduction exceeds New York City deduction, subtract column E from column D and enter in column F. ▲ If New York City deduction exceeds federal, subtract column D from column E and enter in column G. 							
А	В	С	D	E	F		G	
Description of Property	Class of Property (ACRS)			Total NYC Depreciation Taken	Adjustment (D <i>minus</i> E		Adjustment (E <i>minus</i> D)	

2.	Total excess feder	ral dedu	uctions o	ver NYC deductions (see in	nstructions)	

3. Total excess NYC deductions over federal deductions (see instructions)

SCHEDULE C Computation of adjustments to New York City income

	A. Federal	B. New York City
4. Enter amount from Schedule A1, line 1a, column F4.	41,667	
5. Enter amount from Schedule A1, line 1a, column I5.		25,000
6a. Enter amount from Schedule A2, line 1b, Column F6a.		
6b. Enter amount from Schedule A2, line 1b, Column I		
7a. Enter amount from Schedule B, line 27a.		
7b. Enter amount from Schedule B, line 37b.		
8. Totals: column A, lines 4, 6a and 7b; column B, lines 5, 6b and 7a.8.	41,667	25,000

Enter the amount on line 8, column A, as an addition and the amount on line 8, column B, as a deduction on the applicable New York City return. (See instr.)

GENERAL INFORMATION

The New York City Administrative Code, as amended pursuant to the authority granted under Part G of Chapter 93 of the Laws of 2002, limits the depreciation deduction for "qualified property," other than "qualified Resurgence Zone property," to the deduction that would have been allowed for such property under IRC §167 had the property been acquired by the taxpayer on September 10, 2001, and therefore, not been eligible for the enhanced deductions allowed by the IRC §168(k). "Qualified Resurgence Zone property" is "qualified property" used substantially in the Resurgence Zone in connection with the active conduct of a trade or business where the original use began with the taxpayer in the Resurgence Zone after September 10, 2001. The Resurgence Zone (defined in sections 11-507(22), 11-602.8(m) and 11-641(p) of the Administrative Code) generally encompasses the area in Manhattan between Canal Street and Houston Street. The Administrative Code also requires appropriate adjustments to the amount of any gain or loss included in entire net income or unincorporated business entire net income upon the disposition of any property for which the federal and New York City depreciation deductions differ.

NOTE

Deductions for "qualified Resurgence Zone property," are not affected by the above decoupling provisions other than for certain sport utility vehicles. The additional first-year expense deductions under IRC §179 also are not affected other than for certain sport utility vehicles. See below.

NOTE

Any exceptions to the decoupling provisions provided in the Administrative Code for Qualified New York Liberty Zone property or Qualified New York Liberty Zone leasehold improvements as defined in IRC §1400L have expired.



