

# BUSINESS CORPORATION TAX RETURN 2024

To be filed by C Corporations ONLY - All Subchapter S Corporations must file Form NYC-1, NYC-3L, NYC-4S or NYC-4SEZ

			For CALEND	AR YEAR 2024 or FIS	CAL YEAR beginn	ing	:	2024 and	d ending	
		Name				Name Change	Employer Ide	entification	n Number	
		In care of				5				-
		Address (number and street)				Address				
		City and State		Zip Code	Country (if n	Change	Business Co	de Numb	er as per federal return:	
		,								
_	Business telephone number Taxpayer's email address:									
		State or country of organization		Date organized			2-character	special co	ondition code,	1
		Date business began in NYC	Final Check this bo		al return, date business	s ended in NYC	if applicable	(See inst	tructions):	]
CH	IECK ALL									
	AT APPLY	Special short period return	52/53-wee	ek taxable year	Pro-forma fed	eral return attach	ned	Clain	m any 9/11/01-related federal tax b	benefits
			the purpose of the amend federal or state change, check		IRS change		Date of Final Determination		]=	
		any of the following If yes, check all that apply.	Form NYC-2.1	Form NYC-2.2	F	orm NYC-2.3		Form NYC	C-2.4 Form NY	(C-2.5
S	CHEDULE	A - Computation of	Balance Due or	<b>Overpayment</b>					Payment Amount	
1	A. Paymen	t Amount being paid el	ectronically with th	is return				. <b>A.</b>	Payment Amount	
1.	Tax on busin	ess income base (from Sche	dule B. line 38)					1.		
2.		al base (from Schedule C, Pa								
3.		- (see instructions) - NYC G								
4.	Tax (enter th	e amount from line 1, 2 or 3,	whichever is largest,	)				4.		
5.	UBT Paid Cr	edit (attach Form NYC-9.7C)	)					5.		
6.								6.		
7.								7.		
8.	Real Estate	Tax Escalation, Employment	Opportunity Relocation	on and IBZ Credits (a	attach Form NYC	-9.6)		8.		
9.	LMREAP Cr	edit (see instructions and atta	ach Form NYC-9.8)					9.		
10.	Biotechnolog	y Credit (attach Form NYC-9	9.10)					10.		
11a.	Beer Produc	tion Credit (attach Form NYC	C-9.12)					11a.		
11b.	Child Care C	Credit (attach Department of I	Finance approval lette	ər)				11b.		
12.	Net tax after	credits (line 6 less sum of lir	nes 7 through 11b)					12.		
13.	Total prepay	ments (from Composition of	Prepayments Schedu	ıle, page 2, line G or	H) (See Instructio	ons)		13.		
14.	Balance due	(subtract line 13 from line 12	2)					14.		
15.	Overpaymen	t (subtract line 12 from line 1	3)					15.		
16a.	Interest (see	instructions)			16a.			_		
16b.	Additional ch	arges (see instructions)			16b.					
16c.	Penalty for u	nderpayment of estimated ta	x (attach Form NYC-	.222)	16c.					
17.	Total of lines	16a, 16b and 16c						17.		
18.	Net overpay	ment (line 15 less line 17)						18.		
19.	Amount of lir	ne 18 to be: a. Refunded -	Direct deposit - fil	l out line 19c OR	Paper check			19a. <sub>-</sub>		
		b. Credited to	2025 estimated tax					19b.		
19c.	Routing Number:		Account			Account Typ				
20.	TOTAL REM	ITTANCE DUE. (see instru	ctions)				•	20.		
21.		ducted on federal tax return	,							
22.		ırn Filed: 1120 112					Other / None			
23.	Gross receip	ts or sales from federal retur	n					23.		
24.	Total assets	from federal return						24.		
<ol> <li>18.</li> <li>19.</li> <li>19c.</li> <li>20.</li> <li>21.</li> <li>22.</li> <li>23.</li> <li>23.</li> </ol>	Total of lines Net overpays Amount of lin Routing Number: TOTAL REM NYC rent de Federal Retu Gross receip	16a, 16b and 16c         ment (line 15 less line 17)         ne 18 to be:       a. Refunded -         b. Credited to         Image: Internet of the second	Direct deposit - fil.  Direct deposit - fil.  Constructions)  Direct deposit - fil.  Account Number:  Directions)  Directions  Directions	l out line 19c OR	Paper check	Account Typ	Checking [ pe: Savings [ Other / None	18 19a 19b. 20 21.  23		

