

A Check if: <input type="checkbox"/> 1a Consolidated return (attach Form 851) <input type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached	TYPE OR PRINT	Name OPEN SOURCE MATTERS, INC Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 4668 #88354 City or town, state, or province, country, and ZIP or foreign postal code NEW YORK, NY 10163-4668	B Employer identification number 76-0803008 C Date incorporated 01/01/2005 D Total assets (see instructions) \$ 411,429.
E Check if: (1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input type="checkbox"/> (4) <input type="checkbox"/> Address change <input type="checkbox"/>			

Income	1 a	Gross receipts or sales	1a	241,808.	
	b	Returns and allowances	1b		
	c	Balance. Subtract line 1b from line 1a			241,808.
	2	Cost of goods sold (attach Form 1125-A)			
	3	Gross profit. Subtract line 2 from line 1c			241,808.
	4	Dividends and inclusions (Schedule C, line 23, column (a))			
	5	Interest			1,442.
	6	Gross rents			
	7	Gross royalties			
	8	Capital gain net income (attach Schedule D (Form 1120))			
	9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)			
10	Other income (see instructions - attach statement)				
11	Total income. Add lines 3 through 10 ▶			243,250.	

Deductions (See instructions for limitations on deductions.)	12	Compensation of officers (see instructions - attach Form 1125-E) ▶			
	13	Salaries and wages (less employment credits)			
	14	Repairs and maintenance			
	15	Bad debts			
	16	Rents			
	17	Taxes and licenses			
	18	Interest (see instructions)			
	19	Charitable contributions			
	20	Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			8,637.
	21	Depletion			
	22	Advertising			6,268.
	23	Pension, profit-sharing, etc., plans			
	24	Employee benefit programs			
	25	Reserved for future use			
	26	Other deductions (attach statement) See Statement 1.			173,108.
	27	Total deductions. Add lines 12 through 26 ▶			188,013.
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11			55,237.
29 a	Net operating loss deduction (see instructions)	29a	55,237.		Stmt 2
b	Special deductions (Schedule C, line 24, column (c))	29b			
c	Add lines 29a and 29b			55,237.	

Tax, Refundable Credits, and Payments	30	Taxable income. Subtract line 29c from line 28. See instructions			
	31	Total tax (Schedule J, Part I, line 11)			
	32	2018 net 965 tax liability paid (Schedule J, Part II, line 12)			
	33	Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23)			
	34	Estimated tax penalty. See instructions. Check if Form 2220 is attached ▶ <input type="checkbox"/>			
	35	Amount owed. If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed			
	36	Overpayment. If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid			
37	Enter amount from line 36 you want: Credited to 2019 estimated tax ▶ Refunded ▶				

Sign Here ▶ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer JASON ROSENBAUM	Date 09/10/2019	Title TREASURER	May the IRS discuss this return with the preparer shown below? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Paid Preparer Use Only	Print/Type preparer's name DANIELLE HLATKY	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01403210
	Firm's name ▶ PIPIA COHEN HLATKY LLC	Firm's EIN ▶ 26-4268100			Phone no.
	Firm's address ▶ 195 KOSCIUSZKO ST BROOKLYN, NY 11216	347-425-9397			

Schedule C Dividends, Inclusions, and Special Deductions (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		50	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		65	
3 Dividends on certain debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		50	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Subtotal. Add lines 1 through 8. See instructions for limitations		see instructions	
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)		100	
14 Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends)			
15 Section 965(a) inclusion		see instructions	
16 a Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)		100	
b Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)			
c Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions)			
17 Global Intangible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992)			
18 Gross-up for foreign taxes deemed paid			
19 IC-DISC and former DISC dividends not included on line 1, 2, or 3			
20 Other dividends			
21 Deduction for dividends paid on certain preferred stock of public utilities			
22 Section 250 deduction (attach Form 8993)			
23 Total dividends and inclusions. Add lines 9 through 20. Enter here and on page 1, line 4			
24 Total special deductions. Add lines 9 through 22, column (c). Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)

Part I-Tax Computation

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions		
2	Income tax. See instructions		2
3	Base erosion minimum tax (attach Form 8991)		3
4	Add lines 2 and 3		4
5a	Foreign tax credit (attach Form 1118)	5a	
b	Credit from Form 8834 (see instructions)	5b	
c	General business credit (attach Form 3800)	5c	
d	Credit for prior year minimum tax (attach Form 8827)	5d	
e	Bond credits from Form 8912	5e	
6	Total credits. Add lines 5a through 5e		6
7	Subtract line 6 from line 4		7
8	Personal holding company tax (attach Schedule PH (Form 1120))		8
9a	Recapture of investment credit (attach Form 4255)	9a	
b	Recapture of low-income housing credit (attach Form 8611)	9b	
c	Interest due under the look-back method - completed long-term contracts (attach Form 8697)	9c	
d	Interest due under the look-back method - income forecast method (attach Form 8866)	9d	
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e	
f	Other (see instructions - attach statement)	9f	
10	Total. Add lines 9a through 9f		10
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31		11

Part II-Section 965 Payments (see instructions)

12	2018 net 965 tax liability paid from Form 965-B, Part II, column (k), line 2. Enter here and on page 1, line 32	12
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Part III-Payments, Refundable Credits, and Section 965 Net Tax Liability

13	2017 overpayment credited to 2018		13
14	2018 estimated tax payments		14
15	2018 refund applied for on Form 4466		15 ()
16	Combine lines 13, 14, and 15		16
17	Tax deposited with Form 7004		17
18	Withholding (see instructions)		18
19	Total payments. Add lines 16, 17, and 18		19
20	Refundable credits from:		
a	Form 2439	20a	
b	Form 4136	20b	
c	Form 8827, line 8c	20c	
d	Other (attach statement - see instructions)	20d	
21	Total credits. Add lines 20a through 20d		21
22	2018 net 965 tax liability from Form 965-B, Part I, column (d), line 2. See instructions		22
23	Total payments, credits, and section 965 net tax liability. Add lines 19, 21, and 22. Enter here and on page 1, line 33		23

Schedule K Other Information (see instructions)

1 Check accounting method: a [] Cash b [X] Accrual c [] Other (specify)
2 See the instructions and enter the:
a Business activity code no. 511130
b Business activity WEB BASED SOFTWARE M
c Product or service SOFTWARE RESOURCES
3 Is the corporation a subsidiary in an affiliated group or a parent-subsiary controlled group? [X]
4 At the end of the tax year:
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? [X]
b Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? [X]
5 At the end of the tax year, did the corporation:
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851, Affiliations Schedule? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.