WORKSHEET FOR PARTIAL EXEMPTION UNINCORPORATED BUSINESS TAX

2018

ATTACH TO FORM NYC-204

For CALENDAR YEAR 2018 or FISCAL YEAR beginning ____

2018 and ending

Print or Type V														
Nar	Name as shown on NYC-204: EMPLOYER IDENTIFICATION NUMBER								R					
JENN 2018 UBTP TC THREE 0 0 0 = 2 0 0														
	JENN 2016 UB	IP IC II	AREE											
									-			1		
	A LIST EACH ASSET OF THE TAXPAYER	B AVERAGE VALUE	C AVERAGE VALUE	D AVERAGE VALUE	E AVERAGE VALUE	F AVERAGE VALUE	G AVERAGE VALUE		I AVERAGE VALUE	J AVERAGE VALUE		L AVERAGE VALUE	M AVERAGE VALUE	N - TOTAL OF COLUMNS B - M DIVIDED BY 12 OR THE
	LIST EACH ASSET OF THE TAXPATER	IN MONTH 1	IN MONTH 2	IN MONTH 3	IN MONTH 4	IN MONTH 5	IN MONTH 6	IN MONTH 7	IN MONTH 8	IN MONTH 9	IN MONTH 10	IN MONTH 11	IN MONTH 12	NUMBER OF MONTHS FOR A TAX
														YEAR OF LESS THAN 12 MONTHS
1.	real property assets not held for sale to customers or as inventory:													
	to customers of as inventory.													
2.	tangible personal property not held for sale to customers or as inven-													
	tory:													
3.	stocks, securities, derivative financial													
	instruments, foreign currencies, op- tions, forward and futures contracts													
	not held for sale to customers or as													
	inventory (excluding obligations held													
	as a factor, obligations acquired in the ordinary course of business for													
	funds loaned, services rendered or													
	property sold or rented and exclud-													
	ing interests in other unincorporated													
	entities):													
4.	interests in unincorporated entities													
	not engaged in an unincorporated										0 740 400			
	business in New York City:	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483	2,749,483
5.	interests in unincorporated entities													
0.	engaged in an unincorporated busi-													
	ness in New York City held by the tax-													
<u> </u>	payer as an investor:													
6.	total of column (n), lines 1 - 5:													
														2,749,483
			1	1								1		
7.	all other assets of the taxpayer:													
		1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1.000.000	1.000.000	1.000.000	1.000.000	1.000.000	1,000,000	1.000.000	1,000,000
			_,,				_,,	_,,		_,,	_,,	_,,	_,,	_,,
8.	total of column (n), lines 6 and 7:													
														3,749,483
9.	column (n), line 6 divided by line 8:													73
														/3
			-	-							-	-		

IF COLUMN (N), LINE 9 IS LESS THAN .90, YOU ARE NOT ELIGIBLE FOR THE PARTIAL EXEMPTION. IF COLUMN (N), LINE 9 IS .90 OR MORE, YOU ARE ELIGIBLE FOR THE PARTIAL EXEMPTION

UBTP Test Case Four

Begins on the next page

Taxpayer name	EAST UBTP TC FOUR
EIN	00-2000004
Primary Form	NYC-204EZ
Associated Form(s)	None
Attachments	None
Purpose of test	Generic
Other instructions	None



UNINCORPORATED BUSINESS TAX RETURN FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

