

Form **8879-S****IRS e-file Signature Authorization for Form 1120S**

OMB No. 1545-0123

Department of the Treasury  
Internal Revenue Service  
Name of corporation

► Do not send to the IRS. Keep for your records.

► Information about Form 8879-S and its instructions is at [www.irs.gov/form8879s](http://www.irs.gov/form8879s).

For calendar year 2014, or tax year beginning , and ending

**2014**Employer identification number  
**13-2804148****VERATEX INC****Part I Tax Return Information (Whole dollars only)**

1	Gross receipts or sales less returns and allowances (Form 1120S, line 1c)	1	897,554
2	Gross profit (Form 1120S, line 3)	2	196,347
3	Ordinary business income (loss) (Form 1120S, line 21)	3	-136,229
4	Net rental real estate income (loss) (Form 1120S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120S, Schedule K, line 18)	5	-136,229

**Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)**

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2014 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

I authorize \_\_\_\_\_ to enter my PIN  as my signature  
on the corporation's 2014 electronically filed income tax return.  
ERO firm name do not enter all zeros

☒ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2014 electronically filed income tax return.

Officer's signature ► CLAUDE SIMON Date ► 02/26/15 Title ► PRESIDENT

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

**12076312345**  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ► Allan C Cohn CPA Date ► 02/26/15

**ERO Must Retain This Form — See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see instructions.

Form **8879-S** (2014)

Form **1120S**Department of the Treasury  
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

Information about Form 1120S and its separate instructions is at [www.irs.gov/form1120s](http://www.irs.gov/form1120s).

OMB No. 1545-0123

**2014**

For calendar year 2014 or tax year beginning , ending

<b>A</b> S election effective date <b>01/01/76</b>	<b>TYPE</b>  <b>OR</b>  <b>PRINT</b>	<b>Name</b> <b>VERATEX INC</b>	<b>D</b> Employer identification number <b>13-2804148</b>
<b>B</b> Business activity code number (see instructions) <b>424300</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>534 WEST 42ND STREET #8</b>	<b>E</b> Date incorporated <b>01/01/1976</b>
<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code <b>NEW YORK NY 10036</b>	<b>F</b> Total assets (see instructions) <b>\$ 642,865</b>

**G** Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed

**H** Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation

**I** Enter the number of shareholders who were shareholders during any part of the tax year **1**

**Caution.** Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

<b>Income</b>	<b>1a</b> Gross receipts or sales	<b>1a</b> <b>904,240</b>	
	<b>b</b> Returns and allowances	<b>1b</b> <b>6,686</b>	
	<b>c</b> Balance. Subtract line 1b from line 1a		<b>1c</b> <b>897,554</b>
	<b>2</b> Cost of goods sold (attach Form 1125-A)		<b>2</b> <b>701,207</b>
	<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b> <b>196,347</b>
	<b>4</b> Net gain (loss) from Form 4797, line 17 (attach Form 4797)		<b>4</b>
<b>5</b> Other income (loss) (see instructions—attach statement)		<b>5</b>	
<b>6</b> <b>Total income (loss).</b> Add lines 3 through 5		<b>6</b> <b>196,347</b>	
<b>Deductions</b> (see instructions for limitations)	<b>7</b> Compensation of officers (see instructions—attach Form 1125-E)		<b>7</b> <b>68,000</b>
	<b>8</b> Salaries and wages (less employment credits)		<b>8</b> <b>115,460</b>
	<b>9</b> Repairs and maintenance		<b>9</b> <b>100</b>
	<b>10</b> Bad debts		<b>10</b>
	<b>11</b> Rents		<b>11</b> <b>20,100</b>
	<b>12</b> Taxes and licenses		<b>12</b> <b>26,382</b>
	<b>13</b> Interest		<b>13</b> <b>3,834</b>
	<b>14</b> Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)		<b>14</b>
	<b>15</b> Depletion (Do not deduct oil and gas depletion.)		<b>15</b>
	<b>16</b> Advertising		<b>16</b>
	<b>17</b> Pension, profit-sharing, etc., plans		<b>17</b>
	<b>18</b> Employee benefit programs		<b>18</b> <b>53,162</b>
	<b>19</b> Other deductions (attach statement) <b>See Stmt 1</b>		<b>19</b> <b>45,538</b>
	<b>20</b> <b>Total deductions.</b> Add lines 7 through 19		<b>20</b> <b>332,576</b>
	<b>21</b> <b>Ordinary business income (loss).</b> Subtract line 20 from line 6		<b>21</b> <b>-136,229</b>
<b>Tax and Payments</b>	<b>22a</b> Excess net passive income or LIFO recapture tax (see instructions)	<b>22a</b>	<b>22c</b>
	<b>b</b> Tax from Schedule D (Form 1120S)	<b>22b</b>	
	<b>c</b> Add lines 22a and 22b (see instructions for additional taxes)		
	<b>23a</b> 2014 estimated tax payments and 2013 overpayment credited to 2014	<b>23a</b>	<b>23d</b>
	<b>b</b> Tax deposited with Form 7004	<b>23b</b>	
	<b>c</b> Credit for federal tax paid on fuels (attach Form 4136)	<b>23c</b>	
	<b>d</b> Add lines 23a through 23c		<b>23d</b>
	<b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		<b>24</b>
	<b>25</b> Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed		<b>25</b>
	<b>26</b> Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid		<b>26</b>
<b>27</b> Enter amount from line 26 <b>Credited to 2015 estimated tax</b> <b>Refunded</b>		<b>27</b>	

