			nyc 202				BUSINESS DIVIDUALS						
		F I N A N C E NEW • YORK	ΕZ										
		INEW • YOKK THE CITY OF NEW YORK DEPARTMENT OF FINANCE nyc.gov/finance							DO NOT WR	ITE IN TH	IIS SPACE - FOR C	OFFICIAL USE OF	NLY
		Check "yes" i	f you claim a	ny 9/11/01	-related	d federal t	tax benefits (s	ee inst.)	YES				2006
		For CALENDAR	YEAR 2006 or	FISCAL YE	AR begi	nning			and ending				-
		Amended return		F	inal retu	ırn •			ave ceased ope statement sho				
		First name	and initial		Last na	ime					SOCIAL SECUR		· · · · · · · · · · · · · · · · · · ·
		Business r	name										
			address (number	and street)					IF YOU HA	IVE AN EN		CATION NUMBER	R, ENTER IT HERE
		0								ATE SALL			
		City and S	tate				Zip Code						
		•	Felephone Numbe	er		Nature of b	usiness or profession	on	BUSINESS (IUMBER CHEDULE C:		
	Date	business beg	an in NYC:				Date	business	ended in NY	'C: (if	applicable)		
limite Busi	form is for individued liability company ness Tax as an indi corporated busines	y ("SMLLC") tha vidual if the act is is required to	at has elected ivities of the s file an Unince	le an Uninc to disrega SMLLC wou orporated E	rd the s uld be c Busines	eparate e onsidered s Tax retu	xistence of the an unincorpoi rn only if:	SMLLC for rated busin	federal tax ess carried o	purpo	ses is subj	mber of a ect to the l	Unincorporated
A			le income of the EXCLUSIV	ne business ELY IN AI	exceeds	s \$35,000. VITY EXE	EMPT FROM U	JNINCORI	PORATED				R
To q	uickly determine wh							ARE NOT	REQUIRE	10		TUKN.	
YOU	MAY <u>NOT</u> USE	For a complet	e list of modifie	cations, see	instructi	ons for Fo		·					
	HIS FORM IF:	You allocate to You file as an			and with	out NYC.	(If you allocate 1	00% of you	business inco	ome to	NYC, you a	re entitled to	o use this form.)
	A	You claim any								- (-)			
YO	U MUST COM		•				for complet	-	-	nts.)			
	Net profit (loss) f												
2.	Additional busine		· ·	,									
3	income, and roya Income taxes an								• 2.				
0.	Schedule C or S								• 3.				
4.													
5.	\$55,000, you must Enter the number		,						• 4.				
	(THIS LINE MUST	BE COMPLETE	D)						• 5.				
6.	Enter the approp								• 6.				00
7.	on the number o Compare the am								🗢 0.				
	by more than \$1	00. (If line 4 ex	ceeds line 6	by more t	han \$1	00, you m	ust use Form	NYC-202)	7.				
8.	Enter payment of from previous yes this amount is yes	ar and payme	ent with exte	nsion, NY	C-62. S	Since you	ur tax due is z	ero,	• 8.				
	Amount of line 8												
	Amount of line 8						-5UBTI		• 10).			
11.	Enter New York THIS LINE MUST E	•				or C-EZ ● 11.							
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Tax	thorize the Dept. of F bayer's lature:	manue to discus	a una return W		Title:	sa below. (ace manuctions	s)		I	Preparer's So	ocial Security	y Number or PTIN
PREPA	ARER'S Preparer's			Preparer's					mm/dd/yy	•			
	signature:			printed nam	ie:			Da	mm/dd/yy		Firm's Emp	loyer Identif	fication Number
	vif self- lyed ✔ Firm's	name		▲ Addre	ISS			▲ Zip Code		•	•		

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 YOU MUST ATTACH A COPY OF FEDERAL SCHEDULE C OR SCHEDULE C-EZ TO YOUR RETURN AND COMPLETE THE ADDITIONAL INFORMATION SECTION ON PAGE 2. SEE OVER FOR MAILING INSTRUCTIONS.

 60310691

INSTRUCTIONS

Check the box marked "yes" on this form if you claim any of the following benefits on your federal return: (i) bonus depreciation or a deduction under IRC §179 for property in the NY Liberty Zone or Resurgence Zone, whether or not you file form NYC-399Z, (ii) a jobs credit for NY Liberty Zone employees, or (iii) IRC §1033 treatment for property converted due to the attacks on the World Trade Center. Attach Federal forms 4562, 4684, 4797 and 8884 to this return. See instructions for Form NYC 202, Sch. B, lines 10d, 15 and 16.

In the space provided on the front of the return, enter your correct Social Security Number and Employer Identification Number and New York State Sales Tax ID Number, if applicable. The Sales Tax ID Number can be 9, 10 or 11 digits. Enter the same business code entered on federal Schedule C or Schedule C-EZ. Individuals licensed and/or regulated by the NYC Taxi and Limousine Commission use business code 999999 in lieu of the federal code.

If an individual or an unincorporated entity carries on two or more unincorporated businesses, in whole or in part within the City, all such businesses shall be treated as one unincorporated business for purposes of this tax. The gross income and deductions from all such businesses must be combined and reported on one return.