Table with 4 columns: (i) Name of Corporation, (ii) Employer Identification Number (if any), (iii) Country of Incorporation, (iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. [X]

Table with 4 columns: (i) Name of Entity, (ii) Employer Identification Number (if any), (iii) Country of Organization, (iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? See sections 301 and 316 [X]
7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of the total voting power of all classes of the corporation's stock entitled to vote or at least 25% of the total value of all classes of the corporation's stock? [X]
8 Check this box if the corporation issued publicly offered debt instruments with original issue discount []
9 Enter the amount of tax-exempt interest received or accrued during the tax year \$
10 Enter the number of shareholders at the end of the tax year (if 100 or fewer)
11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here (see instructions) []
12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction reported on page 1, line 29a.) \$ 180,974.

Schedule K Other Information (continued from page 4)

Table with 3 columns: Question number, Question text, Yes, No. Contains questions 13 through 25 regarding tax receipts, UTP, Form 1099, ownership changes, asset transfers, cooperative basis, interest, and Form 8996.

Schedule L Balance Sheets per Books	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		324,991.		399,298.
2a Trade notes and accounts receivable				
b Less allowance for bad debts	()		()	
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach statement)	Stmt 3			5,917.
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (attach statement)				
10a Buildings and other depreciable assets	45,470.		45,470.	
b Less accumulated depreciation	(30,619.)	14,851.	(39,256.)	6,214.
11a Depletable assets				
b Less accumulated depletion	()		()	
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)				
b Less accumulated amortization	()		()	
14 Other assets (attach statement)				
15 Total assets		339,842.		411,429.
Liabilities and Shareholders' Equity				
16 Accounts payable		10,831.		21,273.
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach statement)				
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (attach statement)				
22 Capital stock: a Preferred stock				
b Common stock				
23 Additional paid-in capital				
24 Retained earnings - Appropriated (attach statement)				
25 Retained earnings - Unappropriated		329,011.		390,156.
26 Adjustments to shareholders' equity (attach statement)				
27 Less cost of treasury stock		()		()
28 Total liabilities and shareholders' equity		339,842.		411,429.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	61,145.	7 Income recorded on books this year not included on this return (itemize): Tax-exempt interest \$ _____	
2 Federal income tax per books			
3 Excess of capital losses over capital gains			
4 Income subject to tax not recorded on books this year (itemize): _____		See Statement 4	5,908.
5 Expenses recorded on books this year not deducted on this return (itemize): a Depreciation \$ _____ b Charitable contributions . \$ _____ c Travel and entertainment . \$ _____		8 Deductions on this return not charged against book income this year (itemize): a Depreciation \$ _____ b Charitable contributions . \$ _____	
6 Add lines 1 through 5	61,145.	9 Add lines 7 and 8	5,908.
		10 Income (page 1, line 28) - line 6 less line 9	55,237.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	329,011.	5 Distributions: a Cash	
2 Net income (loss) per books	61,145.	b Stock	
3 Other increases (itemize): _____		c Property	
		6 Other decreases (itemize): _____	
		7 Add lines 5 and 6	
4 Add lines 1, 2, and 3	390,156.	8 Balance at end of year (line 4 less line 7)	390,156.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. 179

Name(s) shown on return

Identifying number

OPEN SOURCE MATTERS, INC

76-0803008

Business or activity to which this form relates

General Depreciation and Amortization

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 main rows for Part I. Row 1: Maximum amount. Row 2: Total cost of section 179 property. Row 3: Threshold cost of section 179 property. Row 4: Reduction in limitation. Row 5: Dollar limitation for tax year. Row 6: Description of property, Cost, Elected cost. Row 7: Listed property. Row 8: Total elected cost. Row 9: Tentative deduction. Row 10: Carryover of disallowed deduction. Row 11: Business income limitation. Row 12: Section 179 expense deduction. Row 13: Carryover of disallowed deduction to 2019.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

Table with 3 rows for Part II. Row 14: Special depreciation allowance. Row 15: Property subject to section 168(f)(1) election. Row 16: Other depreciation (including ACRS).

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 2 rows for Section A. Row 17: MACRS deductions for assets placed in service in tax years beginning before 2018. Row 18: If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.

Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-g: 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year property. Rows h-i: Residential rental property, Nonresidential real property.

Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 20a-d: Class life 12-year, 30-year, 40-year.

Part IV Summary (See instructions.)

Table with 3 rows for Part IV. Row 21: Listed property. Row 22: Total. Row 23: For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?		<input type="checkbox"/> Yes <input type="checkbox"/> No		24b If "Yes," is the evidence written?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No										
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2018 tax year (see instructions):					
43 Amortization of costs that began before your 2018 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Form 1120, Page 1 Detail

Line 26 - Summary of Travel and Meals

CONFERENCES, SEMINARS, SUMMITS AND EVENTS	69,065.

Total	69,065.
	=====

Line 26 - Other deductions

Travel and meals	69,065.
BANK CHARGES	733.
LEGAL EXPENSES	15,049.
ACCOUNTING EXPENSES	17,782.
CONFERENCES AND SEMINARS- JOOMLA DAY EVENTS	31,834.
EVENT SUPPORT	5,999.
POSTAGE AND DELIVERY	357.
CODING AND DEVELOPMENT	24,868.
EQUIPMENT MAINTENANCE AND STORAGE	2,661.
PROCESSING FEES	807.
INSURANCE	249.
MAILING SERVICES	1,270.
PRINTING AND REPRODUCTION	2,434.