201

					For CALE	NDAR YEAR 20	018 or FISC	AL YEAR begir	ning		2018, and ending	,
			Name						Name	TAXPAY	'ER'S EMAIL ADDRESS:	
			EAST 2	2018 UBT	P TC FOUR				Change 🖳	EMPL O	email@email.com	
				han Teal	2				Address			
			2313 Ja	ackson A	ve				Change X	BUSINE	SS CODE NUMBER AS PER FEDERAL RET	URN:
			City and State Portlan	d OD		Zip Code 972		Country (if r	not US)	2	1 2 3 1 0	
			Business Telephon			Nature of Busi				ENTITY	TYPE:	
			555-555 Date business beg	an in NYC (mm-dd	-уу)	Stone Date business		cies (C, if applicable	(mm-dd-yy)		general partnership limited part registered limited liability partnership	nership
			01/01/	2002 Nated During The	YEAR, ATTACH A STA	ATEMENT SHOWIN	NG THE DISPO	SITION OF BUSIN	ESS PROPERTY	🗌 I	imited liability company	
			Amended		e purpose of the ame ral or state change, cl			IRS change	Det	te of Final terminatio]
			Final return	n - ceased operatio	ns					nincorpora	ated business activity	
			5		deral tax benefits (s	ee instructions))		•		ndition code, if applicable. (see instructions)
Т	his form					,					s, who are required to file an Uning	·
q is	uired to f not requ ou may n You ha For a c You all You cla You cla You cla You cla You cla	ile an Unincorpora uired to file but wish not use this form if: ave NYC modification complete list of modi locate total business	ted Business Ta hes to disclaim a ns other than the fications, see inst income within ar porated Business Ti ion for investmen ncome or loss (Se or a net operating ess gross income	x return if its u any liability for addback of inco ructions for For id without NYC. ax Paid (see Forr t activities. (See ee instructions f loss. (See Forr less the allowa	nincorporated b tax because it i ome and Unincorp m NYC-204. (If you allocate - n NYC-114.7) or ott e instructions to F or NYC-204, Sche n NYC-204, Sche nce for active part	business gros is engaged s porated Busin 100% of your her credits (see form NYC-204 edule B, Lines dule A, line 11 thers' services	ss income colely in ac business i Forms NY(4 "Who is S s 29 (a-f)). 1.) s is more th	is more than stivities exem on Schedule I ncome to NYC C-114.5, NYC-1 Subject to the nan \$90,000. (\$95,000. T pt from the f 3, line 13 of F C, you may us 14.6, NYC-114 Fax".)	This form tax. Form NY Se this fo .8, NYC-	rm.) 114.10 or NYC-114.12).	
1.	Amo	unt from Analysis	s of Net Incorr	ne (Loss) from	n federal Forn	n 1065, Scl	hedule K	, line 1		1.	130,000	
2.		r income and ex rately to partners								2.	5,000	
3.		me taxes and Un ch list and see in								3.	20,000	
4.	Total	l Income (add li	nes 1 throug	h 3)						4.	155,000	
5.	Amou	unt included in lir	ne 4 represent	ting net incor	ne or loss fron	n activities	exempt f	rom the tax	(see instr.)) 5.	100,000	
6.	Subt	ract any net inco	me on line 5 f	rom, or add	any net loss o	n line 5 to,	line 4 an	nount	<u> </u>	6.	55,000	
7.	Allow	vance for active p	partners' servi	ces (see inst	ructions) Num	nber of activ	ve partne	ers: #	1	7.	11,000	
8.	Line	6 minus line 7								8.	44,000	
9.	Enter	r the number of r	nonths in bus	iness in NYC	during the ta	x year				9.	12	
10	. Enter	r the maximum to	otal allowed in	come from t	able on page 2	2 based on	the num	ber of mon	ths			
		ne 9. If the amo									90,000	00
		not use this form	-							10.	50,000	00
11.		r payment of esti ous year and pay								11.	10,000	
12	. Amo	unt of line 11 to b	be refunded -	Direct de	posit - <i>fill out li</i>	ne 12a O	R 🗌 I	Paper check		12.	9,000	
12	a. Routin Numb)21	Account 1	2345698		С	ACCOUN hecking 🔀	Savings			
13		unt of line 11 to b				n NYC-5UF		-	•	13.	1,000	
14		rent deducted o										
Z O	I hereby o	certify that this return	, including any acc	ompanying ride	, is, to the best of I	my knowledge	and belief,			Firm's	Email Address:	
CAT	IERE:	Signature of partne	er:			Title Pa	artne	r	Date 3/4	/19	Preparer's Social Security Number of	
EIG	REPARER'S	Preparer's			Preparer's				Data 3/	2/19	P 0 0 - 0 0 - 0 0	0 4
F		signature:		1005	printed name			10111	Check the b	iox 🗌	Firm's Employer Identification Nu	Imber
CE		Electronic	Tax Prep	<u>1065</u> I ▲ Address	S-File Dr		ce, NY Zip Code	10111	if self-emplo	yed:		9 8
609	11891		ST ATTACH A		EDERAL FORI				/IDUAL K-1	ls, TO	THIS RETURN AND NYC-20	4EZ - 2018

COMPLETE THE ADDITIONAL INFORMATION SECTION ON PAGE 2. SEE PAGE2 FOR MAILING INSTRUCTIONS.

INSTRUCTIONS

Check the box marked "9/11/01-related tax benefits" on this form if you claim any of the following benefits on your federal return: (i) bonus depreciation or a deduction under IRC §179 for property in the Resurgence Zone, whether or not you file form NYC-399Z, (ii) IRC §1033 treatment for property converted due to the attacks on the World Trade Center. Attach Federal forms 4562, 4684 and 4797 to this return. See instructions for Form NYC 204, Sch. B, lines 14c and 19.

Special Condition Codes - At the time this form is being published, there are no special condition codes for tax year 2018. Check the Finance website for updated special condition codes. If applicable, enter the two character code in the box provided on the form.