<b>Sign Here</b>	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.		May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	<b>Signature of officer</b> <b>CLAUDE SIMON</b>	<b>Date</b>	<b>TITLE</b> <b>PRESIDENT</b>	
	<b>Print/Type preparer's name</b> <b>Allan C Cohn CPA</b>	<b>Preparer's signature</b> <b>Allan C Cohn CPA</b>	<b>Date</b> <b>02/26/15</b>	<b>Check</b> <input checked="" type="checkbox"/> <b>if</b> <b>PTIN</b> <b>P00447700</b> self-employed
<b>Paid Preparer Use Only</b>	<b>Firm's name</b> <b>Cohn &amp; Langer, CPAs</b>	<b>Firm's EIN</b> <b>45-4014297</b>		
	<b>Firm's address</b> <b>18 Blanche St Plainview, NY 11803-4607</b>	<b>Phone no.</b> <b>516-702-3002</b>		

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120S** (2014)

**Schedule B Other Information** (see instructions)

<b>1</b> Check accounting method: <b>a</b> <input type="checkbox"/> Cash <b>b</b> <input checked="" type="checkbox"/> Accrual <b>c</b> <input type="checkbox"/> Other (specify) ▶		Yes	No
<b>2</b> See the instructions and enter the: <b>a</b> Business activity ▶ <b>JOBBER</b> <b>b</b> Product or service ▶ <b>YARN</b>			
<b>3</b> At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation			<b>X</b>
<b>4</b> At the end of the tax year, did the corporation: <b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below			<b>X</b>
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital 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 (v) below			<b>X</b>
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization
<b>5a</b> At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "Yes," complete lines (i) and (ii) below.			<b>X</b>
(i) Total shares of restricted stock ▶			
(ii) Total shares of non-restricted stock ▶			
<b>b</b> At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "Yes," complete lines (i) and (ii) below.			<b>X</b>
(i) Total shares of stock outstanding at the end of the tax year ▶			
(ii) Total shares of stock outstanding if all instruments were executed ▶			
<b>6</b> Has this corporation filed, or is it required to file, <b>Form 8918</b> , Material Advisor Disclosure Statement, to provide information on any reportable transaction?			<b>X</b>
<b>7</b> Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file <b>Form 8281</b> , Information Return for Publicly Offered Original Issue Discount Instruments.			
<b>8</b> If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) ▶ \$			
<b>9</b> Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$			
<b>10</b> Does the corporation satisfy both of the following conditions? <b>a</b> The corporation's total receipts (see instructions) for the tax year were less than \$250,000 <b>b</b> The corporation's total assets at the end of the tax year were less than \$250,000 If "Yes," the corporation is not required to complete Schedules L and M-1.			<b>X</b>
<b>11</b> During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction \$			<b>X</b>
<b>12</b> During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions			<b>X</b>
<b>13a</b> Did the corporation make any payments in 2014 that would require it to file Form(s) 1099?		<b>X</b>	
<b>b</b> If "Yes," did the corporation file or will it file required Forms 1099?		<b>X</b>	

Form 1120S (2014) **VERATEX INC****13-2804148**

Page 3

**Schedule K Shareholders' Pro Rata Share Items**

		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	-136,229
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends	5b	
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss)	8b	
	c Unrecaptured section 1250 gain (attach statement)	8c	
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)	
	d Other deductions (see instructions) Type ▶	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶	14b	
	b Gross income from all sources	14c	
	c Gross income sourced at shareholder level Foreign gross income sourced at corporate level	14d	
	d Passive category	14e	
	e General category	14f	
	f Other (attach statement) Deductions allocated and apportioned at shareholder level	14g	
	g Interest expense	14h	
	h Other Deductions allocated and apportioned at corporate level to foreign source income	14i	
	i Passive category	14j	
	j General category	14k	
	k Other (attach statement) Other information	14l	
	l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14m	
	m Reduction in taxes available for credit (attach statement)		
	n Other foreign tax information (attach statement)		
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties – gross income	15d	
	e Oil, gas, and geothermal properties – deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required) (see instructions)	16d	
	e Repayment of loans from shareholders	16e	

