

## New York S Corporation Franchise Tax Return CT-3-S

2(	Tax Law – Articles 9-A and 22			All filers mu	st enter tax	period:		
ı	Final return (see instructions) Amended return			beginning		en	nding	
	Employer identification number (EIN)	Busin	ness telephone number		If you claim mark an <b>X</b> ir		ayment,	
1	Legal name of corporation		,	Trade name/DB/	A			
	Mailing address			State or country of	of incorporation			
	Care of (c/o) Number and street or PO Box			Data of incomess	4iam	Fausium asum	tioner data haven	husinass in NIVC
	Nulliber and Street of PO Box			Date of incorpora	uon	roreigii corp	oorations: date began	business in N13
•	City U.S. state/Canadian province ZIP/Postal co	ode	Country (if not United	States)		For office us	se only	
	NAICS business code number (from NYS Pub 910)  If you need to upda phone information f	for cor	poration tax,	New York S elec				
	NYS principal business activity	or ot See	her tax types, y <i>Business inforn</i>	ou can do s <i>nation</i> in Foi	o online. rm CT-1.			
•	Has the corporation revoked its election to be treated as a New York  Yes ● No ● If Yes, enter effective date:	S corp	ooration?	lumber of shar	reholders			
A	Pay amount shown on Part 2, line 46. Make payable to Attach your payment here. Detach all check stubs. (See	: <b>New</b>	York State Conctions for details.	rporation <b>1</b>		Α	Payment enclo	osed
C D E	If you filed a return(s) other than federal Form 1120S, enter your business apportionment factor (from Part 3, line). Did the S corporation make an IRC section 338 or 453. Did this entity have an interest in real property located in the sthere been a transfer or acquisition of a controlling	ne 56) election	on?v York State du	ring the last	three years		Yes •	No •
G	If the IRS has completed an audit of any of your returns v	within	the last five yea	rs, list years				
Н	If this return is for a New York S termination year, mark used for the New York S short year (see New York S co		tion termination ye		ions)		d of accounting pro rata alloc	_
I	Mark an $\boldsymbol{X}$ in the box if you are filing Form CT-3-S as a result	t of the	e mandatory New	York S electi	on of Tax La	w, Article	22, section 66	60(i) •
J	If you are one of the following, mark an $\boldsymbol{X}$ in one box:		QETC •		Qualifie	d New Y	ork manufact	turer •
K	If you filed as a New York C corporation in previous year	ars, er	nter the last yea	r filed as su	ch		•	
L	Are you a residual interest holder in a real estate mortg	jage ir	nvestment cond	uit (REMIC)	?		Yes •	No •
M	Enter the amount, if any, of tax paid from federal Form	11205	6, line 22c			•		

N If you include the activities of a qualified subchapter S subsidiary (QSSS), partnership, single member limited liability

company (SMLLC), or DISC in this return, or have other affiliated entities, mark an **X** in the box and attach Form CT-60 ..... •

0	If you are a foreign corporation computing your tax taking into account <b>only</b> your distributive shall partnerships, mark an <b>X</b> in the box		-
P	If you made a voluntary contribution to any available funds, mark an $\boldsymbol{X}$ in the box and attach Form	n CT-22	7
Part	t 1 – Federal Form 1120S information		
	ride the information for lines 1 through 10 from the corresponding lines on your federal Fo	m 1120	S, Schedule K, total
	unt column. (Show any negative amounts with a minus (-) sign; do not use parentheses or brackets.)		
	Ordinary business income or loss		
3			
1	Interest income	·   · · ·	
5	Ordinary dividends		
6			
	Net short-term capital gain or loss		
8	Net long-term capital gain or loss		
9	Net section 1231 gain or loss	• 9	
10	Other income or loss	• 10	
11	Loans to shareholders (from federal Form 1120S, Schedule L, line 7, columns b and d)		
	Beginning of tax year ● End of tax year ●		
12	Total assets (from federal Form 1120S, Schedule L, line 15, columns b and d)		
	Beginning of tax year ● End of tax year ●		
13	Loans from shareholders (from federal Form 1120S, Schedule L, line 19, columns b and d)		
	Beginning of tax year ● End of tax year ●		
Prov	ride the information for lines 14 through 21 from the corresponding lines on your federal Fo	orm 112	0S. Schedule M-2.
	w any negative amounts with a minus (-) sign; do not use parentheses or brackets.)		•
	A B C Accumulated adjustments Shareholders' Accumulated e	arnings	D Other adjustments
	account undistributed taxable and profi		account
14	Balance at beginning of tax year		
15	Ordinary income from federal Form 1120S, page 1, line 21		
16	Other additions		•
17	Loss from federal Form 1120S, page 1, line 21		
18	Other reductions		•
19	Combine lines 14 through 18		•
20	Distributions		•
21	Balance at end of tax year.		
	Subtract line 20 from line 19		