EIN:

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R	EVOCATION OF THE COMMONLY OWNED GROUP ELECTION (See Instructions)
1.	In the immediately preceding taxable year, was this corporation the designated agent of a combined group that has made the commonly owned group election?
2.	If YES, enter the beginning and ending dates of the election: Beginning Ending Ending
3.	If the term of the election expired in the immediately preceding taxable year, the designated agent of the commonly owned group can revoke the election by checking this box. Attach a schedule of corporations that were members of the commonly owned group (see instructions)

C	COMPOSITION OF PREPAYMENTS SCHEDULE						
	PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 13	DATE	AMOUNT				
A.	Mandatory First Installment paid for tax year 2024 (Do not include your mandatory first installment paid for tax year 2025)						
В.	Payment with Declaration, Form NYC-400						
C.	Payment with Notice of Estimated Tax Due						
D.	Payment with Notice of Estimated Tax Due						
E.	Payment with extension, Form NYC-EXT						
F.	Overpayment from preceding year credited to this year						
G.	TOTAL of A through F (enter on Schedule A, line 13)						
	For Amended Returns only:						
Н.	Total payments and credits applicable at time of filing of this <b>Amended</b> return <i>(see instr.)</i>						

## CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION

printed name

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete. I authorize the Dept. of Finance to discuss this return with the preparer listed below. (See instructions) ......YES Signature Firm's email Title of officer Date address Preparer's Social Security Number or PTIN ONLY Check if self-Preparer's Preparer's

employed V

Date

▲ Zip Code

PARER'		
▲ Firm's name (or yours, if self-employed)	▲ Address	

#### MAILING INSTRUCTIONS

signature

Attach copy of all pages of your federal tax return or pro forma federal tax return. The due date for the calendar year 2024 return is on or before April 15, 2025. For fiscal years beginning in 2024, file on or before the 15th day of the 4th month following the close of the fiscal year.

