



CT-32-A

New York State Department of Taxation and Finance

Banking Corporation Combined Franchise Tax Return

Tax Law — Article 32

1995 calendar yr. filers, check box

Other filers enter tax period:

beginning

ending

Employer identification number		File number	If address on return is new, check box (see instructions). <input type="checkbox"/>	For office use only	
Mailing Name and Address	Taxpayer's business name		If your name, employer identification number, address or owner/officer information has changed, you must file Form DTF-95 (see instructions). If no form is enclosed, call 1 800 462-8100 to request one. From areas outside New York State, call (518) 438-1073.	Date received	
	Business name at location below (if different from business name above)			PLACE LABEL HERE	Audit use
	c/o Street or P O Box				
	City	State			
<input type="checkbox"/> Check box if refund claimed	Business telephone number ()	Business activity code number (from federal return)			
Do you do business, employ capital, own or lease property or maintain an office in the Metropolitan Commuter Transportation District (MCTD)? <input type="checkbox"/> Yes <input type="checkbox"/> No If you answer Yes, you must file Form CT-32-M.					
Complete Form CT-32 for each member of the combined group and one Form CT-32-B for the entire group. File them with this return. See Form CT-32-A-I. Instructions for Form CT-32-A.					
A. Payment — pay amount shown on line 19. Make check payable to: New York State Corporation Tax				Payment enclosed	
♦ Attach your payment here.					

Schedule I — Computation of Combined Tax and Payment of Estimated Tax

1	Allocated combined entire net income from line 64	× .09	1	•	
2	Allocated combined alternative entire net income from line 68	× .03	2	•	
3	Allocated combined taxable assets from line 72	× .0001	3	•	
4	Fixed minimum tax for parent corporation only		4		250 00
5	Combined franchise tax (amount from line 1, 2, 3 or 4, whichever is largest)		5	•	
6	Tax credits: Check forms filed and attach forms • <input type="checkbox"/> CT-43 • <input type="checkbox"/> CT-45 <input type="checkbox"/> DTF-601 <input type="checkbox"/> DTF-601.1		6		
	<input type="checkbox"/> DTF-602 <input type="checkbox"/> Servicing Mortgages (enter amount) •		7	•	
7	Net franchise tax (subtract line 6 from line 5)		8	•	
8	Combined fixed minimum tax for subsidiaries (number of taxable subsidiaries _____ x \$250)		9		
9	Total combined franchise tax (add lines 7 and 8)		10		
10	State tax surcharge (multiply line 9 by surcharge rate • _____ % ; see instructions)		11		
11	Total combined franchise tax and state tax surcharge (add lines 9 and 10)		12a		
	First installment of estimated tax for next period:		12b		
12a	If a request for extension was filed, enter amount from Form CT-5.3, line 5		13		
12b	If Form CT-5.3 was not filed and the total of line 7 and line 10 is over \$1,000, enter 25% of that total		14		
13	Total (add line 11 and line 12a or 12b)		15		
14	Total prepayments from line 80		16		
15	Balance (if line 14 is less than line 13, subtract line 14 from line 13)		17		
16	Penalty for underpayment of estimated tax (check box if Form CT-222 is attached <input type="checkbox"/> if none, enter "0")		18		
17	Interest on late payment (see instructions)		19		
18	Late filing and late payment penalties (see instructions)		20		
19	Balance due (add lines 15 through 18; enter payment on line A above)		21		
20	Overpayment (if line 13 is less than line 14, subtract line 13 from line 14)		22		
21	Amount of overpayment to be credited to next period		23		
22	Balance of overpayment (subtract line 21 from line 20)		24		
23	Amount of overpayment to be credited to Form CT-32-M				
24	Refund (subtract line 23 from line 22; check refund box above)				

Certification. I certify that this return and any attachments are to the best of my knowledge and belief true, correct and complete.

Signature of elected officer or authorized person		Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)	ID number	Date
	Address	Signature of individual preparing this return	

Mail your return to: **NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 1909, ALBANY NY 12201-1909**

Parent

Schedule J — Computation of Combined Allocation Percentages (Parts I, II and III)

Part I — Computation of Combined Entire Net Income (ENI) Allocation Percentage:

26	New York wages from Form CT-32, Schedule H, Part I, line 110, column A	26	
27	Multiply line 26, column C, by 80% (.8)	27	
28	Total wages from Form CT-32, Schedule H, Part I, line 110, column B	28	
29	Combined wage factor (divide line 27, column C, by line 28, column C)	29	
30	New York receipts from Form CT-32, Schedule H, Part I, line 124, column A	30	
31	Total receipts from Form CT-32, Schedule H, Part I, line 124, column B	31	
32	Combined receipts factor (divide line 30, column C, by line 31, column C)	32	
33	Additional combined receipts factor (enter factor from line 32, column C)	33	
34	Deposits maintained at New York branches from Form CT-32, Schedule H, Part I, line 129, column A	34	
35	Total deposits from Form CT-32, Schedule H, Part I, line 129, column B	35	
36	Combined deposits factor (divide line 34, column C, by line 35, column C)	36	
37	Additional combined deposits factor (enter factor from line 36, column C)	37	
38	Total factors (add lines 29, 32, 33, 36 and 37, column C)	38	
39	Combined ENI allocation percentage (divide line 38, column C, by five or by the number of factors)	39	