Form **1120S** (2014)

**Schedule K Shareholders' Pro Rata Share Items (continued)**

Other Information	Total amount	
	17a	
	17b	
	17c	
17a Investment income		
b Investment expenses		
c Dividend distributions paid from accumulated earnings and profits		
d Other items and amounts (attach statement)		
Reconciliation	18	-136,229
18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l		

**Schedule L Balance Sheets per Books**

		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1 Cash			1,113		1,582
2a Trade notes and accounts receivable		115,350		101,055	
b Less allowance for bad debts	(		115,350	(	101,055
3 Inventories			423,836		407,912
4 U.S. government obligations					
5 Tax-exempt securities (see instructions)					
6 Other current assets (attach statement) Stmt 2			111,816		132,316
7 Loans to shareholders					
8 Mortgage and real estate loans					
9 Other investments (attach statement)					
10a Buildings and other depreciable assets		81,874		81,874	
b Less accumulated depreciation	(	81,874	0	(	81,874
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			652,115		642,865
Liabilities and Shareholders' Equity					
16 Accounts payable			91,057		83,558
17 Mortgages, notes, bonds payable in less than 1 year			54,455		98,273
18 Other current liabilities (attach statement)					
19 Loans from shareholders			465,883		556,543
20 Mortgages, notes, bonds payable in 1 year or more					
21 Other liabilities (attach statement)					
22 Capital stock			125,000		125,000
23 Additional paid-in capital					
24 Retained earnings			-84,280		-220,509
25 Adjustments to shareholders' equity (attach statement)					
26 Less cost of treasury stock	(			(	
27 Total liabilities and shareholders' equity			652,115		642,865

Form 1120S (2014) **VERATEX INC****13-2804148**Page **5****Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return****Note.** The corporation may be required to file Schedule M-3 (see instructions)

<b>1</b> Net income (loss) per books	<b>-136,229</b>	<b>5</b> Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
<b>2</b> Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize)		<b>a</b> Tax-exempt interest \$	
<b>3</b> Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14l (itemize):		<b>6</b> Deductions included on Schedule K, lines 1 through 12 and 14l, not charged against book income this year (itemize):	
<b>a</b> Depreciation \$		<b>a</b> Depreciation \$	
<b>b</b> Travel and entertainment \$		<b>7</b> Add lines 5 and 6	
<b>4</b> Add lines 1 through 3	<b>-136,229</b>	<b>8</b> Income (loss) (Schedule K, line 18). Line 4 less line 7	<b>-136,229</b>

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)**

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
<b>1</b> Balance at beginning of tax year	<b>-84,280</b>		
<b>2</b> Ordinary income from page 1, line 21			
<b>3</b> Other additions			
<b>4</b> Loss from page 1, line 21	<b>136,229</b>		
<b>5</b> Other reductions			
<b>6</b> Combine lines 1 through 5	<b>-220,509</b>		
<b>7</b> Distributions other than dividend distributions			
<b>8</b> Balance at end of tax year. Subtract line 7 from line 6	<b>-220,509</b>		

Form **1120S** (2014)

Form **1125-A**

(Rev. December 2012)

Department of the Treasury  
Internal Revenue Service**Cost of Goods Sold**

OMB No. 1545-2225

► Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.  
► Information about Form 1125-A and its instructions is at [www.irs.gov/form1125a](http://www.irs.gov/form1125a).

Name <b>VERATEX INC</b>		Employer identification number <b>13-2804148</b>	
1	Inventory at beginning of year	1	<b>423,836</b>
2	Purchases	2	<b>660,982</b>
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) <b>Stmt 3</b>	5	<b>24,301</b>
6	<b>Total.</b> Add lines 1 through 5	6	<b>1,109,119</b>
7	Inventory at end of year	7	<b>407,912</b>
8	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	<b>701,207</b>

9a Check all methods used for valuing closing inventory:

(i) ☒ Cost

(ii) ☐ Lower of cost or market

(iii) ☐ Other (Specify method used and attach explanation.) ►

b Check if there was a writedown of subnormal goods ► ☐

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ► ☐

d If the LIFO inventory method was used for this tax year, enter the amount of closing inventory computed under LIFO **9d**

e If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? ☐ Yes ☒ No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☒ No

For Paperwork Reduction Act Notice, see instructions.

