



CT-32

New York State Department of Taxation and Finance

Banking Corporation Franchise Tax Return

Tax Law — Article 32

Staple forms here

Final return

Amended return

All filers must enter tax period: beginning ending

Employer identification number (EIN)	File number	If the address below is new, mark an X in the box <input type="checkbox"/>	Business telephone number ()	If you claim an overpayment, mark an X in the box <input type="checkbox"/>
Legal name of corporation	Trade name/DBA		Date of incorporation	
Mailing name (if different from legal name above)	State or country of incorporation		Date received (for Tax Department use only)	
c/o	County code			
Number and street or PO box	Foreign corporations: date began business in NYS			
City	State	ZIP code		
NAICS business code number (see instructions)	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 from our Web site, or by fax, or phone. See the <i>Need help?</i> section of the instructions.		Audit (for Tax Department use only)	
Principal business activity	ZIP code (U.S. headquarters)	OR	Name of country (foreign headquarters)	
Type of bank	New York assets		Total assets everywhere	
Clearinghouse <input type="checkbox"/>	Savings <input type="checkbox"/>	Other commercial <input type="checkbox"/>		

If the IRS has completed an audit of any of your returns in the past 5 years,

list years _____

During the tax year, did you do business in the Metropolitan Commuter Transportation District? Yes No

If Yes, you must file Form CT-32-M.

A. Pay amount shown on line 15. Make check payable to: New York State Corporation Tax Attach your payment here. Detach all check stubs.	Payment enclosed	
	A.	

B. Federal return filed: (mark an X in one box) **Attach a complete copy of your federal return.**
 Form 1120 • Form 1120F • Consolidated basis • Other: _____ •

C. If you included a qualified subchapter S subsidiary (QSSS) in this return, mark an X in the box and attach Form CT-60-QSSS....

D. Are you a member of a federal consolidated group? Yes • No •
 If Yes, complete items a through c below.

a Number of corporations included in the federal consolidated group..... •

b Total consolidated federal taxable income before the net operating loss deduction •

c If 65% or more of the voting stock of this corporation is owned or controlled, directly or indirectly, by another corporation, give the name and employer identification number of that corporation.

Name	Employer identification number
<input type="text"/>	<input type="text"/>

Schedule A – Computation of tax and installment payments of estimated tax (see instructions, Form CT-32-I)

1	Allocated taxable entire net income (ENI) (enter amount from Schedule B, line 61, and multiply by the tax rate of .075)	1.	
2	Allocated taxable alternative ENI from Schedule C, line 69 × .03	2.	
3	Allocated taxable assets (enter amount from Schedule D, line 73, and multiply by the appropriate tax rate; mark an X in the box) .00002 <input type="checkbox"/> .00004 <input type="checkbox"/> .0001 <input type="checkbox"/>	3.	
4	Fixed minimum tax	4.	250 00
5	Franchise tax (amount from line 1, 2, 3, or 4, whichever is largest)	5.	
6	Tax credits (see instructions)	6.	
7	Net franchise tax (subtract line 6 from line 5)	7.	
First installment of estimated tax for next period:			
8a	If you filed an application for extension, enter amount from Form CT-5, line 2	8a.	
8b	If you did not file Form CT-5 and line 7 is over \$1,000, see instructions	8b.	
9	Total (add line 7 and line 8a or 8b)	9.	
10	Total prepayments from line 167	10.	
11	Balance (if line 10 is less than line 9, subtract line 10 from line 9)	11.	
12	Penalty for underpayment of estimated tax (mark an X in the box if Form CT-222 is attached) <input type="checkbox"/>	12.	
13	Interest on late payment (see instructions)	13.	
14	Late filing and late payment penalties (see instructions)	14.	
15	Balance due (add lines 11 through 14; enter payment on line A on page 1)	15.	
16	Overpayment (if line 9 is less than line 10, subtract line 9 from line 10)	16.	
17	Amount of overpayment to be credited to the next period	17.	
18	Balance of overpayment (subtract line 17 from line 16)	18.	
19	Amount of overpayment to be credited to Form CT-32-M	19.	
20a	Refund of overpayment (subtract line 19 from line 18; see instructions)	20a.	
20b	Refund of unused tax credits (see instructions)	20b.	
20c	Tax credits to be credited as an overpayment to next year's tax return	20c.	
21	Issuer's allocation percentage (see instructions; show computation on page 9)	21.	%