TABLE OF MAXIMUM ALLOWED INCOME FROM BUSINESS

If total income from business after deduction for active partners' services is more than \$90,000, you must use Form NYC-204

FIFTEEN OR MORE CALENDAR DAYS CONSTITUTES ONE MONTH

- Line 2. Enter the net amount of the partners' distributive shares of income and deduction items not included in line 1 but required to be reported separately on federal Form 1065. Attach a schedule.
- Line 3. Enter the amount of income and unincorporated business taxes
- imposed by New York City, New York State or any other taxing jurisdiction that was deducted in computing the amounts on lines 1 or 2. Attach a schedule.
- Line 5. Enter on this line the amount included in line 4 that represents the net income or net loss from an activity that is not an unincorporated business carried on by the taxpayer wholly or partly in the City. See Instructions for Form NYC-204 "Who is Subject to the Tax." For this purpose:
 - (i) exclude the income or loss of an entity, other than a dealer as defined in Ad. Code §11-501(1), that, for its own account, engaged solely in the purchase, holding or sale of property, transactions in positions in property, or the acquisition, holding or disposition, other than in the ordinary course of business, of interests in other unincorporated entities that are themselves engaged solely in the foregoing activities. NOTE: entities receiving \$25,000 or less of gross receipts from other activities may still be eligible for this exclusion. Ad. Code §11-502(c)(3). However, entities eligible for the partial self-trading exemption under Ad. Code §11-502(c)(4) are not eligible for this exclusion and may not use this form.
 - (ii) for taxable years beginning on or after July 1, 1994, exclude the income, gain or loss from real property held to produce rental income or from the disposition of such property by an entity, other than a dealer. Also exclude income or loss from a business conducted at the property solely for the benefit of tenants at the property that is not open to the public, and eligible income from parking services rendered to tenants. See Ad. Code §11-502(d).
 - (iii) exclude the income or loss from any separate and distinct activity carried on wholly outside of New York City.
 - (iv) for tax years beginning on or after August 1, 2002, exclude all of the federal taxable income of partnerships that receive 80% or more of their gross receipts from charges for the provision of mobile telecommunications services to customers and exclude a partner's distributive share of income, gains, losses and deductions from any partnership subject to tax under Ad. Code Title II, Ch. II as a "utility" as defined in Ad. Code section 11-1101(6), including its share of separately reported items.
- Line 7. A deduction may be claimed for reasonable compensation for personal services rendered by the partners. The allowable deduction is the lower of (i) 20% of line 6 (if greater than zero) or (ii) \$10,000 for each active partner.

Preparer Authorization: If you want to allow the Department of Finance to discuss your return with the paid preparer who signed it, you must check the "yes" box in the signature area of the return. This authorization applies only to the individual whose signature appears in the "Preparer's Use Only" section of your return. It does not apply to the firm, if any, shown in that section. By checking the "Yes" box, you are authorizing the Department of Finance to call the preparer to answer any questions that may arise during the processing of your return. Also, you are authorizing the preparer to:

- Give the Department any information missing from your return,
- Call the Department for information about the processing of your return or the status of your refund or payment(s), and
- Respond to certain notices that you have shared with the preparer about math errors, offsets, and return preparation. The notices will not be sent to the preparer.

You are not authorizing the preparer to receive any refund check, bind you to anything (including any additional tax liability), or otherwise represent you before the Department. The authorization cannot be revoked, however, the authorization will automatically expire no later than the due date (without regard to any extensions) for filing next year's return. Failure to check the box will be deemed a denial of authority.

ADDITIONAL REQUIRED INFORMATION The following information must be entered for this return to be complete.

1.	New York State Sales Tax ID Number:	
2.	Did you file a NYC Partnership Return in 2016? 🖾 YES	□ NO
3.	Did you file a NYC Partnership Return in 2017? 🖾 YES	🗆 NO
4.	Has the Internal Revenue Service or the New York State Department of Taxation and Finance increased	
	or decreased any taxable income (loss) reported in any tax period, or are you currently being audited?	🖾 NO
	If "yes," by whom? Internal Revenue Service I New York State Department of Taxation and Finance I	
-	State periods: and answer (5).	
5.	Has Form(s) NYC-115 (Tax Report of Change in Taxable Income Made by IRS or New York State) been filed? YES	X NO
6.	At any time during the taxable year, did the partnership have an interest in real property	
	located in NYC or in an entity owning such real property?	🖾 NO
7.	If "YES" to 6:	
	a) Was there a partial or complete liquidation of the partnership? \Box YES	🖾 NO
	b) Was 50% or more of the partnership interests transferred in the last 3 years or according to a plan? YES	🛛 NO
8.	If "YES" to 7a or 7b, was a Real Property Transfer Tax Return filed?	□ NO
9.	If "NO" to 8, explain: (attach additional sheet if necessary)	
10.	Does this taxpayer pay rent greater than \$200,000 for any premises in NYC in the borough of Manhattan south	
	of 96th Street for the purpose of carrying on any trade, business, profession, vocation or commercial activity? 🗆 YES	⊠NO
11.	If "YES", were all required Commercial Rent Tax Returns filed? If YES	
	Please enter Employer Identification Number which was used on the Commercial Rent Tax Return	
_	PRIVACY ACT NOTIFICATION	
The	Federal Privacy Act of 1974, as amended, requires agencies requesting Social Security Numbers to inform individuals from whom they	seek this infor