Form **1125-A** (Rev. 12-2012)

**Schedule K-1  
(Form 1120S)**Department of the Treasury  
Internal Revenue Service**2014**

For calendar year 2014, or tax

year beginning \_\_\_\_\_

ending \_\_\_\_\_

**Shareholder's Share of Income, Deductions,  
Credits, etc.**

▶ See back of form and separate instructions.

**Part I Information About the Corporation**

A Corporation's employer identification number

**13-2804148**

B Corporation's name, address, city, state, and ZIP code

**VERATEX INC****534 WEST 42ND STREET #8****NEW YORK****NY 10036**

C IRS Center where corporation filed return

**e-file****Part II Information About the Shareholder**

D Shareholder's identifying number

**106-50-1158**

E Shareholder's name, address, city, state, and ZIP code

**CLAUDE A SIMON****71 TONJES ROAD****CALLICOON****NY 12723**F Shareholder's percentage of stock  
ownership for tax year**100.000000 %**

For IRS Use Only

**Part III Shareholder's Share of Current Year Income,  
Deductions, Credits, and Other Items**

1	Ordinary business income (loss) <b>-136,229</b>	13	Credits
2	Net rental real estate income (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information

\* See attached statement for additional information.





## Federal Statements

### Statement 1 - Form 1120S, Page 1, Line 19 - Other Deductions

Description	Amount
BANK CHARGES	\$ 1,723
TRUCK & DELIVERY	2,786
LEGAL & PROFESSIONAL	23,426
PROMOTION	673
TRAVEL	1,835
OFFICE SUPPLIES	2,859
POSTAGE	2,710
TELEPHONE	5,124
UTILITIES	967
COMMISSIONS	100
INSURANCE	2,975
RESEARCH AND DEVELOPMENT	360
Total	\$ 45,538

### Statement 2 - Form 1120S, Page 4, Schedule L, Line 6 - Other Current Assets

Description	Beginning of Year	End of Year
LOAN RECEIVABLE	\$ 111,816	\$ 132,316
Total	\$ 111,816	\$ 132,316

## Federal Statements

### Statement 3 - Form 1125-A, Line 5 - Other Costs

<u>Description</u>	<u>Amount</u>
STORAGE	\$ 6,460
FREIGHT	17,841
Total	<u>\$ 24,301</u>

# New York State E-File Signature Authorization for Tax Year 2014 For Form CT-3, CT-3-A, CT-3M/4M, CT-3-S, CT-4, CT-13, CT-33, CT-33-A, CT-33-C, CT-33-M, CT-33-NL, CT-240, CT-245, or CT-400

Electronic return originator (ERO)/paid preparer: **do not** mail this form to the Tax Department. Keep it for your records.

Legal name of corporation: VERATEX INC

Return type (mark all that apply): CT-3 ☐ CT-3-A ☐ CT-3M/4M ☐ CT-3-S ☒ CT-4 ☐ CT-13 ☐

CT-33 ☐ CT-33-A ☐ CT-33-C ☐ CT-33-M ☐ CT-33-NL ☐ CT-240 ☐ CT-245 ☐ CT-400 ☐

## Purpose

Form TR-579-CT must be completed to authorize an ERO to e-file a corporation tax return and to transmit bank account information for the electronic funds withdrawal.

## General instructions

Part A must be completed by an officer of the corporation who is authorized to sign the corporation's return before the ERO transmits the electronically filed Form CT-3, General Business Corporation Franchise Tax Return; CT-3-A, General Business Corporation Combined Franchise Tax Return; CT-3M/4M, General Business Corporation MTA Surcharge Return; CT-3-S, New York S Corporation Franchise Tax Return; CT-4, General Business Corporation Franchise Tax Return Short Form; CT-13, Unrelated Business Income Tax Return; CT-33, Life Insurance Corporation Franchise Tax Return; CT-33-A, Life Insurance Corporation Combined Franchise Tax Return; CT-33-C, Captive Insurance Company Franchise Tax Return; CT-33-M, Insurance Corporation MTA Surcharge Return; CT-33-NL, Non-Life Insurance Corporation Franchise Tax Return; CT-240, Foreign Corporation License Fee Return; CT-245, Maintenance Fee and Activities Return For a Foreign Corporation Disclaiming Tax Liability; or CT-400, Estimated Tax for Corporations.