Schedule B – Computation and allocation of ENI (see instructions, Form CT-32-I)

22	Federal taxable income before net operating loss (NOL) and special deductions	22.	
Additions			
23	Dividends and interest effectively connected with the conduct of a trade or business not included on line 22	23.	
24	Income effectively connected with the conduct of a trade or business not included on line 22	24.	
25	Dividends and interest not included on line 22	25.	
26	Income taxes paid to the United States, its possessions, or foreign countries, deducted on federal return	26.	
27	New York State franchise taxes deducted on federal return	27.	
28	Total federal depreciation from Form CT-399 and, if applicable, Schedule E, lines 76 and 78	28.	
29	New York State gains or losses on disposition of property from Schedule F, line 80	29.	
30	Amount deducted on your federal return as a result of a safe harbor lease	30.	
31	Amount that would have been required to be included on your federal return except for a safe harbor lease	31.	
32	Amount of special additional mortgage recording tax deducted on your federal return and claimed as a tax credit	32.	
33	Any other federal deduction previously allowable as a deduction under Articles 9-B or 9-C (attach explanation)	33.	
34	Bad debt deduction allowed under Internal Revenue Code (IRC) sections 166 or 585	34.	
35	Twenty percent of the excess of bad debt deduction (see instructions; attach computation)	35.	
36	Other additions to federal taxable income (attach list)	36.	
37	Total additions (add lines 23 through 36)	37.	

Schedule B – Computation and allocation of ENI (continued)

Subtractions

38	Interest and other expenses not deducted on federal return that are applicable to lines 23, 24, and 25.....	•	38.		
39	Enter total amount of allowable New York depreciation from Form CT-399 and, if applicable, Schedule E, line 79	•	39.		
40	Federal gains or losses on disposition of property from Schedule F, lines 81 and 83		40.		
41	Federal income or gain from installment method transactions under Articles 9-B or 9-C.....	•	41.		
42	IRC section 78 dividends included in the computation of lines 22 through 25.....	•	42.		
43	Amount included on your federal return as a result of a safe harbor lease	•	43.		
44	Amount that would have been deducted on your federal return except for safe harbor lease	•	44.		
45	Amount of wages not deducted on the federal return due to IRC section 280C (see instructions)	•	45.		
46	Amount of money received from the FDIC, FSLIC, or RTC (see instructions)	•	46.		
47	Interest income from subsidiary capital (attach statement) ... \$ _____ × 17% (.17)	•	47.		
48	Dividend income from subsidiary capital (attach list)..... \$ _____ × 60% (.6)	•	48.		
49	Net gains from subsidiary capital (attach list)..... \$ _____ × 60% (.6)	•	49.		
50	Interest income on obligations of New York State, its political subdivisions, and the United States (attach list) \$ _____ × 22½% (.225).....	•	50.		
51	Adjusted eligible net income of an international banking facility (IBF) from Schedule G, line 107	•	51.		
52	Recaptured reserve for losses on loans for IRC section 585(c) taxpayers included on line 22	•	52.		
53	Recoveries of charged-off loans included on line 22 for IRC section 585 taxpayers	•	53.		
54	Bad debt deduction under section 1453(h) (attach computation)	•	54.		
55	Bad debt deduction under section 1453(i) (attach computation)	•	55.		
56	New York State NOL deduction (see instructions)	•	56.		
57	Other subtractions from federal taxable income (attach list)	•	57.		
58	Total subtractions (add lines 38 through 57)	•	58.		
59a	ENI (add line 22 and line 37; subtract line 58)	•	59a.		
59b	Allocated ENI: line 59a × _____ % from Schedule H, Part I, line 131		59b.		
60	Optional depreciation adjustments (add lines 77 and 82)		60.		
61	Allocated taxable ENI (line 59b plus or minus line 60; enter on Schedule A, next to line 1)		61.		