Part II — Computation of Combined Alternative Entire Net Income (AENI) Allocation Percentage:

40	New York wages from Form CT-32, Schedule H, Part II, line 134, column A	40	
41	Total wages from Form CT-32, Schedule H, Part II, line 134, column B	41	
42	Combined wage factor (divide line 40, column C, by line 41, column C)	42	
43	Combined receipts factor from line 32, column C	43	
44	Combined deposits factor from line 36, column C	44	
45	Total factors (add lines 42, 43 and 44, column C)	45	
46	Combined AENI allocation percentage (divide line 45, column C, by three or by the number of factors)	46	

Part III — Computation of Combined Taxable Assets Allocation Percentage:

47	New York wages from Form CT-32, Schedule H, Part III, line 140, column A	47	
48	Multiply line 47, column C, by 80% (.8)	48	
49	Total wages from Form CT-32, Schedule H, Part III, line 140, column B	49	
50	Combined wage factor (divide line 48, column C, by line 49, column C)	50	
51	New York receipts from Form CT-32, Schedule H, Part III, line 154, column A	51	
52	Total receipts from Form CT-32, Schedule H, Part III, line 154, column B	52	
53	Receipts factor (divide line 51, column C, by line 52, column C)	53	
54	Additional receipts factor (enter factor from line 53, column C)	54	
55	Deposits maintained at New York branches from Form CT-32, Schedule H, Part III, line 159, column A	55	
56	Total deposits from Form CT-32, Schedule H, Part III, line 159, column B	56	
57	Deposits factor (divide line 55, column C, by line 56, column C)	57	
58	Additional deposits factor (enter factor from line 57, column C)	58	
59	Total percentages (add lines 50, 53, 54, 57 and 58, column C)	59	
60	Combined taxable assets allocation percentage (divide line 59, column C, by five or by the number of percentages)	60	

Schedule K — Computation of Allocated Combined Taxable Entire Net Income

61	Entire net income from Form CT-32, Schedule B, line 60	61	
62	Allocated combined entire net income (multiply line 61, column C, by line 39, column C)	62	
63	Optional depreciation adjustment from Form CT-32, Schedule B, line 62	63	
64	Allocated combined taxable entire net income (line 62, column C, plus or minus line 63, column C)	64	

Schedule L — Computation of Allocated Combined Taxable Alternative Entire Net Income

65	Alternative entire net income from Form CT-32, Schedule C, line 68	65	
66	Allocated combined alternative entire net income (multiply line 65, column C, by line 46, column C)	66	
67	Optional depreciation adjustment from Form CT-32, Schedule C, line 70	67	
68	Allocated combined taxable alternative entire net income (line 66, column C, plus or minus line 67, column C)	68	

Schedule M — Computation of Allocated Combined Taxable Assets

69	Average value of total assets from Form CT-32, Schedule D, line 72	69	
70	Amount received from F.D.I.C. or F.S.L.I.C. from Form CT-32, Schedule D, line 73	70	
71	Combined taxable assets (subtract line 70, column C, from line 69, column C)	71	
72	Allocated combined taxable assets (multiply line 71, column C, by line 60, column C)	72	
73	Parent's issuers allocation percentage from Form CT-32, line 23	73	%

Subsidiary #1	Subsidiary #2	Subsidiary #3	Subsidiary #4	A Total	B Intercorporate Eliminations	C Combined Totals (col. A minus col. B)
---------------	---------------	---------------	---------------	------------	-------------------------------------	---

Schedule J

Part I

					•	26 •
						27 •
					•	28 •
						29 • %
					•	30 •
					•	31 •
						32 • %
						33 • %
					•	34 •
					•	35 •
						36 • %
						37 • %
						38 • %
						39 • %

Part II

					•	40 •
					•	41 •
						42 • %
						43 • %
						44 • %
						45 • %
						46 • %

Part III

					•	47 •
						48 •
					•	49 •
						50 • %
					•	51 •
					•	52 •
						53 • %
						54 • %
					•	55 •
					•	56 •
						57 • %
						58 • %
						59 • %
						60 • %

Schedule K

					•	61 •
						62 •
					•	63 •
						64 •

Schedule L

					•	65 •
						66 •
					•	67 •
						68 •

Schedule M

					•	69 •
					•	70 •
						71 •
						72 •
						73 •

List complete names and employer identification numbers for all members of this combined group. (Attach additional pages if necessary.)