# ALL RETURNS EXCEPT **REFUND RETURNS**

NYC DEPARTMENT OF FINANCE BUSINESS CORPORATION 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

Firm's Employer Identification Number

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



30722491

Form NYC-2 - 2024 N/	Form	NYC-2 -	2024	NA
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sc	HEDULE B - Computation of Tax on Business Income Base		
1.	Federal taxable income (FTI) before net operating loss (NOL) and special deductions (see instructions)	). <b>1.</b>	 ļ
2.	Dividends and interest effectively connected with the conduct of a trade or business in the United States NOT included on line 1 by <b>alien corporations</b>	<b>2.</b>	
3.	Any other income not included on line 1 which is exempt by treaty from federal income tax but would otherwise be treated as effectively connected with the conduct of a trade or business in the United States by <b>alien corporation</b>		
4.	Dividends not included on line 1 by non-alien corporations	4.	
5.	Interest on federal, state, municipal and other obligations not included on line 1 by non-alien corporations.	5.	 L
6.	Income taxes paid to the US or its possessions deducted on federal return	6.	
7.	NYS Franchise Tax, including MTA taxes and other business taxes deducted on the federal return (see inst; attach rider).	7.	
8.	NYC Corporate Taxes deducted on federal return (see instructions)	8.	
9.	Adjustments relating to employment opportunity relocation cost credit and IBZ credit	9.	 
10.	Adjustments relating to real estate tax escalation credit	10.	
11.	ACRS depreciation and/or adjustments (attach Form NYC-399 and/or NYC-399Z)		
12.	Payment for use of intangibles	12.	
13.	Intentionally omitted	13.	
14.	Other additions (see instructions; attach rider)	14.	
15.	Total of lines 1 through 14	15.	
16.	Gain on sale of certain property acquired prior to 1/1/66 (see instructions)	16.	
17.	NYC and NYS tax refunds included in line 15 (see instructions)	17.	
18.	Wages and salaries subject to IRC §280C deduction disallowance (see instructions)		
19.	Depreciation and/or adjustment calculated under pre-ACRS or pre - 9/11/01 rules (attach Form NYC-399 and/or NYC-399Z; see instructions)		
20.	Other subtractions (see instructions) (attach rider)	20.	
21.	Total subtractions (add lines 16 through 20)	21.	 
22.	Net modifications to federal taxable income (subtract line 21 from line 15)	22.	
23.	Subtraction modification for qualified banks and other qualified lenders (from Form NYC-2.2, Schedule A, line 1; see instructions).		
24.	Entire net income (ENI) (subtract line 23 from line 22)	24.	
25.	Investment and other exempt income (from Form NYC-2.1, Schedule D, line 1)	25.	
26.	Entire net income less investment and other exempt income	26.	
27.	Excess interest deductions attributable to investment income, investment capital and other exempt income (from Form NYC-2.1, Schedule D, line 2)	27.	
28.	Business income (add lines 26 and 27)	28.	 L
29.	Addback of income previously reported as investment income (from Form NYC-2.1, Schedule F, Part 2, line 6; if zero or less, enter 0; see instructions)	29.	
30.	Business income after addback (add lines 28 and 29)	30.	L
31.	Intentionally Omitted	31.	
32a.	Allocated business income after addback (Multiply Line 30 by the business allocation percentage from Schedule F, Part 3)	32a.	
32b.	If the amount on line 32a is not correct, enter correct amount here and explain in rider (see instructions)	32b.	
33.	Prior net operating loss conversion subtraction (from Form NYC-2.3, Schedule C, line 4)	33.	 ļ
34.	Allocated business income less prior net operating loss conversion subtraction (see instructions)	34.	 ļ
35.	Net operating loss deduction (from Form NYC-2.4, Schedule A, line 6)	35.	 ļ
36.	Business income base (subtract line 35 from line 34)	36.	 Ĺ
37.	Tax rate (see instructions)	37.	 %
38.	Tax on business income base (multiply line 36 by line 37 and enter here and on Schedule A, line 1)	38.	

Note: If you make an entry on line 23, 25, 27, 29, 33 or 35, you must complete and file the appropriate attachment form.



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Part 1 - Computation of Total Business Capital Basis used to determine average value in column C. Check one. (Attach	detailed schedule )		
- Annually     - Semi-annually     - Quarterly	COLUMN A	COLUMN B	COLUMN C
- Monthly - Weekly - Daily	Beginning of Year	End of Year	Average Value
1. Total assets from federal return1.			
2. Real property and marketable securities included in line 12.			
3. Subtract line 2 from line 13.			
4. Real property and marketable securities at fair market value4.			
5. Adjusted total assets (add lines 3 and 4)5.			
6. Total liabilities (see instructions)6.			
7. Total capital (subtract line 6, column C, from line 5, column C)			
8. Investment capital (from Schedule D, line 4; if zero or less, enter	0)	8.	
9. Business capital (subtract line 8 from line 7)			
10. Addback of capital previously reported as investment capital (from Sch			
11. Total business capital (add lines 9 and 10) (see instructions)		11.	

