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New York State Department of Taxation and Finance

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Name and Address of Shareholder	Check box	Social Security	Stock Ownership			
	below if	Social Security Number	Number	Period Held		
Check box if <b>any</b> shareholders are nonresidents:	nonresident	Number	of Shares	From	То	
A						
В						
C						
D						

Shareholder Information, Part II — Shareholders' Shares of Income, Deductions, etc. Instead of entering shareholders' pro rata shares below, you may attach a copy of federal Schedule K-1 for each shareholder. However, you must complete the *Total* column for each applicable item below.

		Α	В	С	D	Total
8	Ordinary income (loss) from trade or business activities					
9	Net income (loss) from rental real estate					
	activities					
10	Net income (loss) from other rental activities					
11	Portfolio income (loss)					
12	Net gain (loss) under section 1231 (other than					
	due to casualty or theft)					
13	Other income (loss) (attach schedule)					
14	Total income (loss) (add lines 8 through 13)		-		-	
15	Charitable contributions					
16	Section 179 expense deduction					
17	Expenses related to portfolio income (loss)					
18	Other deductions (attach schedule)					
19	Total deductions (add lines 15 through 18)		1	1	1	
20	Federal tax preference items for minimum tax					
21	Interest expense on investment debts paid or					
	accrued in 1997					
22	Total foreign taxes (check one)  Paid  Accrued					
23	Reduction in foreign taxes					
24	Total property distributions (including cash)					
	other than dividend distributions reported on line 26					
25	Other items and amounts not included above that are					
	required to be reported separately to shareholders for					
	federal purposes (attach schedule)					
26	Total dividend distributions paid from accumulated earnings					
	and profits contained in other retained earnings					

## Shareholder Information, Part III — Shareholders' Shares of Changes from Federal Items

		Α	В	С	D	Total
Ad	ditions					
27 28	New York franchise tax imposed under Article 9-A Accelerated cost recovery system (ACRS) and modified accelerated cost recovery system (MACRS) deductions (from Form CT-399)					
29	Other additions (see instructions, attach explanation)					
Su	otractions					
30	New York depreciation (from Form CT-399)					
31	Other subtractions (see instructions, attach explanation)					
Oth	er Items (see instructions, attach explanation)					
32	Additions to federal itemized deductions					
33	Subtractions from federal itemized deductions					
34	New York adjustments to federal tax preference items					

## Shareholder Information, Part IV — Shareholders' Shares of New York S Corporation's New York Tax Credits and Taxes on Early Dispositions

		А	В	С	D	Total
35	Investment tax credit, retail enterprise tax credit, historic barns credit, and employment incentive credit (attach Form CT-46)					
36	Investment tax credit on research and development property at the optional rate (attach Form CT-46)					
37	Tax on early dispositions — investment tax credit, research and development tax credit and/or retail enterprise tax credit ( <i>attach Form CT-46 and/or CT-42</i> )					
38	EDZ wage tax credit (attach Form DTF-601)					
39	ZEA wage tax credit (attach Form DTF-601.1)					
40	EDZ investment tax credit and EDZ employment incentive credit (attach Form DTF-603)					
41	EDZ capital tax credit (attach Form DTF-602)					
42	Tax on early dispositions — EDZ investment tax credit (attach Form DTF-603)					
43	Farmers' school tax credit (attach Form CT-47) Number of acres of qualified property					
	and Amount of eligible school taxes paid					

**Certification.** Under penalties of perjury, I declare that this corporation is allowed to file on a combined basis under New York State Law and is also liable for the group tax liability, and I certify that this report and any attachments are to the best of my knowledge and belief true, correct and complete.

Sigr	ature of elected officer or authorized person	Official title		Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)		ID number	Date
Paid Pr Use	Address		Signature of individual preparing	this return

Attach this report to the payer corporation's Form CT-3-S-A.

Mail your return to: NYS CORPORATION TAX PROCESSING UNIT, PO BOX 1909, ALBANY NY 12201-1909

## **Need Help?**

**Telephone Assistance** is available from 8:30 a.m. to 4:25 p.m., Monday through Friday. **For business tax information and forms,** call the Business Tax Information Center at 1 800 972-1233. **For general information**, call toll free 1 800 225-5829. **To order forms and publications,** call toll free 1 800 462-8100. **From areas outside the U.S. and Canada,** call (518) 485-6800.

**Fax-on-Demand Forms Ordering System -** Most forms are available by fax 24 hours a day, 7 days a week. Call toll free from the U.S. and Canada 1 800 748-3676. You must use a Touch Tone phone to order by fax. A fax code is used to identify each form.

Internet Access - http://www.tax.state.ny.us Access our website for forms, publications, and information.

**Hotline for the Hearing and Speech Impaired -** If you have access to a telecommunications device for the deaf (TDD), you can get answers to your New York State tax questions by calling toll free from the U.S. and Canada 1 800 634-2110. Assistance is available from 8:30 a.m. to 4:15 p.m., Monday through Friday. If you do not own a TDD, check with independent living centers or community action programs to find out where machines are available for public use.

**Persons with Disabilities -** In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call the information numbers listed above.

**Mailing Address -** If you need to write, address your letter to: NYS Tax Department, Taxpayer Assistance Bureau, W A Harriman Campus, Albany NY 12227.

## Privacy Notification

The right of the Commissioner of Taxation and Finance and the Department of Taxation and Finance to collect and maintain personal information, including mandatory disclosure of social security numbers in the manner required by tax regulations, instructions and forms, is found in Articles 8, 9, 9-A, 13, 19, 27, 32, 33 and 33-A of the Tax Law and 42 USC 405(c)(2)(C)(i).

The Tax Department will use this information primarily to determine and administer corporate tax liabilities under the Tax Law, for certain tax refund offsets, and for any other purpose authorized by law.

Failure to provide the required information may result in civil or criminal penalties, or both, under the Tax Law.

This information will be maintained by the Director of the Registration and Data Services Bureau, NYS Tax Department, Building 8 Room 905, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the U.S. and Canada, call (518) 485-6800.