Total	173,108.
	=====

Form 1120, Page 1 Detail

Line 29a - Non-SRLY NOL deduction

Year ending	Original NOL	Amount Available	Amount Used	Converted Contributions	Carryover to Next year
06/30/2009	10,279.				
06/30/2014	159,288.	56,314.	55,237.		1,077.
06/30/2017	38,178.	38,178.			38,178.
06/30/2018	86,482.	86,482.			86,482.
Total	294,227.	180,974.	55,237.		125,737.

Form 1120, Page 6 Detail

Sch L, Line 6 -
Other current assets

NOTE 1

Total

Beginning

Ending

5,917.

5,917.

Form 1120, Page 6 Detail

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Sch M-1, Line 7 - Income recorded on books not included on return

REFUND ON FEDERAL TAXES PAID	5,908.

Total	5,908.
	=====



Department of Taxation and Finance
General Business Corporation Franchise Tax Return
 Tax Law - Article 9-A

CT-3

Caution: This form must be used **only** for tax periods beginning on or after January 1, 2018. If you use it for any prior periods, the return will **not** be processed and will **not** be considered timely filed. As a result, penalties and interest may be incurred.

See instructions, Form CT-3-I, before completing return.

All filers must enter tax period:

Final return <input type="checkbox"/>	Amended return <input type="checkbox"/>	beginning <input type="text" value="07-01-18"/>		ending <input type="text" value="06-30-19"/>	
Employer identification number (EIN) 76-0803008	File number AA9	Business telephone number 347-425-9397	If you claim an overpayment, mark an X in the box <input checked="" type="checkbox"/>		
Legal name of corporation OPEN SOURCE MATTERS, INC			Trade name/DBA		
Mailing name (if different from legal name above) c/o			State or country of incorporation NY		
Mailing address number and street or PO box PO BOX 4668 #88354		Date of incorporation 01-01-05	Foreign corporations: date began business in NYS		
City NEW YORK	State NY	ZIP code 10163-4668	Country (if not United States)	For office use only	
Principal business activity in NYS WEB BASED SOFTWARE M		NAICS business code number (from NYS Pub 910) 511130			
If address/phone above is new, mark an X in the box <input type="checkbox"/> If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See <i>Business information</i> in Form CT-1.					

A. Pay amount shown on Part 2, line 23c. Make payable to: New York State Corporation Tax Attach your payment here. (Detach all check stubs; see instructions for details.)	<input type="checkbox"/> Payment enclosed
B. Are you subject to the metropolitan transportation business tax (MTA surcharge)? (see instructions; mark an X in the appropriate box).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C. If you are disclaiming tax liability in New York State based on Public Law 86-272, mark an X in the box (see instructions).	<input checked="" type="checkbox"/>
D. Do you have an interest in any partnerships? (mark an X in the appropriate box). If Yes, enter the name(s) and EIN(s) on Form CT-60 and attach it to your return.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Third - party designee (see instructions)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Designee's name (print) DANIELLE HLATKY	Designee's phone number
	Designee's e-mail address		PIN <input type="text" value="3264"/>

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

Authorized person	Printed name of authorized person JASON ROSENBAUM	Signature of authorized person	Official title TREASURER
	E-mail address of authorized person	Telephone number	Date 09-10-19
Paid preparer use only (see instr.)	Firm's name (or yours if self-employed) PIPIA COHEN HLATKY LLC	Firm's EIN 26-4268100	Preparer's PTIN or SSN P01403210
	Signature of individual preparing this return	Address 195 KOSCIUSZKO ST BROOKLYN, NY 11216	
	E-mail address of individual preparing this return	Preparer's NYTPRIN or 11419808	Excl. code Date

See instructions for where to file.

Content of Form CT-3

Part 1 - General corporate information	Part 5 - Computation of investment capital for the current tax year
Part 2 - Computation of balance due or overpayment	Part 6 - Computation of business apportionment factor
Part 3 - Computation of tax on business income base	Part 7 - Summary of tax credits claimed
Part 4 - Computation of tax on capital base	

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Part 1 - General corporate information

Section A - Qualification for preferential tax rates - If you are a corporation as identified in this section and qualify for preferential tax rates, mark an **X** in the boxes that apply to you (see instructions).

- 1 A qualified emerging technology company (QETC) for purposes of the lower tax rates, capital base tax cap, and fixed dollar minimum tax amounts 1
- 2 A qualified New York manufacturer based on the principally engaged test for purposes of the lower business income base tax rate and fixed dollar minimum tax amounts 2
- 3 A qualified New York manufacturer based on the principally engaged test for purposes of the lower capital base tax rate and capital base tax cap 3
- 4 A qualified New York manufacturer based on the significant employment and property test for purposes of the lower tax rates, capital base tax cap, and fixed dollar minimum tax amounts 4
- 5 Claiming cooperative housing corporation status for the lower capital base tax rate 5
- 6 A small business eligible for the capital base tax exception 6
If you marked this box, complete line 6a; also mark the box at line 6b or 6c, if applicable.
- 6a Total capital contributions 6a
- 6b **Small business taxpayers only:** you are also a QETC 6b
- 6c **Small business taxpayers only:** you are also a qualified New York manufacturer 6c
- 7 A qualified entity of a New York State innovation hot spot that operates solely within such New York State innovation hot spot, and you have elected to be subject only to the fixed dollar minimum tax base. 7

Section B - New York State information (see instructions)

- 1 Number of New York State employees 1
- 2 Wages paid to New York State employees 2
- 3 Number of business establishments in New York State 3
- 4 If you have an interest in, or have rented, real property in New York State, mark an **X** in the box 4
- 5 If you are claiming an exception to the related member expense addback under Tax Law §208.9(o)(2)(B), mark an **X** in the box 5
- 5a If you marked the line 5 box, use line 5a to report the applicable exception number (1-4) and the amount of royalty payments. 5a Number Amount
- 6 If you are not protected by Public Law 86-272 and are subject to tax **solely** as a result of deriving receipts in New York State, mark an **X** in the box 6