F	Part 2 - Computation of Liabilities Attributable to Investment Capital and Within Business Capital	COLUMN A	COLUMN B
1.	Total liabilities (Schedule C, Part 1, line 6) (see instructions)1.		
2.	Liabilities directly attributable to investment capital (see instructions)2.		-
3.	Liabilities directly attributable to business capital		
4.	Total liabilities directly attributable (add lines 2 and 3)4.		
5.	Total liabilities indirectly attributable (subtract line 4 from line 1)5.		
6.	Average FMV of investment capital before subtraction of liabilities attributable (Form NYC-2.1, Schedule E, Part 4, Column F, line 4) (see instructions)6.		-
7.	Average FMV of adjusted total assets (Schedule C, Part 1, line 5) (see instructions)7.		
8.	Investment capital factor (divide line 6 by line 7)		%
9.	Liabilities indirectly attributable to investment capital (multiply line 5 by line 8)		-
10	Average FMV of business capital before subtraction of liabilities attributable (subtract line 6 from line 7)		_
11	. Liabilities indirectly attributable to business capital (subtract line 9 from line 5) 11.		_
12	Liabilities directly and indirectly attributable to business capital (add lines 3 and 11; if this line 12 exceeds line 10, STOP and do not go further) <i>(see instructions)</i> <b>12.</b>		-
13	Liabilities directly attributable to Insurance and Utility Capital13.		-
14	Liabilities directly attributable to General Business Capital14.		-
	. Average FMV of Insurance and Utility Capital before subtraction of liabilities attributable15.		
	. Insurance and Utility Capital factor (divide line 15 by line 10)16.		%
	Liabilities indirectly attributable to Insurance and Utility Capital (multiply line 16 by line 11)17.		-
	Liabilities attributable to Insurance and Utility Capital (add lines 13 and 17)18.		-
19	Net Insurance and Utility Capital (subtract line 18 from line 15 and add any negative value from line 22, if this line 19 has a positive value without such addition) (see instructions)19.		
20	<ul> <li>Allocated Insurance and Utility Capital (multiply line 19 by the business allocation percentage from Schedule F, Part 3)</li></ul>		
21	Liabilities attributable to General Business Capital (subtract line 2, line 9, line 13 and line 17 from line 1)		
22	. Net General Business Capital (subtract line 15 and line 21 from line 10, add any amount on Schedule C, Part 1, line 10 and add any negative value from line 19, if this line 22 has a positive value without such addition) <i>(see instructions)</i>		



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sc	HEDULE C - (Continued)	
Ра	rt 3 - Computation of tax on capital base	
1a.	Allocated General Business Capital (multiply Schedule C, Part 2, line 22 by the business allocation percentage from Schedule F, Part 3)	
1b.	At tax rate 0.15% (multiply line 1a by 0.15%)1b.	
2a.	Allocated insurance and utility capital (Schedule C, Part 2 line 20) (see instructions)2a.	
2b.	At tax rate 0.075%. Check the appropriate box: Utility Corp. Insurance Corp. (multiply line 2a by 0.075%)	
3a.	Cooperative housing corporations (see instructions)	
3b.	At tax rate 0.04% Enter Boro Block Lot	
4.	Sum of taxes on capital (Enter the sum of lines 1b, 2b and 3b here) 4.	
5.	Tax on capital base (Subtract \$10,000 from line 4; If zero or less, enter 0 here and on Schedule A, line 2)	

\_\_\_\_\_

so	CHEDULE D - Computation of Investment Capital for the Current Year (see instructions)							
	A B			С				
		Average fair mark		Liabilities attributa			Net average valu	
		value as reported	d	to column A amo	unt		(column A - columr	า B)
1.	Total capital that generates income claimed to not be apportionable to New York under the U.S. Constitution							
	(from Form NYC-2.1, Schedule E, line 1)1.					1.		
2.	Total of stocks <b>actually</b> held for more than one year (from Form NYC-2.1, Schedule E, line 2) <b>2</b> .					2.		
3.	Total of stocks <b>presumed</b> held for more than one year ( <i>from Form NYC-2.1, Schedule E, line 3</i> ) <b>3.</b>					3.		
4.	Total investment capital for the current year (add Column C and on Schedule C, Part 1, line 8; if zero or less, enter 0)					4.		