Schedule C — Computation and allocation of alternative ENI

62	ENI from Schedule B, line 59a.....		62.		
63	Interest income from subsidiary capital from Schedule B, line 47	•	63.		
64	Dividend income and net gain from subsidiary capital from Schedule B, lines 48 and 49.....	•	64.		
65	Interest income on obligations of New York State, its political subdivisions, and the United States, from Schedule B, line 50.....	•	65.		
66	Alternative ENI (add lines 62 through 65)		66.		
67	Allocated alternative ENI: line 66 × _____ % from Schedule H, Part II, line 137		67.		
68	Optional depreciation adjustments from Schedule B, line 60		68.		
69	Allocated taxable alternative ENI (line 67 plus or minus line 68; enter here and on Schedule A, next to line 2)		69.		

Schedule D — Computation of taxable assets and tax rate (Read instructions before completing this schedule.)

70	Average value of total assets.....	•	70.		
71	Money or other property received from the FDIC, FSLIC, or RTC (see instructions)	•	71.		
72	Taxable assets (subtract line 71 from line 70)		72.		
73	Allocated taxable assets: line 72 × _____ % from Schedule H, Part III, line 161 (enter here and on Schedule A, next to line 3)	•	73.		
74	Compute net worth ratio: Net worth on last day of the tax year = Total assets on last day of the tax year		74.		%
75	Compute percentage of mortgages included in total assets: Average quarterly balance of mortgages = Average quarterly balance of total assets		75.		%

Tax rates			
Use the chart below to determine your tax rate. This rate must be used to compute the alternative minimum tax measured by taxable assets. You must meet both the net worth ratio and percentage of mortgages included in the total assets requirements to qualify for the lower tax rates.			
Mark an X in the appropriate box in the last column and use this rate on Schedule A, line 3.			
If the net worth ratio (from line 74 above) is:	And the % of mortgages included in total assets (from line 75 above) is:	The tax rate is:	Indicate the appropriate rate
Less than 4%	33% or more	.00002	
At least 4% but less than 5%	33% or more	.00004	
All others	All others	.0001	

Schedule E — Depreciation on certain property when method differs from federal

Part I — Depreciation on qualified New York property acquired between January 1, 1964, and December 31, 1967 (list each property and the date acquired here; for each property, complete columns C through H on the corresponding lines below)

Item	A Description of property					B Date acquired
A						
B						
C						
D						
E						
Item	C Cost	D Federal depreciation prior years	E Federal depreciation this year	F New York depreciation prior years	G New York depreciation this year	H Undepreciated balance
A						
B						
C						
D						
E						
Totals			•		•	

- 76** Add column E amounts _____ ↑
Combine this total with Schedule E, Part II, line 78, and enter on Schedule B, line 28.
- 77** Add column G amounts _____ ↑
Combine this total with Schedule F, Part II, line 82, and enter on Schedule B, line 60.

Part II — Other property on which New York depreciation differs from federal

Item	A Description of property					B Date acquired
A						
B						
C						
D						
E						
Item	C Cost	D Federal depreciation prior years	E Federal depreciation this year	F New York depreciation prior years	G New York depreciation this year	H Undepreciated balance
A						
B						
C						
D						
E						
Totals						

78 Add column E amounts _____ ↑
 Combine this total with Schedule E, Part I, line 76, and enter on Schedule B, line 28

79 Add Part II column G amounts; enter on Schedule B, line 39 _____ ↑

Schedule F — Computation of New York gain or loss on disposition of certain property acquired prior to January 1, 1973

Part I — Property acquired prior to: 1/1/26 by commercial banks; 1/1/44 by savings banks; 1/1/53 by savings and loan associations

A Description of property	B Cost or fair market price on valuation date	C Selling price	D New York gain or loss (column C — column B)	E Federal gain or loss
Totals (use minus (-) sign to indicate negative amount) •				

80 Add column D amounts; enter on Schedule B, line 29 _____ ↑

81 Add column E amounts; combine this total with Schedule F, Part II, line 83, and enter on Schedule B, line 40 _____ ↑

Part II — Property on which optional depreciation was claimed or on which the method used for New York State differed from federal depreciation deducted

A Description of property	B Depreciation basis for New York State	C Selling price	D New York gain or loss (column C — column B)	E Federal gain or loss
Totals (use minus (-) sign to indicate negative amount) •				

82 Add column D amounts _____ ↑
 Combine this total with Schedule E, line 77, and enter on Schedule B, line 60

83 Add column E amounts; combine this total with Schedule F, Part I, line 81, and enter on Schedule B, line 40 _____ ↑



Schedule G — Computation of IBF adjusted eligible net income or loss

If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below and see instructions.

