



# CT-32-A/C

New York State Department of Taxation and Finance

## Report by a Banking Corporation Included in a Combined Franchise Tax Return Tax Law — Article 32

2003 calendar-yr. filers, check box:

Other filers enter tax period:  
beginning  ending

Employer identification number		File number	Business telephone number ( )			
Legal name of corporation				Trade name/DBA		
Mailing name (if different from legal name above) c/o				State or country of incorporation		Date received (for Tax Department use only)
Number and street or PO box				Date of incorporation		
City		State	ZIP code		Foreign corporations: date began business in NYS	
NAICS business code number (see instructions)	If address above is new, check box <input type="checkbox"/>		If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95. If only your address has changed, you may file Form DTF-96. You can get these forms by fax, phone, or from our Web site. See the <i>Need help?</i> section of the instructions.			Audit (for Tax Department use only)
Principal business activity						
Name of parent corporation					Employer identification number of parent corporation	

### Metropolitan transportation business tax (MTA surcharge)

During the tax year did you do business, employ capital, own or lease property, or maintain an office in the Metropolitan Commuter Transportation District? .....  Yes  No

Every corporation that files Form CT-32-A/C must include a fixed minimum tax payment of \$250 on Form CT-32-A, Schedule A, line 8.

### Computation of the issuer's allocation percentage — Complete Method I, II, or III (see instructions, Form CT-32-A/C-1)

**Method I** — Enter the alternative entire net income allocation percentage from the appropriate column on Form CT-32-A/B, Schedule E, Part II, line 121 .....  %

**Method II** — **A** New York State gross income ..... \$

**B** Worldwide gross income ..... \$

Divide line A by line B .....  %

### Method III — Computation of subsidiary capital allocated to New York State

A Subsidiary corporation		B % of voting stock owned	C Average value of subsidiary capital	D Current liabilities attributable to subsidiary capital	E Net average value (column C - column D)	F Issuer's allocation percentage	G Value allocated to New York State (column E x column F)
Name (attach separate sheet if necessary)	Employer identification number						
Amounts from attached list							
<b>1</b> Totals .....					<b>1.</b>		

### Computation of business capital allocated to New York State

**2** Average value of total assets from Form CT-32-A/B, Schedule D, line 69 ..... **2.**

**3** Current liabilities ..... **3.**

**4** Total net average value of subsidiary capital from line 1, column E ..... **4.**

**5** Net business assets (subtract lines 3 and 4 from line 2) ..... **5.**

**6** Alternative entire net income allocation percentage from Form CT-32-A/B, Schedule E, Part II, line 121 .... **6.**  %

**7** Business assets allocated to New York State (multiply line 5 by line 6) ..... **7.**

### Computation of issuer's allocation percentage

**8** Subsidiary capital and business capital allocated to New York State (add line 1, column G, and line 7) ..... **8.**

**9** Total worldwide capital (see instructions) ..... **9.**

**10** Issuer's allocation percentage (divide line 8 by line 9) ..... **10.**  %

**Composition of prepayments** *(see instructions)*

Member's prepayments to be credited and included on Form CT-32-A, *Banking Corporation Combined Franchise Tax Return*, and Form CT-32-M, *Banking Corporation MTA Surcharge Return*.

	Franchise tax			MTA surcharge		
	Date paid	Amount		Date paid	Amount	
11 Mandatory first installment .....	11.			11.		
12a Second installment from Form CT-400 ..	12a.			12a.		
12b Third installment from Form CT-400 .....	12b.			12b.		
12c Fourth installment from Form CT-400 ..	12c.			12c.		
13 Payment with extension request .....	13.			13.		
14 Overpayment credited from prior years <i>(see instructions)</i> ...	14.			14.		
15 Add <i>Amount</i> columns <i>(enter here and include on line 209 of Form CT-32-A)</i> .....	15.			15.		

**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.

Signature of authorized person		Official title	Date
Paid preparer use only	Firm's name <i>(or yours if self-employed)</i>	ID number	Date
	Address	Signature of individual preparing this return	

**Attach this report to the parent corporation's Form CT-32-A.**