EROs/paid preparers must complete Part B prior to transmitting electronically filed corporation tax returns. Both the paid preparer and the ERO are required to sign Part B. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Note that an alternative signature can be used as described in TSB-M-05(1)C, Alternative Methods of Signing for Tax Return Preparers. Go to our Web site at [www.tax.ny.gov](http://www.tax.ny.gov) to find this document.

**Do not mail this form to the Tax Department.** EROs/paid preparers must keep this form for three years and present it to the Tax Department upon request.

Do not use this form for electronically filed Form CT-5, Request for Six-Month Extension to File (for franchise/business taxes, MTA surcharge, or both), Form CT-5.3, Request for Six-Month Extension to File (for combined franchise tax return, or combined MTA surcharge, or both), Form CT-5.4, Request for Six-Month Extension to File New York S Corporation Franchise Tax Return, Form CT-5.9, Request for Three-Month Extension to File (for Article 9 tax return, MTA surcharge, or both), or Form CT-5.9-E, Request for Three-Month Extension to File Form CT-186-E. Instead use Form TR-579 1-CT, New York State Authorization for Electronic Funds Withdrawal For Tax Year 2014.

## Financial institution information (required if electronic payment is authorized)

- |   |                                      |    |       |
|---|--------------------------------------|----|-------|
| 1 | Amount of authorized debit           | 1. | _____ |
| 2 | Financial institution routing number | 2. | _____ |
| 3 | Financial institution account number | 3. | _____ |

## Part A — Declaration of authorized corporate officer for Form CT-3, CT-3-A, CT-3M/4M, CT-3-S, CT-4, CT-13, CT-33, CT-33-A, CT-33-C, CT-33-M, CT-33-NL, CT-240, CT-245, or CT-400

Under penalty of perjury, I declare that I have examined the information on this 2014 New York State electronic corporate tax return, including any accompanying schedules, attachments, and statements, and certify that this electronic return is true, correct, and complete. If this filing includes Form DTF-686, Tax Shelter Reportable Transactions, as an authorized officer of the corporation, I hereby consent to the waiver of the secrecy provisions of Tax Law sections 202, 211.8, 1467, and 1518 as such provisions relate to the disclosure requirements of Tax Law section 25. The ERO has my consent to send this 2014 New York State electronic corporate return to New York State through the Internal Revenue Service (IRS). I understand that by executing this Form TR-579-CT, I am authorizing the ERO to sign and file this return on behalf of the corporation and agree that the ERO's submission of the corporation's return to the IRS, together with this authorization, will serve as the electronic signature for the return and any authorized payment transaction. If I am paying New York State corporation taxes due by electronic funds withdrawal, I authorize the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on this 2014 electronic return, and I authorize the financial institution to withdraw the amount from the account. As New York does not support International ACH Transactions (IAT), I attest the source for these funds is within the United States. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than five business days prior to the payment date.

Signature of authorized officer of the corporation: \_\_\_\_\_ Date: 02-26-15

Print your name and title: CLAUDE SIMON PRESIDENT

## Part B — Declaration of ERO and paid preparer

Under penalty of perjury, I declare that the information contained in this 2014 New York State electronic corporate tax return is the information furnished to me by the corporation. If the corporation furnished me a completed paper 2014 New York State corporate tax return signed by a paid preparer, I declare that the information contained in the corporation's 2014 New York State electronic corporate tax return is identical to that contained in the paper return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2014 New York State electronic corporate tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

ERO's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Paid preparer's signature: ALLAN C COHN CPA Date: 02-26-15

Print name: ALLAN C COHN CPA

2014

New York State Department of Taxation and Finance

# New York S Corporation Franchise Tax Return

Tax Law – Articles 9-A and 22

CT-3-S

All filers must enter tax period:

Final return (see instr., page 5)

Amended return

beginning 01-01-14 ending 12-31-14

Employer identification number (EIN) 13-2804148	File number AA6	Business telephone number 516-702-3002	If you have any subsidiaries incorporated outside NYS, mark an X in the box <input type="checkbox"/>	If you claim an overpayment, mark an X in the box <input type="checkbox"/>
Legal name of corporation VERATEX 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 534 WEST 42ND STREET #8			Date of incorporation 01-01-76	
City NEW YORK	State NY	ZIP code 10036	Foreign corporations: date began business in NYS	
NAICS business code number (from NYS Pub 910) 424300	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 Business information in Form CT-1.	New York S election effective date 01-01-76	Audit (for Tax Department use only)
NYS principal business activity JOBBER				
Has the corporation revoked its election to be treated as a New York S corporation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X If Yes, enter effective date:			Number of shareholders 1	
A Pay amount shown on line 46. Make payable to: New York State Corporation Tax Attach your payment here. Detach all check stubs. (See instructions for details.)				Payment enclosed 300.