The corporation computed ENI using the: IBF modification method or IBF formula allocation method

Computation of eligible gross income		
84 Interest income from eligible loans	84.	
85 Interest income from eligible deposits	85.	
86 Income from foreign exchange trading and hedging transactions	86.	
87 Fee income from eligible transactions	87.	
88 Eligible gross income (add lines 84 through 87)	88.	

Computation of applicable expenses		
89 Direct expenses	89.	
90 Indirect expenses.....	90.	
91 Total applicable expenses (add lines 89 and 90)	91.	

Computation of ineligible funding amount		
92 Eligible net income (subtract line 91 from line 88)	92.	
93 Average aggregate liabilities and other sources of funds of the IBF that are not owed to or received from foreign persons.....	93.	
94 Average aggregate liabilities and other sources of funds of the IBF.....	94.	
95 Divide line 93 by line 94.....	95.	%
96 Ineligible funding amount (multiply line 92 by line 95)	96.	
97 Remaining amount (subtract line 96 from line 92; also enter on line 105, below)	97.	

Computation of floor amount and adjusted eligible net income or loss		
98 Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State for tax years 1975, 1976, and 1977	98.	
99 Statutory percentage for the current tax year	99.	%
100 Multiply line 98 by line 99.....	100.	
101 Average aggregate amount of loans to and deposits with foreign persons in financial accounts within New York State (other than IBF) for the current tax year.....	101.	
102 Balance (subtract line 101 from line 100)	102.	
103 Average aggregate amount of loans to and deposits with foreign persons in financial accounts of the IBF for the current tax year	103.	
104 Enter 100% or the percentage obtained by dividing line 102 by line 103, whichever is less	104.	%
105 Remaining amount (enter amount from line 97).....	105.	
106 Floor amount (multiply line 104 by line 105)	106.	
107 Adjusted eligible net income or loss (subtract line 106 from line 105; also enter on Schedule B, line 51)	107.	

(continued)



Schedule H — Allocation percentages (Parts I, II, and III)

Part I — Computation of ENI allocation

If the corporation has an IBF located in New York State, mark an **X** in the appropriate box below and see instructions.

The corporation computed ENI using the: IBF modification method IBF formula allocation method

If you are claiming an allocation outside New York, attach an explanation of the business carried on outside New York that gives you the right to allocate.

		A New York State	B Everywhere
108	Wages, salaries, and other compensation of employees (except general executive officers)		
109	Multiply line 108, column A, by 80% (.8).....		
110	Percentage in New York (divide line 109, column A, by line 108, column B)		%
Receipts during the tax period from:			
111	Interest income from loans and financing leases.....		
112	Other income from loans and financing leases.....		
113	Lease transactions and rents.....		
114	Interest from bank, credit, travel, entertainment, and other credit card receivables		
115	Service charges and fees from bank, credit, travel, entertainment, and other credit cards		
116	Receipts from merchant discounts		
117	Income from trading activities and investment activities		
118	Fees or charges from letters of credit, traveler's checks, and money orders		
119	Performance of services		
120	Royalties		
121	All other business receipts.....		
122	Total (add lines 111 through 121).....		
123	Percentage in New York (divide line 122, column A, by line 122, column B)		%
124	Additional receipts factor (enter percentage from line 123)		%
Deposits maintained in branches			
125	Deposits of \$100,000 or more		
126	Deposits of less than \$100,000		
127	Add lines 125 and 126.....		
128	Percentage in New York (divide line 127, column A, by line 127, column B) ...		%
129	Additional deposits factor (enter percentage from line 128).....		%
130	Total of New York percentages (add lines 110, 123, 124, 128, and 129) ...		%
131	ENI allocation percentage (divide line 130 by five or by the number of percentages; see instructions if a factor is missing; also enter on Schedule B, next to line 59b)		%

Schedule H — Part II — Computation of alternative ENI allocation

132	Wages, salaries, and other compensation of employees (except general executive officers)		
133	Percentage in New York State (divide line 132, column A, by line 132, column B)		%
134	Receipts factor (enter percentage from Schedule H, Part I, line 123)		%
135	Deposits factor (enter percentage from Schedule H, Part I, line 128)		%
136	Add lines 133, 134, and 135.....		%
137	Alternative ENI allocation percentage (divide line 136 by three or by the number of percentages; see instructions if a factor is missing; also enter on Schedule C, next to line 67).....		%