Section C - Filing information

- 1 **Federal return filed** - you must mark an **X** in one box and attach a complete copy of your federal return
1120 • 1120 consolidated • 1120-REIT or 1120-RIC 1120S • 1120F • 1120-H
- 2 **Amended return** - If you marked the amended return box on page 1, then for any item(s) that apply, mark an **X** in the box and attach documentation: Failure to meet investment capital holding period •
Final federal determination • Date of determination NOL carryback • Capital loss carryback . . • 1139 • 1120X •
- 2a Enter the tax due amount from your most recently filed New York State return for this tax period • 2a
- 3 **Required attachments** - For all forms, other than tax credit claim forms, that are attached to this return, mark an **X** in the applicable box(es)
CT-3.1 • CT-3.2 • CT-3.3 • CT-3.4 • CT-60 • CT-225 • Other (identify): _____ •
- 4 If you are claiming tax credits, enter the number of tax credit forms attached to this return. Where multiple forms are filed for the same credit, count **each** form filed. 4
- 5 If you filed federal Form 1120F and you have effectively connected income (ECI), mark an **X** in the box 5
- 6 Were you required to report any nonqualified deferred compensation, as required by Internal Revenue Code (IRC) §457A, on your 2018 federal return? (see instructions) Yes • No •
- 7 If you are a foreign corporation computing your tax taking into account **only** your distributive shares from **multiple** limited partnerships, mark an **X** in the box and file Form CT-60 7



Part 2 - Computation of balance due or overpayment

Largest of three tax bases, minus credits

1a	Business income base tax (from Part 3, line 20)	•	1a	270.	
1b	Capital base tax (from Part 4, line 15; see instructions)	•	1b	270.	
1c	Fixed dollar minimum tax (see instr) • <input type="text" value="New York receipts 241,808."/>	•	1c	75.	
2	Tax due (enter the amount from line 1a, 1b, or 1c, whichever is largest; see instructions)	•	2	270.	
3	Tax credits used (from Part 7, line 2; see instructions)	•	3		
4	Tax due after credits (subtract line 3 from line 2; if line 3 is more than line 2, enter 0)	•	4	270.	
5					
6					
7					

Penalties and interest

8	Estimated tax penalty (see instructions; if Form CT-222 is attached, mark an X in the box) <input type="checkbox"/>	•	8		
9	Interest on late payment (see instructions)	•	9		
10	Late filing and late payment penalties (see instructions)	•	10		
11	Total penalties and interest (add lines 8, 9, and 10)	•	11		

Voluntary gifts/contributions (see instructions)

12a	Return a Gift to Wildlife	•	12a		
12b	Breast Cancer Research and Education Fund	•	12b		
12c	Prostate Cancer Research, Detection, and Education Fund	•	12c		
12d	9/11 Memorial	•	12d		
12e	Volunteer Firefighting & EMS Recruitment Fund	•	12e		
12f	Veterans Remembrance	•	12f		
12g	Women's Cancers Education and Prevention Fund	•	12g		
12h	New York State Veterans' Homes	•	12h		
12i	Love Your Library Fund	•	12i		
12j	Lupus Education and Prevention Fund	•	12j		
12k	Military Family Relief Fund	•	12k		
13	Total voluntary gifts/contributions (add lines 12a through 12k)	•	13		
14	Total amount due (add lines 4, 11, and 13)	•	14	270.	

Prepayments

15	Mandatory first installment from Form CT-300 (see instructions)	•	15		
16	Second installment (from Form CT-400)	•	16		
17	Third installment (from Form CT-400)	•	17		
18	Fourth installment (from Form CT-400)	•	18		
19	Payment with extension request (from Form CT-5, line 5)	•	19		
20	Overpayment credited from prior years (see instr.) <input type="text" value="Period"/>	•	20	3,192.	
21	Overpayment credited from CT-3-M <input type="text" value="Period"/>	•	21		
22	Total prepayments (add lines 15 through 21; see instructions)	•	22	3,192.	

Payment due or overpayment to be credited/refunded (see instructions)

23a	Underpayment	•	23a		
23b	Additional amount for 2019 MFI	•	23b		
23c	Balance due	•	23c		
24a	Excess prepayments	•	24a	2,922.	
24b	Amount previously credited to 2019 MFI	•	24b		
24c	Overpayment	•	24c	2,922.	
25	Amount of overpayment to be credited to next period	•	25	2,922.	
26	Balance of overpayment available (subtract line 25 from line 24c)	•	26		
27	Amount of overpayment to be credited to Form CT-3-M	•	27		
28	Balance of overpayment to be refunded (subtract line 27 from line 26)	•	28		
29	Unused tax credits to be refunded	•	29		
30	Unused tax credits applied to next period	•	30		

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Part 3 - Computation of tax on business income base

1	Federal taxable income (FTI) before net operating loss (NOL) and special deductions (see instructions)	1	55,237.
2	Additions to FTI (from Form CT-225, line 5)	2	
3	Add lines 1 and 2	3	55,237.
4	Subtractions from FTI (from Form CT-225, line 10)	4	
5	Subtract line 4 from line 3	5	55,237.
6	Subtraction modification for qualified banks (from Form CT-3.2, Schedule A, line 1; see instructions)	6	
7	Entire net income (ENI) (subtract line 6 from line 5)	7	55,237.
8	Investment and other exempt income (from Form CT-3.1, Schedule D, line 1)	8	
9	Subtract line 8 from line 7	9	55,237.
10	Excess interest deductions attributable to investment income, investment capital, and other exempt income (from Form CT-3.1, Schedule D, line 2)	10	
11	Business income (add lines 9 and 10)	11	55,237.
12	Addback of income previously reported as investment income (from Form CT-3.1, Schedule F, line 6; if zero, enter 0; see instructions)	12	
13	Business income after addback (add lines 11 and 12)	13	55,237.
14	Business apportionment factor (from Part 6, line 55)	14	1.000000
15	Apportioned business income after addback (multiply line 13 by line 14)	15	55,237.
16	Prior net operating loss conversion subtraction (from Form CT-3.3, Schedule C, line 4)	16	51,077.
17	Subtract line 16 from line 15	17	4,160.
18	NOL deduction (from Form CT-3.4, line 6)	18	
19	Business income base (subtract line 18 from line 17)	19	4,160.
20	Business income base tax (multiply line 19 by the appropriate business income tax rate from the tax rates schedule in Form CT-3-I; enter here and on Part 2, line 1a; see instructions)	20	270.