You must attach a copy of the following: (1) federal Form 1120S as filed; (2) Form CT-34-SH; (3) Form CT-3-S-ATT (if required; see instructions); (4) Form CT-60-QSSS (if required; see instructions); and (5) any applicable credit claim forms.

- B If you filed a return(s) other than federal Form 1120S, enter the form number(s) here
- C If you included a qualified subchapter S subsidiary (QSSS) in this return, mark an X in the box and attach Form CT-60-QSSS ☐
- D Have you underreported your tax due on past returns? To correct this without penalty, visit our Web site (see instructions).
- E Enter your business allocation percentage (if you did not complete Form CT-3-S-ATT, Schedule A, you must enter either 0 or 100)  100.0000%
- F Enter your investment allocation percentage (if you did not complete Form CT-3-S-ATT, Schedule B, you must enter either 0 or 100)  0.0000%
- G Did the S corporation make an IRC section 338 or 453 election? Yes ☐ No ☒ X
- H Did this entity have an interest in real property located in New York State during the last three years? Yes ☐ No ☒ X
- I Has there been a transfer or acquisition of a controlling interest in this entity during the last three years? Yes ☐ No ☒ X
- J If the IRS has completed an audit of any of your returns within the last five years, list years
- K If this return is for a New York S termination year, mark an X in the appropriate box to indicate which method of accounting was used for the New York S short year (see instructions, page 5) Normal accounting rules ☐ Daily pro rata allocation ☐
- L Issuer's allocation percentage (see instructions)  100.0000%
- M Mark an X in the box if you are filing Form CT-3-S as a result of the mandatory New York S election of Tax Law, Article 22, section 660 ☐
- N If you are one of the following, mark an X in one box: QETC ☐ Qualified New York manufacturer ☐ Eligible qualified New York manufacturer ☐
- O Did you include any disregarded entities in this return? (mark an X in the appropriate box) Yes ☐ No ☒ X  
If Yes, enter the name(s) and EIN(s) on Form CT-60-QSSS and attach it to your return.
- 440001141022 P If you filed as a New York C corporation in previous years, enter the last year filed as such
- Q Are you a residual interest holder in a real estate mortgage investment conduit (REMIC)? Yes ☐ No ☒ X



Provide the information for lines 1 through 10 from the corresponding lines on your federal Form 1120S, Schedule K, total amount column. (Show any negative amounts with a minus (-) sign; do not use parentheses or brackets.)

1 Ordinary business income or loss	1	-136,229.
2 Net rental real estate income or loss	2	
3 Other net rental income or loss	3	
4 Interest income	4	
5 Ordinary dividends	5	
6 Royalties	6	
7 Net short-term capital gain or loss	7	
8 Net long-term capital gain or loss	8	
9 Net section 1231 gain or loss	9	
10 Other income or loss	10	
11 Loans to shareholders (from federal Form 1120S, Schedule L, line 7, columns b and d)		
Beginning of tax year	End of tax year	
12 Total assets (from federal Form 1120S, Schedule L, line 15, columns b and d)		
Beginning of tax year	End of tax year	642,865.
13a Loans from shareholders (from federal Form 1120S, Schedule L, line 19, columns b and d)		
Beginning of tax year	End of tax year	556,543.
13b If any portion of such loans was used as basis to deduct current or suspended loss, enter the amount used		

Provide the information for lines 14 through 21 from the corresponding lines on your federal Form 1120S, Schedule M-2. (Show any negative amounts with a minus (-) sign; do not use parentheses or brackets.)

	A Accumulated adjustments account	B Other adjustments account	C Shareholders' undistributed taxable income previously taxed
14 Balance at beginning of tax year	-84,280.		
15 Ordinary income from federal Form 1120S, page 1, line 21			
16 Other additions			
17 Loss from federal Form 1120S, page 1, line 21	-136,229.		
18 Other reductions			
19 Add lines 14 through 18	-220,509.		
20 Distributions other than dividend distributions			
21 Balance at end of tax year. Subtract line 20 from line 19	-220,509.		

### Computation of tax (see instructions)

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)

Yes ☐ No ☒ X

You must enter an amount on line 22; if none, enter 0.