Schedule H — Part III — Computation of taxable assets allocation

Include all activities of an IBF in both the numerator (column A) and denominator (column B) when computing the taxable asset allocation		A New York State	B Everywhere
138	Wages, salaries, and other compensation of employees (except general executive officers)	138.	
139	Multiply line 138, column A, by 80% (.8).....	139.	
140	Percentage in New York (divide line 139, column A, by line 138, column B) ...	140.	%
Receipts during the tax period from:			
141	Interest income from loans and financing leases.....	141.	
142	Other income from loans and financing leases.....	142.	
143	Lease transactions and rents.....	143.	
144	Interest from bank, credit, travel, entertainment, and other credit card receivables	144.	
145	Service charges and fees from bank, credit, travel, entertainment, and other credit cards	145.	
146	Receipts from merchant discounts	146.	
147	Income from trading activities and investment activities	147.	
148	Fees or charges from letters of credit, traveler's checks, and money orders	148.	
149	Performance of services	149.	
150	Royalties	150.	
151	All other business receipts.....	151.	
152	Total (add lines 141 through 151).....	152.	
153	Percentage in New York (divide line 152, column A, by line 152, column B)	153.	%
154	Additional receipts factor (enter percentage from line 153).....	154.	%
Deposits maintained in branches			
155	Deposits of \$100,000 or more	155.	
156	Deposits of less than \$100,000	156.	
157	Add lines 155 and 156.....	157.	
158	Percentage in New York (divide line 157, column A, by line 157, column B) ...	158.	%
159	Additional deposits factor (enter percentage from line 158).....	159.	%
160	Total of New York percentages (add lines 140, 153, 154, 158, and 159)....	160.	%
161	Taxable assets allocation percentage (divide line 160 by five or by the number of percentages; see instructions if a factor is missing; also enter on Schedule D, next to line 73).....	161.	%

Composition of prepayments on Schedule A, line 10 (see instructions)

	Date paid	Amount
162	Mandatory first installment.....	162.
163a	Second installment from Form CT-400	163a.
163b	Third installment from Form CT-400	163b.
163c	Fourth installment from Form CT-400	163c.
164	Payment with extension request from Form CT-5, line 5	164.
165	Overpayment credited from prior years (see instructions).....	165.
166	Overpayment credited from Form CT-32-M	166.
167	Total prepayments (add lines 162 through 166; enter here and on Schedule A, line 10).....	167.

(continued)

Computation of the issuer's allocation percentage — Complete Method I, II, or III (see instructions)

Method I — Enter the alternative ENI allocation percentage from Schedule H, Part II, line 137 (enter here and on line 21) ● _____ %

Method II — A New York State gross income \$ _____
 B Worldwide gross income \$ _____
 Divide line A by line B (enter here and on line 21) ● _____ %

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

Attach separate sheets displaying this information formatted as below, if necessary.

A — Description of subsidiary capital (list the name of each corporation and the EIN here; for each corporation, complete columns B through G on the corresponding lines below)

Item	Name	EIN
A		
B		
C		
D		
E		
F		
G		

A Item	B Voting stock owned %	C Average value of subsidiary capital	D Current liabilities attributable to subsidiary capital	E Net average value (col. C – col. D)	F Issuer's allocation %	G Value allocated to New York State (col. E × col. F)
A						
B						
C						
D						
E						
F						
G						
Amounts from attached list						
168 Totals				168.		

Method III — Computation of business capital allocated to New York State

169 Average value of total assets from Schedule D, line 70	169.	
170 Current liabilities	170.	
171 Total net average value of subsidiary capital from line 168, column E	171.	
172 Net business assets (subtract lines 170 and 171 from line 169)	172.	
173 Enter the alternative ENI allocation percentage from Schedule H, Part II, line 137	173.	%
174 Business assets allocated to New York State (multiply line 172 by line 173)	174.	