## Addback to business capital of stock presumed and claimed as investment capital in previous year

		Α	В		С	
		Average fair mark value as reporte	Liabilities attributa to column A amo		Net average valu (column A - column	
5.	Total of stocks previously presumed held for more than one year, but did <b>not</b> meet the holding period ( <i>from Form NYC-2.1, Schedule F, line 1; enter here and on Schedule C, Part 1, line 10)</i> 5.			5.		



SCHEDULE E - L	ocation of Plac	ces of Bus	siness Inside	and Outside New York	City		
All taxpayers must co	mplete Schedule	E, Parts 1 a	nd 2.				
Part 1 - List location	for each place of	f business	INSIDE New Y	ork City (see instructions; a	attach rider if nece	essary)	
Comp	lete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
IUMBER AND STREET							
CITY	STATE	ZIP	-				
IUMBER AND STREET							
ITY	STATE	ZIP	-				
IUMBER AND STREET							
ITY	STATE	ZIP	-				
Total							
Part 2 - List location	for each place o	f business	OUTSIDE New	York City (see instructions	; attach rider if ne	ecessary)	
	lete Address		Rent	Nature of Activities	No. of Employees	Wages, Salaries, Etc.	Duties
SMBER AND STREET							
ITY	STATE	ZIP					
UMBER AND STREET							
UNBER AND STREET							
ITY	STATE	ZIP					
UMBER AND STREET							
ITY	STATE	ZIP					
fotal	>						
SCHEDULE F - Co	omputation of l	Business /	Allocation Pe	rcentage			
		•		lule F, Part 1 or Sched			
Taxpayers mus	st report their	Business	Allocation F	Percentage in Schedul	• F, Part 3 for t	his return to be a	accepted
A. If this is your fir	rst Business Cor	poration Ta	x return after Ja	anuary 1, 2018 -			
1. If your NYC	•						
	than \$50,000,000,	•					
	•			ne opportunity to elect the spe		ocation method.	
•				a allocation method, complete			
•				cation method, check the box			
Onc	e the election is m	iade, you m	ust continue to u	se this method of allocation u	inless the election i	s revoked.	
	ELECTION CHEC	KBOX - by	checking this bo	x, the taxpayer elects to use	the special three-fa	ctor allocation method	
B. If this is NOT yo	our first Business	Corporati	on Tax return af	iter January 1, 2018 -			
-		-		ocation method, or have revol	ked the election on	a prior return, complet	e Part 1.
	•			ation method and choose to o			
				ctor allocation method and ch			revocation
				ed, you are ineligible to use th			
			king this box th	e taxpayer revokes its electio	n ta uca tha thraa f	actor allocation mothe	Ч
				future tax filings.			4



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If you are not allocating, enter 100%.

If you are using Part 1, divide Part 1, column A by column B.

If you are using Part 2, divide Part 2, line 4 by 100 if no factors are missing.

Form NYC-2 - 2024

4.

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1.		COLUMN A - NEW YORK CI	IY	COLUMN B	
	Receipts (from Form NYC-2.5, line 54.) Continue to Part 3 1.				
SC	HEDULE F, Part 2 - Computation of Three Factor Business	Allocation Percentage (see	instr	uctions)	
Тах	payers who are using the three factor Business Allocation Percentage sh	nould complete this Part.			
		COLUMN A - NEW YORK CI	TY	COLUMN B	- EVERYWHERE
1a.	Real estate owned 1a.			1a.	
1b.	Real estate rented - multiply by 8 (see instr.) (attach rider) 1b.			1b.	
1c.	Inventories owned1c.			1c.	
1d.	Tangible personal property owned (see instructions) 1d.			1d.	
1e.	Tangible personal property rented - multiply by 8 (see instr., attach rider) 1e.			1e.	
1f.	Total 1f.			1f.	
1g.	Percentage in New York City (divide line 1f, column A by line 1f, col	umn B)		1g.	
1h.	Multiply line 1g by 3.5			1h.	
2a.	Receipts (from Form NYC-2.5, line 54) 2a.			2a.	
2b.	Percentage in New York City (divide line 2a, column A by line 2a, co	olumn B)		2b.	
2c.	Multiply line 2b by 93			2c.	
3a.	Wages, salaries and other compensation of employees, except general executive officers <i>(see instructions)</i>				
3b.	Percentage in New York City (divide line 3a, column A by line 3a, co	olumn B)		3b.	c
3c.	Multiply line 3b by 3.5			3c.	