Part	2 - Computation of tax (see instructions)							
Have	you been convicted of an offense, or are you an	owne	er of an entity convid	cted of an offense, de	fined in			- 1
	w York State Penal Law Article 200 or 496, or see		195.20? (see Form C	T-1, mark an <b>X</b> in one b	ox) <u></u>	Yes	□ No □	]
	must enter an amount on line 22; if none, ente							
	New York receipts (from Part 3, line 55, column A (N				_			
	Fixed dollar minimum tax (see instructions)				_			
	Recapture of tax credits (see instructions)				_			
	Total tax after recapture of tax credits (add lines 2							_
	Special additional mortgage recording tax credit				_			
	Tax due after tax credits (subtract line 26 from line				27			_
First	installment of estimated tax for the next ta	x pe	riod:					
	Enter amount from line 27							_
	If you filed a request for extension, enter amoun				• 29			_
30	If you did not file Form CT-5.4 and line 28 is over	er \$1,0	000, enter 25% (.25)	) of line 28.				
	Otherwise enter 0							_
	Add line 28 and line 29 <b>or</b> 30				31		$\overline{}$	
	position of prepayments (see instructions):		Date paid	Amount	_			
	Mandatory first installment							ı
	Second installment from Form CT-400							
34	Third installment from Form CT-400	34						
	Fourth installment from Form CT-400	35						
36	Payment with extension request from							
	Form CT-5.4	36						
	Overpayment credited from prior years (see instr							
	Total prepayments (add lines 32 through 37)							_
	Balance (subtract line 38 from line 31; if line 38 is larger							_
	Estimated tax penalty (see instructions; mark an X							_
41	Interest on late payment (see instructions)				• <u>41</u>			_
	Late filing and late payment penalties (see instruc	,						-
	Balance (add lines 39 through 42)				43			1
	ntary gifts/contributions							
	Total voluntary gifts/contributions (from Form CT-2							_
	Add lines 31, 40, 41, 42, and 44							-
46	Balance due (If line 38 is less than line 45, subtract in							
	due; enter your payment amount on line A on pa				<b>4</b> 6			_
47	Overpayment (If line 38 is more than line 45, subtraction							
	amount of your overpayment; see instructions.)					+		_
	Amount of overpayment to be credited to next p							-
	Refund of overpayment (subtract line 48 from line							_
	Refund of unused special additional mortgage re		•	,				_
51	Amount of special additional mortgage recording	_						
	next period				🛮 51			_