Method III — Computation of issuer's allocation percentage

175 Subsidiary capital and business capital allocated to New York State (add line 168, column G and line 174)	175.	
176 Total worldwide capital (see instructions)	176.	
177 Issuer's allocation percentage (divide line 175 by line 176; enter here and on line 21) ●	177.	%

Summary of tax credits claimed on line 6 against current year's franchise tax (attach applicable forms; see instructions for line 6)

Form CT-41, Credit for employment of persons with disabilities	•	<input type="text"/>	Form CT-606 QEZE credit for real property taxes...	•	<input type="text"/>
Form CT-43, Special additional mortgage recording tax credit	•	<input type="text"/>	Form CT-611 Brownfield redevelopment tax credit	•	<input type="text"/>
Form CT-44, ITC for financial services industry	•	<input type="text"/>	Form CT-612 Remediated brownfield credit for real property taxes	•	<input type="text"/>
Form CT-249 Long-term care insurance credit	•	<input type="text"/>	Form CT-613 Environmental remediation insurance credit	•	<input type="text"/>
Form CT-250 Defibrillator credit	•	<input type="text"/>	Form DTF-624 Low-income housing credit	•	<input type="text"/>
Form CT-601 EZ wage tax credit	•	<input type="text"/>	Form DTF-630 Green building credit	•	<input type="text"/>
Form CT-601.1 ZEA wage tax credit	•	<input type="text"/>	Credit for servicing mortgages (attach statement)	•	<input type="text"/>
Form CT-602 EZ capital tax credit	•	<input type="text"/>	Other credits	•	<input type="text"/>
Form CT-604 QEZE tax reduction credit	•	<input type="text"/>			

178 Total of credits listed above (enter here and on line 6 indicating a negative total with a minus sign; attach appropriate form or statement for each credit claimed)	•	178.	<input type="text"/>
179 Total tax credits claimed on line 178 that are refund eligible (see instructions)	•	179.	<input type="text"/>

Certification: I certify that this return 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	Signature of individual preparing this return		Firm's name (or yours if self-employed)		
	Address	City	State	ZIP code	Date
			ID number		

Mail your return to the following address:

**NYS CORPORATION TAX
PROCESSING UNIT
PO BOX 22038
ALBANY NY 12201-2038**

See the instructions for private delivery service information.



Change in Mailing Address and Assistance Information for Prior Year Corporation Tax Forms

TP-32
(1/16)

Beginning on January 2, 2015, we changed processing centers.

Any corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Department – IT-2659, PO Box 397, Albany NY 12201-0397, must be mailed to this address instead (see *Private delivery services* below):

**NYS TAX DEPARTMENT
PO BOX 15179
ALBANY NY 12212-5179**

Any corporation tax filing extension request form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 22094, Albany NY 12201-2094, or NYS Tax Corporation Tax, Processing Unit, PO Box 22102, Albany NY 12201-2102, must be mailed to this address instead (see *Private delivery services* below):

**NYS CORPORATION TAX
PO BOX 15180
ALBANY NY 12212-5180**

Any C corporation, banking corporation, insurance corporation, Article 9 corporation, and Article 13 corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 1909, Albany NY 12201-1909; NYS Tax Corporation Tax, Processing Unit, PO Box 22038, Albany NY 12201-2038; NYS Tax Corporation Tax, Processing Unit, PO Box 22095, Albany NY 12201-2095; NYS Tax Corporation Tax, Processing Unit, PO Box 22093, Albany NY 12201-2093; or NYS Tax Corporation Tax, Processing Unit, PO Box 22101, Albany NY 12201-2101, must be mailed to this address instead (see *Private delivery services* below):

**NYS TAX DEPARTMENT
PO BOX 15181
ALBANY NY 12212-5181**

Any S corporation tax form for tax years 2014 or before that instructs you to mail the form to: NYS Tax Corporation Tax, Processing Unit, PO Box 22092, Albany NY 12201-2092, or NYS Tax Corporation Tax, Processing Unit, PO Box 22096, Albany NY 12201-2096, must be mailed to this address instead (see *Private delivery services* below):

**NYS TAX DEPARTMENT
PO BOX 15182
ALBANY NY 12212-5182**

Note: Forms mailed to the old addresses may be delayed in processing.

Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help?* below for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery.

For all the forms referenced above, if you are using a private delivery service, send to:

NYS TAX DEPARTMENT
CORP TAX PROCESSING
90 COHOES AVE
GREEN ISLAND NY 12183

Need help?



Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- check for new online services and features



Telephone assistance

Corporation Tax Information Center: (518) 485-6027

To order forms and publications: (518) 457-5431

Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): (518) 485-5082



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, call the information center.