The Federal Privacy Act of 1974, as amended, requires agencies requesting Social Security Numbers to inform individuals from whom they seek this information as to whether compliance with the request is voluntary or mandatory, why the request is being made and how the information will be used. The disclosure of Social Security Numbers for taxpayers is mandatory and is required by section 11-102.1 of the Administrative Code of the City of New York for tax administration purposes and will be used to facilitate the processing of tax returns.

MAILING	i INSTRUCTIONS	
The due date for calendar year 2018 is on or before March 15, 2019.	RETURNS CLAIMING REFUNDS	ALL OTHER RETURNS
For fiscal years beginning in 2018 file by the 15th day of the third month following the close of the fiscal year.	NYC DEPT. OF FINANCE	NYC DEPT. OF FINANCE
To receive proper credit, you must enter your correct Employer	UNINCORPORATED BUSINESS TAX P.O. BOX 5563	UNINCORPORATED BUSINESS TAX P.O. BOX 5564
Identification Number on your tax return.	BINGHAMTON, NY 13902-5563	BINGHAMTON, NY 13902-5564



60921891

Download forms and instructions online at nyc.gov/finance or call 311. If calling from outside of the five NYC boroughs, please call 212-NEW-YORK (212-639-9675).

UBTP Test Case Five

Begins on the next page

Taxpayer name	SHOE UBTP TC FIVE
EIN	00-2000005
Primary Form	NYC-EXT
Associated Form(s)	None
Attachments	None
Purpose of test	Generic
Other instructions	None

NSION OF	TIME 1	'O FILI	
NESS INCO	OME TA	X RET	URNS
e ceased operations.			
	1/1		nding $12/31$, 2018
ration)	Name	EMPLOY	ER IDENTIFICATION NUMBER
			200005
st Name	Name Change		OR CIAL SECURITY NUMBER PORATED BUSINESS-INDIVIDUALS ONLY)
	Address		
	Change		
p Code Cou	untry (if not US)	╡║└──┸──┸	
54101		BUSINESS CO	DE NUMBER AS PER FEDERAL RETURN
il Address		η. Γ.	3 1 1 5 0 0
hoebill@any	mail.com		
	Uninco	rporated E	Business Tax (UBT)
nking ibchapter S orporations only	☐ Partnersh	ip	Individuals Single-Member LLCs, Estates or Trusts
YC-1 YC-1A			NYC-202 NYC-202S NYC-202EIN
, ,	•		
		Payn	nent Amount
Finance	A.		100,000
	1.		475,000
ne 1 na laava blank)	0		
	····· ∠		
	2		475,000
	NSION OF ne ceased operations. or Fiscal Year beginning ration) st Name p Code 5 4 1 0 1 IAddress h 0 e b i 1 1 @ a n y unking ubchapter S proporations only YC-1 YC-1A tion and is the condule, listing the name is application. at you will be filing the name is application. finance no e 1	NSION OF TIME T NESS INCOME TA: e ceased operations. or Fiscal Year beginning 1/1 ration) Name Change st Name Name Change st Name Name Change st Name Address Change p Code Country (if not US) 5 4 1 0 1 Address h 0 e b i 1 1 @ an y m a i 1 . com uninco unking ubchapter S orporations only YC-1 NYC-20 YC-1A NYC-20 tion and is the common parent dule, listing the name, address nis application. at you will be filing after the exter <i>Finance</i> 1.	or Fiscal Year beginning 1 / 1 , 2018 and e ration) Name Change st Name Name 0 change 0 0 address Address hoebill@anymail.com E VC-1 NYC-204 YC-1 NYC-204 YC-1A NYC-204EZ tion and is the common parent of a group dule, listing the name, address and Emplois application. at you will be filing after the extension period t NYC.gov/finance. Payr

CERTIFICATION OF TAXPAYER OR OF AN ELECTED OFFICER OF THE CORPORATION

5. Balance due. Subtract line 4 from line 3 5.

I hereby certify that this form, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete.