Add lines 1h, 2c and 3c. Continue to Part 3 .....

ten-thousandth of a percentage point. (See instructions)

If a factor is missing, divide line 4 by the total of the weights of the factors present.....

SCHEDULE F, Part 3 - Enter your business allocation percentage either from Part 1 or Part 2. Enter as a percentage and round to

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%

%

%

%

4.

Form	NYC-2 - 2024 NAME: EIN:	Page 8						
SC	HEDULE G - Additional Required Information							
1.	List all significant business activities in NYC and everywhere (see instructions; if necessary, attach list)							
2.	Enter your Secondary Business Code (see instructions)							
3.	Trade name of reporting corporation, if different from name entered on page 1							
4.	Is this corporation included in a consolidated federal return?	NO						
	If "YES", give parent's name: EIN:							
5.	Is this corporation a member of a controlled group of corporations as defined in IRC section 1563, disregarding any exclusion by reason of paragraph (b)(2) of that section?	NO						
	If "YES", give common parent corporation's name EIN:							
6.	Has the Internal Revenue Service or the New York State Department of Taxation and Finance corrected any taxable income or other tax base reported in a prior year, or are you currently under audit?							
	If "YES", Internal Revenue Service Internal Re							
	by whom?	NDDYY						
	New York State Department of Taxation and Finance State period(s): Beg.: End.:	MDDYY						
7.	If "YES" to question 6: 7a. For years prior to 1/1/15, has Form(s) NYC-3360 (Report of Federal/State Change in Tax Base) been filed?							
	7b. For years beginning on or after 1/1/15, has an amended return(s) been filed? YES	L NO						
8.	Did this corporation make any payments treated as interest in the computation of business income to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock? If "YES", please attach a schedule giving Shareholder's name, SSN/EIN, Interest paid to shareholder, Total indebtedness to shareholder and Total interest paid							
9.	Was this corporation a member of a partnership or joint venture during the tax year?							
10.	At any time during the taxable year, did the corporation have an interest in real property <i>(including a leasehold interest)</i> located in NYC or a controlling interest in an entity owning such real property?							
11a.	a. If "YES" to question 10, attach a schedule of such property, indicating the nature of the interest and including the street address, borough, block and lot number.							
11b.	. Was any NYC real property <i>(including a leasehold interest)</i> or controlling interest in an entity owning NYC real property acquired or transferred with or without consideration?							
11c.	Was there a partial or complete liquidation of the corporation?							
11d.	Was 50% or more of the corporation's ownership transferred during the tax year, over a three-year period or according to a plan? 🗌 YES							
12.	If "YES" to questions 11b, 11c or 11d, was a Real Property Transfer Tax Return (Form NYC-RPT) filed?							
13.	If "NO" to question 12, explain:							
14.	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?							
15.	If "YES" to question 14, were all required Commercial Rent Tax Returns filed?	🗌 NO						
	Please enter Employer Identification Number which was used on the Commercial Rent Tax Return:							
16.	Are you claiming an exception to the related member expense addback under Administrative Code section 11-652(8)(n)(2)(ii)? 🗌 YES	NO						
	If yes, enter applicable exception and amount of royalty payments.							
		<b>—</b>						
17.								
18.	Did this corporation carry out any commercial banking business (as defined by Section 11-640(b) of the Ad. Code) during this filing period?							
19.	Did you include a disregarded entity in this return? If YES, attach a schedule giving the legal name and EIN of each disregarded entity included YES							
20.	Are you subject to tax <b>solely</b> as a result of deriving receipts in New York City? (see instructions)							