Name	Employer Identification Number
Parent	
Subsidiary #1	
Subsidiary #2	
Subsidiary #3	
Subsidiary #4	

Composition of Prepayments Claimed on Schedule I, line 14

	Date Paid	Amount	Deposit Serial Number
74 Mandatory first installment	74		
75 CT-400 installments	75		
	1		
	2		
	3		
76 Payment with extension request (from Form CT-5.3, line 8) .	76		
77 Credit from prior years		77	
78 Credit from Form CT-32-M		78	
79 Total prepayments from subsidiary corporations (see instructions)		79	
80 Total prepayments (add lines 74 through 79; enter here and on line 14)		80	



CT-32-B

New York State Department of Taxation and Finance

Computation of Combined Entire Net Income

The lines of this form correspond to lines 24-60 of the individual banks' Forms CT-32. This form is an attachment to Form CT-32-A.

Name	Parent's employer identification number
------	---

24 Federal taxable income before net operating loss and special deductions	24	●	
--	----	---	--

Additions

25 Dividends and interest effectively connected with the conduct of a trade or business not included on line 24	25	●	
26 Income effectively connected with the conduct of a trade or business not included on line 24	26	●	
27 Dividends and interest not included on line 24	27	●	
28 Income taxes paid to the United States, its possessions or foreign countries deducted on federal return	28	●	
29 New York State franchise taxes deducted on federal return	29	●	
30 Total amount of federal depreciation from Schedule E, lines 78 and 80. (Corporations that have only property placed in service in New York State in tax periods beginning after December 31, 1984, or that have property subject to the limitations under IRC section 280-F, enter "0")	30	●	
31 New York State gains (losses) on disposition of property (from Schedule F, line 82)	31	●	
32 Amount deducted on your federal return as a result of a safe harbor lease	32	●	
33 Amount which would have been required to be included on your federal return except for a safe harbor lease	33	●	
34 Amount of special additional mortgage recording tax deducted on your federal return and claimed as a tax credit	34	●	
35 Any other federal deduction previously allowable as a deduction under Articles 9-B or 9-C	35	●	
36 Bad debt deduction allowed pursuant to IRC section 593(b)(1)(B)	36	●	
37 Bad debt deduction allowed pursuant to IRC section 166 for IRC section 585(c) taxpayers	37	●	
38 Twenty percent excess of bad debt deduction	38	●	
39 Other additions to federal taxable income	39	●	
40 Total additions (add lines 25 through 39)	40	●	

Subtractions

41 Interest and other expenses not deducted on federal return that are applicable to lines 25, 26 and 27	41	●	
42 Enter total amount of allowable New York State depreciation from Schedule E, line 81 (Corporations that have only property placed in service in New York State in tax periods beginning after December 31, 1984, or that have property subject to the limitations under IRC section 280-F, enter "0")	42	●	
43 Federal gains (losses) on disposition of property (from Schedule F, lines 83 and 85)	43	●	
44 Federal income or gain from installment method transactions under Articles 9-B or 9-C	44	●	
45 IRC section 78 dividends included in the computation of lines 24, 25, 26 and 27	45	●	
46 Amount included on your federal return as a result of a safe harbor lease	46	●	
47 Amount which would have been deducted on your federal return except for safe harbor lease	47	●	
48 Amount of wages not deducted on the federal return due to the jobs credit	48	●	
49 Amount of money received from the FDIC, FSLIC or RTC	49	●	
50 Interest income from subsidiary capital \$ _____ × 17% (.17)	50	●	
51a Dividend income from subsidiary capital \$ _____ × 60% (.60)	51a	●	
51b Net gains from subsidiary capital \$ _____ × 60% (.60)	51b	●	
52 Interest income on obligations of New York State, its political subdivisions or the United States \$ _____ × 22½% (.225)	52	●	
53 Adjusted eligible net income of an I.B.F. (from Schedule G, line 109)	53	●	
54 Recaptured reserve for losses on loans for IRC section 585(c) taxpayers included on line 24	54	●	
55 Recoveries of charged-off loans included on line 24 for IRC section 585 taxpayers	55	●	
56 Bad debt deduction pursuant to section 1453(h)	56	●	
57 Bad debt deduction pursuant to section 1453(i)	57	●	
58 Other subtractions from federal taxable income	58	●	
59 Total subtractions (add lines 41 through 58)	59	●	
60 Entire net income (add line 24 and line 40; subtract line 59)	60	●	

Combined Assets

61 Total combined assets	61	●	
62 New York State combined assets	62	●	

Instructions

The Bank Tax Reform Act of 1985 charged the Department of Taxation and Finance with the responsibility of providing to the Legislature a wide range of statistical data from the CT-32 and CT-32-A returns filed annually by all banking corporations doing business in New York State.

Each combined group must complete Form CT-32-B to enable the department to gather this data.

The data supplied by this schedule will not be reported for individual banks; it will be submitted in a summary format.

Combine the figures from each line of the individual Form CT-32, Schedule B, for each member of the combined group and enter on the appropriate line on Form CT-32-B.

Line 61 — Combine the figures from each individual Form CT-32, Schedule D, line 72, to obtain the total combined assets.

Line 62 — Enter the amount of combined assets located in New York State which are included in the amount on line 61.