22 New York receipts (see instructions)	22	897,554.
23 Fixed dollar minimum tax (see instructions)	23	300.
24 Recapture of tax credits (see instructions)	24	
25 Total tax after recapture of tax credits (add lines 23 and 24)	25	300.
26 Special additional mortgage recording tax credit (current year or deferred; see instructions)	26	
27 Tax due after tax credits (subtract line 26 from line 25)	27	300.
First installment of estimated tax for the next tax period:		
28 Enter amount from line 27	28	300.
29 If you filed a request for extension, enter amount from Form CT-5.4, line 2	29	
30 If you did not file Form CT-5.4 and line 28 is over \$1,000, enter 25% (.25) of line 28. Otherwise enter 0	30	
31 Add line 28 and line 29 or 30	31	300.

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**Computation of tax (continued)**

Composition of prepayments (see instructions):	Date paid	Amount
32 Mandatory first installment	32	
33 Second installment from Form CT-400	33	
34 Third installment from Form CT-400	34	
35 Fourth installment from Form CT-400	35	
36 Payment with extension request from Form CT-5.4	36	
37 Overpayment credited from prior years (see instructions)	37	
38 Total prepayments (add lines 32 through 37)	38	
39 Balance (subtract line 38 from line 31; if line 38 is larger than line 31, enter 0)	39	300.
40 Estimated tax penalty (see instructions; mark an X in the box if Form CT-222 is attached)	40	0.
41 Interest on late payment (see instructions)	41	
42 Late filing and late payment penalties (see instructions)	42	
43 Balance (add lines 39 through 42)	43	300.

  

Voluntary gifts/contributions (see instructions):		
44a Return a Gift to Wildlife	44a	
44b Breast Cancer Research & Education Fund	44b	
44c Prostate and Testicular Cancer Research and Education Fund	44c	
44d 9/11 Memorial	44d	
44e Volunteer Firefighting & EMS Recruitment Fund	44e	
44f Veterans Remembrance	44f	
45 Add lines 31, 40, 41, 42, and 44a through 44f	45	300.
46 Balance due (if line 38 is less than line 45, subtract line 38 from line 45 and enter here. This is the amount due; enter your payment amount on line A on page 1.)	46	300.
47 Overpayment (if line 38 is more than line 45, subtract line 45 from line 38 and enter here. This is the amount of your overpayment; see instructions.)	47	
48 Amount of overpayment to be credited to next period (see instructions)	48	
49 Refund of overpayment (subtract line 48 from line 47; see instructions)	49	
50 Refund of unused special additional mortgage recording tax credit (current year or deferred; see instructions)	50	
51 Amount of special additional mortgage recording tax credit to be applied as an overpayment to next period	51	

**Amended return information**

If filing an amended return, mark an X in the box for any items that apply and attach documentation.

Final federal determination ☐ If marked, enter date of determination: \_\_\_\_\_

<b>Third - party designee</b> (see instructions)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Designee's name (print) ALLAN C COHN CPA	Designee's phone number 516-702-3002
	Designee's e-mail address		PIN

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

<b>Authorized person</b>	Printed name of authorized person CLAUDE SIMON	Signature of authorized person	Official title PRESIDENT
	E-mail address of authorized person	Telephone number 516-702-3002	Date
<b>Paid preparer use only</b> (see instr.)	Firm's name (or yours if self-employed) COHN & LANGER, CPAS	Firm's EIN 45-4014297	Preparer's PTIN or SSN P00447700
	Signature of individual preparing this return ALLAN C COHN CPA	Address 18 BLANCHE ST PLAINVIEW NY 11803-4607	State ZIP code
	E-mail address of individual preparing this return	Preparer's NYTPRN	Date 02-26-15

See instructions for where to file.

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2014

New York State Department of Taxation and Finance

# New York S Corporation Shareholders' Information Schedule

Attachment to Form CT-3-S or CT-32-S

CT-34-SH

Legal name of corporation VERATEX INC	Employer identification number (EIN) 13-2804148
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**Schedule A – Shareholders' New York State modifications and credits** (Enter the total amount reported by the New York S corporation on each line. Each shareholder must include his or her pro rata share of these amounts on his or her personal income tax return.)