Note: If you make any entry on line 2, 4, 6, 8, 10, 12, 16, or 18, you **must** complete and file the appropriate attachment form, or any tax benefit claimed may be disallowed, or there may be a delay in receiving such benefit. In addition, all amounts entered on these lines must be entered as positive numbers.

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Part 4 - Computation of tax on capital base (see instructions)

		A Beginning of year	B End of year	C Average value
1	Total assets from federal return	339,842.	411,429.	375,636.
2	Real property and marketable securities included on line 1			
3	Subtract line 2 from line 1	339,842.	411,429.	375,636.
4	Real property and marketable securities at fair market value.			
5	Adjusted total assets (add lines 3 and 4)	339,842.	411,429.	375,636.
6	Total liabilities	10,831.	21,273.	16,052.
7	Total net assets (subtract line 6, column C, from line 5, column C)			359,584.
8	Investment capital (from Part 5, line 19; if zero or less, enter 0)			
9	Business capital (subtract line 8 from line 7).			359,584.
10	Addback of capital previously reported as investment capital (from Part 5, line 20, column C; if zero or less, enter 0)			
11	Total business capital (add lines 9 and 10)			359,584.
12	Business apportionment factor (from Part 6, line 55).			1.000000
13	Apportioned business capital (multiply line 11 by line 12)			359,584.
14	New small business (if in first two tax years, mark an X in one box) Year one <input type="checkbox"/> Year two <input type="checkbox"/>			
15	Capital base tax (multiply line 13 by the appropriate capital base tax rate from the tax rates schedule in Form CT-3-I; enter here and on Part 2, line 1b)			270.

Part 5 - Computation of investment capital for the current tax year (see instructions)

	A Average fair market value	B Liabilities attributable to column A amount	C Net average value (column A - column B)
16	Total capital that generates income claimed to not be taxable by New York under the U.S. Constitution (from Form CT-3.1, Schedule E, line 1)		
17	Total of stocks actually held for more than one year (from Form CT-3.1, Schedule E, line 2)		
18	Total of stocks presumed held for more than one year (from Form CT-3.1, Schedule E, line 3)		
19	Total investment capital for the current year (Add column C lines 16, 17, and 18; enter the result here and on Part 4, line 8. If zero or less, enter 0.)		

Addback of capital previously reported as investment capital

	A Average fair market value as previously reported	B Liabilities attributable to column A amount as previously reported	C Net average value as previously reported (column A - column B)
20	Total of stocks previously presumed held for more than one year, but did not meet the holding period (from Form CT-3.1, Schedule F, line 1; enter here and on Part 4, line 10)		

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Part 6 - Computation of business apportionment factor (see instructions)

Mark an **X** in this box only if you have **no receipts** required to be included in the denominator of the apportionment factor (see instr.) • **8**

		A - New York State	B - Everywhere
Section 210-A.2			
1	Sales of tangible personal property		
2	Sales of electricity		
3	Net gains from sales of real property		
Section 210-A.3			
4	Rentals of real and tangible personal property		
5	Royalties from patents, copyrights, trademarks, and similar intangible personal property		
6	Sales of rights for certain closed-circuit and cable TV transmissions of an event.		
Section 210-A.4			
7	Sale, licensing, or granting access to digital products		
Section 210-A.5(a)(1) - Fixed percentage method for qualified financial instruments (QFIs)			
8	To make this irrevocable election, mark an X in the box (see instructions).		<input type="checkbox"/> 8
Section 210-A.5(a)(2) - Mark an X in each box that is applicable (see line 8 instructions)			
Section 210-A.5(a)(2)(A)			
9	Interest from loans secured by real property		
10	Net gains from sales of loans secured by real property		
11	Interest from loans not secured by real property (QFI • <input type="checkbox"/>)		
12	Net gains from sales of loans not secured by real property (QFI • <input type="checkbox"/>)		
Section 210-A.5(a)(2)(B) (QFI • <input type="checkbox"/>)			
13	Interest from federal debt		
14			
15	Interest from NYS and its political subdivisions debt		
16	Net gains from federal, NYS, and NYS political subdivisions debt		
17	Interest from other states and their political subdivisions debt		
18	Net gains from other states and their political subdivisions debt		
Section 210-A.5(a)(2)(C) (QFI • <input type="checkbox"/>)			
19	Interest from asset-backed securities and other government agency debt		
20	Net gains from government agency debt or asset-backed securities sold through an exchange.		
21	Net gains from all other asset-backed securities		
Section 210-A.5(a)(2)(D) (QFI • <input type="checkbox"/>)			
22	Interest from corporate bonds		
23	Net gains from corporate bonds sold through broker/dealer or licensed exchange.		
24	Net gains from other corporate bonds.		
Section 210-A.5(a)(2)(E)			
25	Net interest from reverse repurchase and securities borrowing agreements		
Section 210-A.5(a)(2)(F)			
26	Net interest from federal funds		
Section 210-A.5(a)(2)(I) (QFI • <input type="checkbox"/>)			
27	Net income from sales of physical commodities		
Section 210-A.5(a)(2)(J) (QFI • <input type="checkbox"/>)			
28	Marked to market net gains		
Section 210-A.5(a)(2)(H) (QFI • <input type="checkbox"/>)			
210-A.5(a)(2)(G) (QFI • <input type="checkbox"/>)			
29	Interest from other financial instruments		
30	Net gains and other income from other financial instruments		