- LINE 1: Enter the amount reported for federal tax purposes on federal Schedule C or Schedule C-EZ, Form 1040. Attach copy of federal Schedule C or Schedule C-EZ.
- LINE 2: Enter the sum of: (a) the total gain or loss from the sale or exchange of real or personal property carried as business assets and reported on federal Schedule D or federal Form 4797; (b) the net amount of rental and royalty income derived from real and personal business property reported on federal Schedule E; and (c) the net amount of income or loss derived from other business activities, other than those reported above (such as interest and dividends from securities connected with the business or carried as business assets).
- **LINE 3:** Enter the amount of income and unincorporated business taxes imposed by New York City, New York State, or any other taxing jurisdiction and deducted on federal Schedule C or Schedule C-EZ. Attach a list.

TABLE OF MAXIMUM TOTAL ALLOWED INCOME FROM BUSINESS

NUMBER OF MONTI IN BUSINESS	HS MAXIMUM TOTAL INCOME FROM BUSINESS	
1	\$50,416	If total income
2	\$50,833	from business is
3	\$51,250	
4	\$51,667	more than \$55,000,
5	\$52,083	you must file
6	\$52,500	Form NYC-202
7	\$52,917	
8	\$53,333	FIFTEEN OR MORE
9	\$53,750	CALENDAR DAYS
10	\$54,167	
11	\$54,583	CONSTITUTES
12	\$55,000	ONE MONTH

LINE 8: Enter the sum of all payments of estimated unincorporated business tax made for the period covered by this return, including the amount of any overpayment from 2005 that you elected to credit toward your 2006 liability and your payment with extension, NYC-62.

Preparer Authorization: If you want to allow the Department of Finance to discuss your return with the paid preparer who signed it, you must check the "yes" box in the signature area of the return. This authorization applies only to the individual whose signature appears in the "Preparer's Use Only" section of your return. It does not apply to the firm, if any, shown in that section. By checking the "Yes" box, you are authorizing the Department of Finance to call the preparer to answer any questions that may arise during the processing of your return. Also, you are authorizing the preparer to:

- Give the Department any information missing from your return,
- Call the Department for information about the processing of your return or the status of your refund or payment(s), and
- Respond to certain notices that you have shared with the preparer about math errors, offsets, and return preparation. The notices will not be sent to the preparer.

You are not authorizing the preparer to receive any refund check, bind you to anything (including any additional tax liability), or otherwise represent you before the Department. The authorization cannot be revoked, however, the authorization will automatically expire no later than the due date (without regard to any extensions) for filing next year's return. Failure to check the box will be deemed a denial of authority.

Additional required information

MAILING

INSTRUCTIONS

The following information must be entered for this return to be complete.

 B) Did you file a New York City Unincorporated Business Tax Return for:	A) Enter nome address:			
c) Has the Internal Revenue Service or the New York State Department of Taxation and Finance increased or decreased any taxable income (loss) reported in any tax period, or are you currently being audited?	B) Did you file a New York City Unincorporated Business Tax Return for:		2004	2005
taxable income (loss) reported in any tax period, or are you currently being audited?	If not, state reason:			
If "yes," by whom? Internal Revenue Service New York State Department of Taxation and Finance State periods: and answer (D).	c) Has the Internal Revenue Service or the New York State Department of Taxa	tion and Finance increased or decreased any		
State periods: and answer (D).	taxable income (loss) reported in any tax period, or are you currently being a	audited?	Yes 🗌	No 🗌
	If "yes," by whom? Internal Revenue Service \Box	New York State Department of Taxation and F	inance 🗌	
D) Has Form(s) NYC-115 (Tax Report of Change in Taxable Income Made by IRS or New York State) been filed? Yes 🗌 No 🗌	State periods:	and answe	er (D).	
	D) Has Form(s) NYC-115 (Tax Report of Change in Taxable Income Made by II	RS or New York State) been filed?	Yes	No 🗌

Attach copy of federal

federal form 1040.)

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PRIVACY ACT NOTIFICATION

The Federal Privacy Act of 1974, as amended, requires agencies requesting Social Security Numbers to inform individuals from whom they seek this information as to whether compliance with the request is voluntary or mandatory, why the request is being made and how the information will be used. The disclosure of Social Security Numbers for taxpayers is mandatory and is required by section 11-102.1 of the Administrative Code of the City of New York. Such numbers disclosed on any report or return are requested for tax administration purposes and will be used to facilitate the processing of tax returns and to establish and maintain a uniform system for identifying taxpayers who are or may be subject to taxes administered and collected by the Department of Finance, and, as may be required by law, or when the taxpayer gives written authorization to the Department of Finance for another department, person, agency or entity to have access (limited or otherwise) to the information contained in his or her return.

RETURNS CLAIMING REFUNDS

Schedule C or Schedule C-EZ and page 1 of federal Form NYC DEPT OF FINANCE 1040. (If this is a final return, P.O. BOX 5050 attach a copy of your entire KINGSTON, NY 12402-5050 ALL OTHER RETURNS

NYC DEPT OF FINANCE P.O. BOX 5060 KINGSTON, NY 12402-5060

The due date for the calendar year 2006 is on or before April 16, 2007. For fiscal years beginning in 2006, file on or before the 15th day of the fourth month following the close of fiscal year.

Get New York City forms by using your fax machine or computer. Call Tax Fax at (212) 504-4038 from the telephone connected to your fax machine or fax modem. Visit our Internet web site and download forms and instructions at nyc.gov/finance