



CT-3360 (8/08)

Staple forms here

New York State Department of Taxation and Finance

Federal Changes to Corporate Taxable Income

Tax Law — Articles 9-A, 13, 32, and 33

For period ended

Employer identification number, File number, Legal name of corporation, Mailing name, Number and street or PO box, City, State, ZIP code, Date of notice of final federal determination, Date received, Audit.

A. Pay amount shown on line 8. Make payable to: New York State Corporation Tax. Attach your payment here. Detach all check stubs. Payment enclosed.

Computation of balance due or overpayment (see instructions)

Table with 13 rows for computation of balance due or overpayment, including deficiency of franchise tax, MTA surcharge, interest, and overpayment.

Schedule A — Computation of franchise tax deficiency or overpayment

Table with 3 rows for Schedule A: Franchise tax after federal changes, Franchise tax as last determined, Increase or decrease of franchise tax.

Schedule B — Computation of MTA surcharge deficiency or overpayment

Table with 5 rows for Schedule B: Franchise tax, MTA surcharge allocation percentage, Allocated tax, MTA surcharge, Deficiency or overpayment of MTA surcharge.

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

Authorized person and Paid preparer use only sections with signature, address, and date fields.

Attach a copy of federal Form 4549, Income Tax Examination Changes, and your amended NYS corporation franchise tax return. See instructions for where to file.

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