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Part 6 - Computation of business apportionment factor *(continued)*

	A - New York State	B - Everywhere
Section 210-A.5(b)		
31 Brokerage commissions ● 31		
32 Margin interest earned on behalf of brokerage accounts ● 32		
33 Fees for advisory services for underwriting or management of underwriting ● 33		
34 Receipts from primary spread of selling concessions ● 34		
35 Receipts from account maintenance fees. ● 35		
36 Fees for management or advisory services ● 36		
37 Interest from an affiliated corporation. ● 37		
Section 210-A.5(c)		
38 Interest, fees, and penalties from credit cards ● 38		
39 Service charges and fees from credit cards. ● 39		
40 Receipts from merchant discounts ● 40		
41 Receipts from credit card authorizations and settlement processing. . . . ● 41		
42 Other credit card processing receipts. ● 42		
Section 210-A.5(d)		
43 Receipts from certain services to investment companies ● 43		
Section 210-A.6		
44 Receipts from railroad and trucking business. ● 44		
Section 210-A.6-a		
45 Receipts from the operation of vessels ● 45		
Section 210-A.7		
46 Receipts from air freight forwarding. ● 46		
47 Receipts from other aviation services ● 47		
Section 210-A.8		
48 Advertising in newspapers or periodicals. ● 48		
49 Advertising on television or radio ● 49		
50 Advertising via other means. ● 50		
Section 210-A.9		
51 Transportation or transmission of gas through pipes. ● 51		
Section 210-A.10		
52 Receipts from other services/activities not specified. ● 52		
Section 210-A.11		
53 Discretionary adjustments ● 53		
Total receipts		
54 Add lines 1 through 53 in columns A and B ● 54		

Calculation of business apportionment factor

55 New York State business apportionment factor *(divide line 54, column A by line 54, column B and enter the resulting decimal here; round to the sixth decimal place after the decimal point; see instructions)* ● 55 1.000000

Enter line 55 on Part 3, *Computation of tax on business income base*, line 14; and on Part 4, *Computation of tax on capital base*, line 12.



Part 7 - Summary of tax credits claimed

1 Have you been convicted of an offense, or are you an owner of an entity convicted of an offense, defined in New York State Penal Law, Article 200 or 496, or section 195.20? (see Form CT-1; mark an X in one box) 1 Yes No X

Enter in the appropriate box below the amount of each tax credit **used** to reduce the tax due shown on Part 2, line 2, and attach the corresponding properly completed claim form. The amount of credit to enter is computed on each credit form and carried to this section.

CT-37		CT-606		CT-649	
CT-40		CT-607		CT-650	
CT-41		CT-611		DTF-621	
CT-43		CT-611.1		DTF-622	
CT-44		CT-611.2		DTF-624	
CT-46		CT-612		DTF-630	
CT-47		CT-613		Other credits •	
CT-236		CT-631			
CT-238		CT-633			
CT-239		CT-634			
CT-241		CT-635			
CT-242		CT-636			
CT-243		CT-637			
CT-246		CT-638			
CT-248		CT-639			
CT-249		CT-640			
CT-250		CT-641			
CT-261		CT-642			
CT-501		CT-643			
CT-601		CT-644			
CT-602		CT-645			
CT-603		CT-646			
CT-604		CT-647			
CT-605		CT-648			

2 Total tax credits claimed above (enter here and on Part 2, line 3; attach appropriate form for each credit claimed) 2

3 Total tax credits claimed that are refund eligible (see instructions) 3

4a If you claimed the QEZE tax reduction credit and you had a 100% zone allocation factor, mark an X in the box 4a

4b If you claimed the tax-free NY area tax elimination credit, and you had a 100% area allocation factor, mark an X in the box 4b

4c If you claimed the tax-free NY area excise tax on telecommunications credit and you had a 100% area allocation factor, mark an X in the box 4c





Prior Net Operating Loss Conversion (PNOLC) Subtraction

CT-3.3

Legal name of corporation OPEN SOURCE MATTERS, INC	Employer identification number (EIN) 76-0803008
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Attach to Form CT-3 or CT-3-A. All filers complete all schedules.

CT-3-A filers: Enter the total number of members in the combined group in the current tax period
(see instructions)

Schedule A - PNOLC subtraction pool detail and tax period allotment (see instructions)

All filers: Complete all information each tax period.

CT-3-A filers: Enter all requested information in each column for each combined member that was in the group for the tax period.

A CT-3 filer or CT-3-A combined members				B Base year end date
	Name	EIN	If non-taxpayer, mark an X	
A	OPEN SOURCE MATTERS, INC	76-0803008	<input type="checkbox"/>	12-31-14
B			<input type="checkbox"/>	
C			<input type="checkbox"/>	
D			<input type="checkbox"/>	
E			<input type="checkbox"/>	
F			<input type="checkbox"/>	
G			<input type="checkbox"/>	
H			<input type="checkbox"/>	
I			<input type="checkbox"/>	
J			<input type="checkbox"/>	

	C Tax period count	D Unabsorbed net operating loss (UNOL)	E PNOLC subtraction pool	F PNOLC subtraction allotment %	G Tax period PNOLC subtraction allotment (column E x column F)	H Remaining PNOLC subtraction pool [column E - (column C x column G)]
A	5	79,642.	79,642.	100.		
B						
C						
D						
E						
F						
G						
H						
I						
J						
Totals from attached sheet(s)						
1 Totals	1	79,642.	79,642.			