Part 3 – Computation of business apportionment factor (see in	nstruc	ctions)	
Mark an $\boldsymbol{X}$ in this box only if you have <b>no receipts</b> required to be included in the	ne der	nominator of the apportionm	ent factor (see instr.) ●
		A - New York State	<b>B</b> – Everywhere
Section 210-A.2			
1 Sales of tangible personal property	1		
2 Sales of electricity			
3 Net gains from sales of real property			
Section 210-A.3			
4 Rentals of real and tangible personal property	4		
<b>5</b> Royalties from patents, copyrights, trademarks, and similar intangible			
personal property	5		
6 Sales of rights for certain closed-circuit and cable TV transmissions			•
of an event	6		
Section 210-A.4			
7 Sale, licensing, or granting access to digital products	7		
Section 210-A.5(a)(1) - Fixed percentage method for qualified finance	cial ir	nstruments (QFIs)	
8 To make this irrevocable election, mark an <b>X</b> in the box (see instructions	)		
Section 210-A.5(a)(2) - Mark an X in each box that is applicable (see	e line	8 instructions)	
Section 210-A.5(a)(2)(A)			
9 Interest from loans secured by real property	9		
10 Net gains from sales of loans secured by real property			
11 Interest from loans <b>not</b> secured by real property (QFI • □)			
12 Net gains from sales of loans <b>not</b> secured by real property (QFI • □) •			
Section 210-A.5(a)(2)(B) (QFI • □)			
13 Interest from federal debt	13		
14		1-1	
15 Interest from NYS and its political subdivisions debt	15		•
16 Net gains from federal, NYS, and NYS political subdivisions debt			•
17 Interest from other states and their political subdivisions debt			
18 Net gains from other states and their political subdivisions debt			•
Section 210-A.5(a)(2)(C) (QFI • □)			•
19 Interest from asset-backed securities and other government agency debt •	19		
20 Net gains from government agency debt or asset-backed securities			•
sold through an exchange	20		
21 Net gains from all other asset-backed securities			
Section 210-A.5(a)(2)(D) (QFI • □)			
22 Interest from corporate bonds	22		
23 Net gains from corporate bonds sold through broker/dealer or			
licensed exchange	23		
24 Net gains from other corporate bonds			
Section 210-A.5(a)(2)(E)	27		•
25 Net interest from reverse repurchase and securities borrowing agreements •	25		
Section 210-A.5(a)(2)(F)	23		
26 Net interest from federal funds	26		
Section 210-A.5(a)(2)(I) (QFI •)	20		
27 Net income from sales of physical commodities	27		
Section 210-A.5(a)(2)(J) (QFI • □)	-1		
28 Marked to market net gains	28		
Section 210-A.5(a)(2)(H) (QFI • □)	20		
210-A.5(a)(2)(G) (QFI • □ )			
29 Interest from other financial instruments	29		
30 Net gains and other income from other financial instruments			
The gains and other income from other infallolal institutificities	30		



## Part 3 – Computation of business apportionment factor (continued)

		A - New York State	<b>B</b> – Everywhere
Section 210-A.5(b)			
31 Brokerage commissions	• 31		
32 Margin interest earned on behalf of brokerage accounts		•	
33 Fees for advisory services for underwriting or management of underwritin		•	
34 Receipts from primary spread of selling concessions	• 34	•	
35 Receipts from account maintenance fees	• 35	•	
36 Fees for management or advisory services	• 36	•	
37 Interest from an affiliated corporation	● 37	•	
Section 210-A.5(c)		•	
38 Interest, fees, and penalties from credit cards	• 38		
39 Service charges and fees from credit cards	• 39	•	
40 Receipts from merchant discounts	• 40		
41 Receipts from credit card authorizations and settlement processing	• 41		
42 Other credit card processing receipts	• 42		
Section 210-A.5(d)			
43 Receipts from certain services to investment companies	• 43		
Section 210-A.5-a			
44 Global intangible low-taxed income	• 44	0 00	
Section 210-A.6			
45 Receipts from railroad and trucking business	• 45		
Section 210-A.6-a			
46 Receipts from the operation of vessels	• 46		
Section 210-A.7			
47 Receipts from air freight forwarding			
48 Receipts from other aviation services	• 48		
Section 210-A.8			
49 Advertising in newspapers or periodicals	• 49		
50 Advertising on television or radio	• 50		
51 Advertising via other means	• 51		
Section 210-A.9			
52 Transportation or transmission of gas through pipes	● 52		
Section 210-A.10		•	
53 Receipts from other services/activities not specified	• 53		
Section 210-A.11			
54 Discretionary adjustments	• 54		
Total receipts		•	
55 Add lines 1 through 54 in columns A and B	• 55		

## Calculation of business apportionment factor

56	New York State business apportionment factor (divide line 55, column A by line 55, column B and enter		
		56	



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Amended	return information								
If filing an amended return, mark an $m{X}$ in the box for any items that apply and attach documentation.									
Final federal	determination • If marked, enter date of	f determination: •							
Third – party Yes No Designee's name (print)  Designee's name (print)									
designed (see instructio	Designee's cinal address				PIN				
Certificatio	n: I certify that this return and any attachme	ents are to the best of my l	knowledge and be	elief true, corre	ect, and complete.				
Authorized	Printed name of authorized person	Signature of authorized person Official title							
person	Email address of authorized person		Telephone n	umber	Date				
Paid	Firm's name (or yours if self-employed)		Firm's EIN	Pre	parer's PTIN or SSN				
preparer use	Signature of individual preparing this return	Address	С	ity	State ZIP code				
only (see instr.)	Email address of individual preparing this return		Preparer's NYTPRIN	or Excl. co	de Date				

See instructions for where to file.