

New York State Department of Taxation and Finance

## **DTF-620**

## Application for Certification of a Qualified Emerging Technology Company

Tax Law — Articles 9-A and 22

This application is for the certification period:

		beginning			ending			
Pa	art 1 — Business information (all	applicants must complete this :	section)	D	epartmen	t use only		
Pri	nt or type							
	egal name (see instructions)		1					
<b>2</b> Tr	rade name/DBA (if different from line 1; see instructions)							
3 A	ddress of business in New York State (number and street; s	eee instructions) City		State		ZIF	code code	
4 N	lailing address (if different from business address; see instruction	ons) City		State		ZIF	ocode code	
<b>5</b> C	ounty (place of business in New York State)	6 Business telephone nu	mber (includ	de area code) 7 Date	business	began or will	begin in NYS	
8 F	ederal employer identification number (see instructions)	9 Type of organization: (mark an X in or Corporation Partnership		LC Other (sp	ecify)			
	I authorize the Commissioner of Taxation a company is a certified qualified emerging t period shown on this application, if the cormay include the information shown on lineart 2 — Eligibility requirements (	echnology company (QETC) for mpany so qualifies. The discloses 1, 2, 3, and 4 of this applicated	or the cer sure of in on (mark	tification formation	Ye	es 🗌	No 🗌	
11	Is the company located in New York State?	? (see instructions)			Ye	es	No	
12	Are the total annual product sales of the co	ompany \$10,000,000 or less? (	see instru	ctions)	Ye	es 🗌	No	
	ou answered Yes to questions 11 <b>and</b> 12, co ou answered No to either question 11 or 12,							
Ca	tegory 1 — Primary products or servi	ces						
13	Does the company develop or create produc	cts or services that are classifie	d as eme	erging technologie	s? Ye	es 🗌	No 🗌	
	If Yes, enter a description of the company's emerging technology products or services:							
14	Enter gross receipts or sales from the com services described on line 13					14		
15	Enter total gross receipts or sales from all t	the company's products or ser	vices			15		
	If line 15 is zero, skip lines 16 and 17 and of If line 15 is greater than zero, continue with							
16	Divide line 14 by line 15 (enter the result as a	percentage)				16		
17	Is the percentage on line 16 greater than 5	0%?			Ye	es 🔲	No 📙	

## DTF-620 (2014) (back)

18	Enter the total expenditures attributable to the development or products or services included on your federal return	18					
19	Enter the total expenditures included on your federal return	19					
20	Divide line 18 by line 19 (enter the result as a percentage)		20%				
21	Is the percentage on line 20 greater than 50%?	Yes	No				
	If you answered Yes, you are eligible to be certified as a QETC under Category 1. Sign the application in the certification area and mail it to the address shown below. If you answered No, complete lines 22 through 26 to determine if you are eligible to be certified under Category 2.						
Ca	tegory 2 — Research and development (R&D) activities	<b>S</b>					
22	Does the company have R&D activities in New York State?	No					
23	Enter the amount of R&D funds (see instructions)	23					
24	24 Enter the amount of net sales (if you have any amount of R&D funds, but zero net sales, you are a QETC; skip line 25 and mark the Yes box on line 26; see instructions)						
25	R&D funds percentage (divide line 23 by line 24; enter the result as a	percentage)	25%				
26	Does the percentage on line 25 equal or exceed the applicable percentage for the certification period for which you are applying (see instructions)?						
	ou answered Yes to questions 22 <b>and</b> 26, you are eligible to be concertification area and mail it to the address shown below.	ertified as a QETC under Category 2. Sign th	e application in				
	ou failed to qualify under Category 1, and answered No to either a QETC and should not file this application.	question 22 or 26 in Category 2, you are <b>not</b>	eligible to be certified				
l de	ertification clare that to the best of my knowledge and belief this application iresentation is a crime punishable under section 1801 of the New Y						
Sig	nature of authorized person	Title	Date				
Mai	I the application to:  NYS TAX DEPARTMENT PSSB DOCUMENT PROCESSING W A HARRIMAN CAMPUS ALBANY NY 12227-0825	1					

**Private delivery services** — See Publication 55, *Designated Private Delivery Services*.