Schedule B - Overall limitation on PNOLC subtraction *(All filers must complete Schedule B)*

1	Apportioned business income after addback for the current tax period <i>(from Form CT-3 or CT-3-A, Part 3, line 15; if zero or less, enter 0 on line 5)</i>	1	55,237.
2	Multiply line 1 by your appropriate <i>business income base</i> tax rate for the current tax period from the <i>Tax rates schedule</i> table 1, 2, 3, or 4 in Form CT-3-I or CT-3-A-I <i>(round the result up to the next highest whole dollar)</i>	2	3,590.
3	Greater of the capital base tax or the fixed dollar minimum tax for the current tax period <i>(from Form CT-3 or CT-3-A, Part 2, line 1b or 1c)</i>	3	270.
4	Subtract line 3 from line 2 <i>(if zero or less, enter 0)</i> ,	4	3,320.
5	Maximum amount of the PNOLC subtraction to be deducted in the current tax period <i>(if line 4 is zero, enter 0; otherwise, divide line 4 by the same tax rate used for line 2)</i>	5	51,077.

Schedule C - Computation of PNOLC subtraction used and unused amount carried forward
(see instructions)

1	Tax period PNOLC subtraction allotment <i>(from Schedule A, line 1, column G)</i>	1	
2	Unused PNOLC subtraction carried forward from prior tax period <i>(see instructions)</i> ,	2	79,642.
3	PNOLC subtraction available for use this tax period <i>(add lines 1 and 2)</i>	3	79,642.
4	PNOLC subtraction used in the current tax period <i>(see instructions)</i> ,	4	51,077.
5	Unused PNOLC subtraction to be carried forward <i>(see instructions)</i> ,	5	28,565.
6	Remaining PNOLC subtraction pool <i>(from Schedule A, line 1, column H)</i> ,	6	
7	Unexhausted PNOLC subtraction <i>(add lines 5 and 6)</i>	7	28,565.

Note: You **must** complete and attach Form CT-3.3 to Form CT-3 or CT-3-A for each tax period for which you or any member of the combined group claim a PNOLC subtraction or carry a PNOLC subtraction balance.

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**Schedule B - New members included in the combined group for the current tax period;
Form CT-3-A filers only (see instructions)**

A Name	B EIN	C NOL available at the beginning of this tax period	D Beginning date of this tax period (mm-dd-yy)	E Ending date of this tax period (mm-dd-yy)

**Schedule C - Former members not included in the combined group for the current tax period;
Form CT-3-A filers only (see instructions)**

A Name	B EIN	C NOL available at the beginning of this tax period	D Beginning date of this tax period (mm-dd-yy)	E Ending date of this tax period (mm-dd-yy)

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CT-3-M

Department of Taxation and Finance

General Business Corporation MTA Surcharge Return

Tax Law - Article 9-A, Section 209-B

Caution: This form must be used **only** for tax periods beginning on or after January 1, 2018. If you use it for any prior periods, the return will **not** be processed and will **not** be considered timely filed. As a result, penalties and interest may be incurred.

Amended return All filers must enter tax period: beginning ending

Employer identification number (EIN) 76-0803008	File number AA9	Business telephone number 347-425-9397	If you claim an overpayment, mark an X in the box <input checked="" type="checkbox"/>
Legal name of corporation OPEN SOURCE MATTERS, INC		Trade name/DBA	
Mailing name (if different from legal name above) c/o		State or country of incorporation NY	Date received (for Tax Department use only)
Number and street or PO box PO BOX 4668 #88354		Date of incorporation 01-01-05	
City NEW YORK	State NY	ZIP code 10163-4668	Foreign corporations: date began business in NYS

If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See *Business information* in Form CT-1.

File this form with your Form CT-3 or CT-3-A. Before completing this return, see Form CT-3-M-I, *Instructions for Form CT-3-M*.

A. Pay amount shown on line 12. Make payable to: New York State Corporation Tax Attach your payment here. Detach all check stubs. (See instructions for details.)	A	Payment enclosed
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Computation of MTA surcharge

1	New York State franchise tax (see instructions)	1	270.
2	MCTD apportionment percentage from line 82	2	100.0000 %
3	Apportioned franchise tax (multiply line 1 by line 2)	3	270.
4	MTA surcharge (multiply line 3 by 28.6% (.286))	4	77.
5a			
5b			
6			
7	Total prepayments from line 91	7	689.
8a	Underpayment (subtract line 7 from line 4)	8a	
8b	Additional amount for 2019 MFI (see instructions)	8b	
8c	Total of lines 8a and 8b	8c	
9	Estimated tax penalty (see instructions; mark an X in the box if Form CT-222 is attached) <input type="checkbox"/>	9	
10	Interest on late payment (see instructions for Form CT-3 or CT-3-A)	10	
11	Late filing and late payment penalties (see instructions for Form CT-3 or CT-3-A)	11	
12	Balance due (add lines 8c through 11 and enter here; enter the payment amount on line A above)	12	
13a	Excess prepayments (subtract line 4 from line 7)	13a	612.
13b	Amount previously credited to 2019 MFI (see instructions)	13b	
13c	Overpayment (subtract line 13b from line 13a)	13c	612.
14	Amount of overpayment to be credited to New York State franchise tax (see instructions)	14	
15	Amount of overpayment to be credited to MTA surcharge for next period (see instructions)	15	612.
16	Amount of overpayment to be refunded (see instructions)	16	

Schedule A - Computation of MCTD apportionment percentage (see instructions)

Average value of property (see instructions)	A MCTD	B New York State
17 Real estate owned (see instructions)	17	
18 Real estate rented (see instructions)	18	
19 Inventories owned	19	
20 Tangible personal property owned (see instructions)	20	
21 Tangible personal property rented (see instructions)	21	
22 Total (add lines 17 through 21 in columns A and B)	22	
23 MCTD property factor (divide line 22, column A, by line 22, column B)	23	%