Form	NYC-2 - 2024	NAME:	EIN: Page 9				
SC	HEDULE H - DE	ETERMINATION OF TAX RATE					
Α.	Enter the tax rate c	computed or used below (see instructions)	A.				
В.	Enter the line numb	ber of the tax rate computed or used below (see instruction	ons)B.				
Ca.	Enter your unalloca	ated business income from Schedule B, line 30 (see instru	ructions)Ca.				
Cb.	If the amount on lin	ne Ca is not correct, enter correct amount here and explain	ain in rider <i>(see instructions)</i> <b>Cb.</b>				
D.	Enter your allocated	d business income from Schedule B, line 32a or 32b if use	sed <b>D.</b>				
E.	If you are a Qualifie	ed Manufacturing Corporation as defined in Administrative (	e Code Section 11-654(1)(k)(4), mark an x in the box (see instr.)E.				
F.	If you are a Financial Corporation as defined in Administrative Code Section 11-654(1)(e)(1)(i), mark an X in the box (see instr.)F.						
ТА	X RATE COMPL	UTATION FOR BUSINESS CORPORATIONS NO	OT SPECIFIED BELOW (see instructions)				
1.		iness income <i>(Schedule B, line 30)</i> is less than \$2M and al <i>(Schedule B, line 32a or 32b if used)</i> is less than \$1M.	allocated 6.50%				
2.		iness income (Schedule B, line 30) is equal to or greater th a amount of allocated business income)	than \$3M 8.85%				
3.		ess income (Schedule B, line 32a or 32b if used) is equ M (regardless of the amount of unallocated business incom					
4.	but less than \$3M	iness income ( <i>Schedule B, line 30</i> ) is equal to or greater th <i>I</i> and allocated business income ( <i>Schedule B, line 32a o</i> \$1M, use unallocated formula					
5.	business income	iness income (Schedule B, line 30) is less than \$2M and al (Schedule B, line 32a or 32b if used) is equal to or great \$1.5M, use allocated formula					
6.	but less than \$3M used) is equal to c	iness income (Schedule B, line 30) is equal to or greater th A and allocated business income (Schedule B, line 32a o or greater than \$1M but less than \$1.5M, compute tax rate se the greater of the two computed tax rates.	or 32b if line 22a or 22b 1 000 000 %				
			Enter the greater of the two computed tax rates: %				
ТА	X RATE COMPU	UTATION FOR QUALIFIED MANUFACTURING	CORPORATIONS (see instructions)				
7.		iness income <i>(Schedule B, line 30)</i> is less than \$20M and <i>(Schedule B, line 32a or 32b if used)</i> is less than \$10M	d allocated 4.425%				
8.		iness income (Schedule B, line 30) is equal to or greater the amount of allocated business income)					
9.		ess income (Schedule B, line 32a or 32b if used) is eq Λ (regardless of the amount of unallocated business incom					
10.	but less than \$40	iness income ( <i>Schedule B, line 30</i> ) is equal to or greater th DM and allocated business income ( <i>Schedule B, line 32a</i> \$10M, use unallocated formula					
11.	business income (	iness income <i>(Schedule B, line 30)</i> is less than \$20M and <i>(Schedule B, line 32a or 32b if used)</i> is equal to or greater th M, use allocated formula					
12.	If unallocated business income ( <i>Schedule B, line 30</i> ) is equal to or greater than \$20M but less than \$40M and allocated business income ( <i>Schedule B, line 32a or 32b if used</i> ) is equal to or greater than \$10M but less than \$20M, compute tax rates using both formulas. Use the greater of the two computed tax rates		a or 22h if				
			Enter the greater of the two computed tax rates:%				
ТА	X RATE COMPL	UTATION FOR CERTAIN FINANCIAL CORPORA	RATIONS (see instructions)				
13.	Financial Corporat	tions as defined in Administrative Code Section 11-654(1)	l)(e)(1)(i) 9.00%				