	Partner	03/14/2019
Signature:	Title (if an officer):	Date:

100,000

UBTP Test Case Six

Begins on the next page

Taxpayer name	CARL UBTP TC Six
EIN	00-2000003
Primary Form	NYC-5UB
Associated Form(s)	None
Attachments	None
Purpose of test	Generic
Other instructions	None



2019

For CALENDAR YEAR 2019 or FISCAL YEAR beginning _	1/1/2018,	and ending	12/31/2018,
---	-----------	------------	-------------

►	Business name			Name	Employer Identification Number
a	CARL 2018 UBTP TC SIX			Change	
2∣	In Care of				0 0 2 0 0 0 0 3
ţ	Tony Carlton				
1	Business address (number and street)			Address	
	1678 South Hoover Blvd			Change	Business Code Number as per Federal Return
İ	City and State	Zip Code	Country (if not U	JS)	
	San Francisco, CA	94101			5 2 3 9 2 0
	Business Telephone Number	Taxpayer's Email Address			
	415-555-555	CarltonLPGany	mail com		

			Payment Amount	
A.	Payment	Amount included with form - Make payable to: NYC Department of Finance A.	40,600	
1.	Estimate of 2019	tax1.	162,400	
2.	Amount to be paid	with this declaration (Payable to: NYC DEPARTMENT OF FINANCE) 2.	40,600	

Signature of taxpayer:	Title:	Partner	Date:	03/03/2019

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

DETACH ON DOTTED LINE & MAIL UPPER PORTION. RETAIN LOWER PORTION FOR YOUR RECORDS

ESTIMATED TAX WORKSHEET KEEP THIS PORTION FOR YOUR RECORDS

1. 2.	Net income from business expected in 2019 (see instructions) Exemption (see instructions)	2.	
3.	Line 1 less line 2 (estimated taxable business income)	3.	
4. 5a.	 Tax - enter 4% of line 3 (see instructions). Business Tax Credit (✓) (Check applicable box below and enter credit amount) □ Tax on line 4 is \$3,400 or less. Your credit is the entire amount of tax on line 4. □ Tax on line 4 is \$5,400 or over. No credit is allowed. Enter "0". □ Tax on line 4 is over \$3,400 but less than \$5,400, use formula for credit amount: Tax on line 4 x (\$5,400 minus tax on line 4). 	4.	
_	\$2,000		
5b.		_	
5c.		5c.	
6.	Estimated 2019 Unincorporated Business Tax (line 4 less line 5c) Enter here, on line 7b, and on line 1 of declaration above	6.	
7a	Partnership's 2018 Unincorporated Business Tax 7a. 7b. Estimate of 2019 tax from line 6	7h	
8.	COMPUTATION OF INSTALLMENT - () Check proper box below and enter amount indicated. Fiscal year taxpayers see instruction. If this declaration is due on: April 15, 2019, enter 1/4 of line 7b Sept. 16, 2019, enter 1/2 of line 7b June 17, 2019, enter 1/3 of line 7b Jan. 15, 2020, enter amount of line 7b.	ıs.	
9.	Enter amount of overpayment on 2018 return which you elected to have applied as a credit against 2019 estimated tax		
10.	Amount to be paid with this declaration (line 8 less line 9) (Payable to: NYC DEPARTMENT OF FINANCE).		

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.

MAIL YOUR DECLARATION FORM TO
NYC DEPARTMENT OF FINANCE
UNINCORPORATED BUSINESS TAX

MAILING INSTRUCTIONS

NINCORPORATED BUSINESS TAX P. O. BOX 3923 NEW YORK, NY 10008-3923 NYC-5UB 2019