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Receipts from: (see instructions for lines 24 through 76)		A MCTD	B New York State
Section 210-A.2			
24	Sales of tangible personal property	24	
25	Sales of electricity	25	
26	Net gains from sales of real property	26	
Section 210-A.3			
27	Rentals of real and tangible personal property	27	
28	Royalties from patents, copyrights, trademarks, and similar intangible personal property.	28	
29	Sales of rights for certain closed-circuit and cable TV transmissions of an event	29	
Section 210-A.4			
30	Sale, licensing, or granting access to digital products	30	
Section 210-A.5(a)(1) - Fixed percentage method for qualified financial instruments (QFIs)			
31	If this irrevocable election was made on Form CT-3 or CT-3-A, mark an X in the box (see Form CT-3-I or CT-3-A-I, line 8 instructions) . . .		<input type="checkbox"/> 31 <input type="checkbox"/>
Section 210-A.5(a)(2) – Mark an X in each box that is applicable (see Form CT-3-I or CT-3-A-I line 8 instructions)			
Section 210-A.5(a)(2)(A)			
32	Interest from loans secured by real property	32	
33	Net gains from sales of loans secured by real property.	33	
34	Interest from loans not secured by real property (QFI <input type="checkbox"/>)	34	
35	Net gains from sales of loans not secured by real property (QFI <input type="checkbox"/>)	35	
Section 210-A.5(a)(2)(B) (QFI <input type="checkbox"/>)			
36	Interest from federal debt	36	
37			
38	Interest from NYS and its political subdivisions debt	38	
39	Net gains from federal, NYS, and NYS political subdivisions debt	39	
40	Interest from other states and their political subdivisions debt	40	
41	Net gains from other states and their political subdivisions debt	41	
Section 210-A.5(a)(2)(C) (QFI <input type="checkbox"/>)			
42	Interest from asset-backed securities and other government agency debt	42	
43	Net gains from government agency debt or asset-backed securities sold through an exchange	43	
44	Net gains from all other asset-backed securities	44	
Section 210-A.5(a)(2)(D) (QFI <input type="checkbox"/>)			
45	Interest from corporate bonds.	45	
46	Net gains from corporate bonds sold through broker/dealer or licensed exchange	46	
47	Net gains from other corporate bonds	47	
Section 210-A.5(a)(2)(E)			
48	Net interest from reverse repurchase and securities borrowing agreements	48	
Section 210-A.5(a)(2)(F)			
49	Net interest from federal funds	49	
Section 210-A.5(a)(2)(I) (QFI <input type="checkbox"/>)			
50	Net income from sales of physical commodities	50	
Section 210-A.5(a)(2)(J) (QFI <input type="checkbox"/>)			
51	Marked to market net gains	51	
Section 210-A.5(a)(2)(H) (QFI <input type="checkbox"/>)			
210-A.5(a)(2)(G) (QFI <input type="checkbox"/>)			
52	Interest from other financial instruments	52	
53	Net gains and other income from other financial instruments	53	

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Receipts from: (continued)		A MCTD	B New York State
Section 210-A.5(b)			
54	Brokerage commissions	54	
55	Margin interest earned on behalf of brokerage accounts	55	
56	Fees for advisory services for underwriting or management of underwriting	56	
57	Receipts from primary spread of selling concessions	57	
58	Receipts from account maintenance fees	58	
59	Fees for management or advisory services	59	
60	Interest from an affiliated corporation	60	
Section 210-A.5(c)			
61	Interest, fees, and penalties from credit cards	61	
62	Service charges and fees from credit cards	62	
63	Receipts from merchant discounts	63	
64	Receipts from credit card authorizations and settlement processing	64	
65	Other credit card processing receipts	65	
Section 210-A.5(d)			
66	Receipts from certain services to investment companies	66	
Section 210-A.6			
67	Receipts from railroad and trucking business	67	
Section 210-A.6-a			
68	Receipts from the operation of vessels	68	
Section 210-A.7			
69	Receipts from air freight forwarding	69	
70	Receipts from other aviation services	70	
Section 210-A.8			
71	Advertising in newspapers or periodicals	71	
72	Advertising on television or radio	72	
73	Advertising via other means	73	
Section 210-A.9			
74	Transportation or transmission of gas through pipes	74	
Section 210-A.10			
75	Receipts from other services/activities not specified	75	
Section 210-A.11			
76	Discretionary adjustments	76	
77	Total (add lines 24 through 76 in columns A and B)	77	
78	MCTD receipts factor (divide line 77, column A, by line 77, column B)		78 %
Payroll		A MCTD	B New York State
79	Wages and other compensation of employees except general executive officers	79	
80	MCTD payroll factor (divide line 79, column A, by line 79, column B)		80 %
81	Total MCTD factors (add lines 23, 78, and 80)		81 %
82	MCTD apportionment percentage (Divide line 81 by three; if a factor is missing, see instructions. Enter here and on line 2.)		82 100.0000%

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Composition of prepayments claimed on line 7 (see instructions)		Date paid	Amount
83	Mandatory first installment from Form CT-300 (see instructions)	83	
84	Second installment from Form CT-400	84	
85	Third installment from Form CT-400.	85	
86	Fourth installment from Form CT-400	86	
87	Payment with extension request from Form CT-5, line 10, or Form CT-5.3, line 13	87	
88	Overpayment credited from prior years (see instructions).	88	689.
89	Add lines 83 through 88.	89	689.
90	Overpayment credited from Form CT- _____ Period _____	90	
91	Total prepayments (add lines 89 and 90; enter here and on line 7).	91	689.

Third - party designee <i>(see instructions)</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Designee's name (print) DANIELLE HLATKY	Designee's phone number
	Designee's e-mail address		PIN 3264

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

Authorized person	Printed name of authorized person JASON ROSENBAUM	Signature of authorized person	Official title TREASURER
	E-mail address of authorized person		Telephone number Date 09-10-19
Paid preparer use only <i>(see instr.)</i>	Firm's name (or yours if self-employed) PIPIA COHEN HLATKY LLC	Firm's EIN 26-4268100	Preparer's PTIN or SSN P01403210
	Signature of individual preparing this return	Address 195 KOSCIUSZKO ST BROOKLYN, NY 11216	
	E-mail address of individual preparing this return	Preparer's NYTPRIN or 11419808	Excl. code Date

See instructions for where to file.