**Part 1 – Total shareholder modifications related to S corporation items** (see instructions)

<b>Additions</b>	1	New York State franchise tax imposed under Article 9-A or Article 32	1	1,000.
	2	Federal depreciation deduction from Form CT-399, if applicable	2	
	3	Other additions (attach Form CT-225)	3	
<b>Subtractions</b>	4	Allowable New York depreciation from Form CT-399, if applicable	4	
	5	Other subtractions (attach Form CT-225)	5	
<b>Other items</b> (attach explanation)	6	Additions to federal itemized deductions	6	
	7	Subtractions from federal itemized deductions	7	

**Part 2 – Total S corporation New York State credits and taxes on early dispositions** (see instructions; attach applicable forms)

**START-UP NY tax credits** (see instructions)

8	START-UP NY business certificate number	8	
9	Year of the START-UP NY business tax benefit period (enter the year number from 1 to 10)	9	
10	START-UP NY telecommunication services excise tax credit (Form CT-640)	10	
11	Recapture of START-UP NY tax benefits (leave blank; not applicable for this tax year)	11	
12	START-UP NY tax elimination credit tax free NY area allocation factor (Form CT-638)	12	
13	START-UP NY tax elimination credit three factor formula business allocation percentage (Form CT-638)	13	
<b>START-UP NY tax elimination credit factors from partnership</b> (for multiple partnerships attach separate statement; see instructions)			
14	START-UP NY partnership EIN	14	
15	START-UP NY business certificate number (obtain number from your partnership)	15	
16	Year of the START-UP NY business tax benefit period (enter the year number from 1 to 10; obtain number from your partnership)	16	
17	START-UP NY tax elimination credit tax free NY area allocation factor (obtain factor from your partnership)	17	
18	START-UP NY tax elimination credit three factor formula business allocation percentage (obtain percentage from your partnership)	18	

**Investment tax credits** (see instructions)

19	Investment tax credit, retail enterprise tax credit, historic barn credit, and employment incentive credit (Form CT-46 and, if applicable, Form CT-46-ATT)	19	
20	Investment tax credit on research and development property (Form CT-46)	20	
21	Investment tax credit for financial services industry (Form CT-44)	21	
22	Tax on early dispositions – investment tax credit, retail enterprise tax credit, historic barn credit, investment tax credit on research and development property, or investment tax credit for financial services industry (Form CT-44 or CT-46)	22	

**Empire zone (EZ) tax credits** (see instructions)

23	EZ wage tax credit (Form CT-601)	23	
24	EZ capital tax credit for monetary contributions (Form CT-602)	24	
25	EZ investment tax credit (Form CT-603)	25	
26	EZ investment tax credit for financial services industry (Form CT-605)	26	
27	Recaptured tax credit – EZ capital tax credit, EZ investment tax credit, or EZ investment tax credit for financial services industry (Form CT-602, CT-603, or CT-605)	27	

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**Part 2 – Total S corporation New York State credits and taxes on early dispositions (continued)****Qualified empire zone enterprise (QEZE) tax credits (see instructions)**

28 QEZE real property tax credit allowed (Form CT-606)	•	28	
29 Net recapture of QEZE real property tax credit (Form CT-606)	•	29	
30 QEZE tax reduction credit employment increase factor (Form CT-604)	•	30	
31 QEZE tax reduction credit zone allocation factor (Form CT-604)	•	31	
32 QEZE tax reduction credit benefit period factor (Form CT-604)	•	32	
<b>QEZE tax reduction credit factors from partnership (for multiple partnerships attach separate statement; see instructions)</b>			
33 QEZE partnership EIN	•	33	
34 QEZE employment increase factor (obtain factor from your partnership)	•	34	
35 QEZE zone allocation factor (obtain factor from your partnership)	•	35	
36 QEZE benefit period factor (obtain factor from your partnership)	•	36	

**Farmers' school tax credit (see instructions)**

37 Total acres of qualified agricultural property	•	37	
38 Total amount of eligible school district property taxes paid	•	38	
39 Total acres of qualified agricultural property converted to nonqualified use	•	39	
40 Total acres of qualified conservation property	•	40	

**Other credits (attach applicable forms)**

41 Recapture of alternative fuels credit (Form CT-40)	•	41	
42 Credit for employment of persons with disabilities (Form CT-41)	•	42	
43 Rehabilitation of historic properties credit (Form CT-238)	•	43	
44 Recapture of rehabilitation of historic properties credit (Form CT-238)	•	44	
45 Clean heating fuel credit (Form CT-241)	•	45	
46 Biofuel production credit (Form CT-243)	•	46	
47 Empire State commercial production credit (Form CT-246)	•	47	
48 Empire State film production credit for the current year (Form CT-248)	•	48	
49 Empire State film production credit for the second year (Form CT-248)	•	49	
50 Empire State film production credit for the third year (Form CT-248)	•	50	
51 Long-term care insurance credit (Form CT-249)	•	51	
52 Credit for purchase of an automated external defibrillator (Form CT-250)	•	52	
53a Empire State film post-production credit for the current year (Form CT-261)	•	53a	
53b Empire State film post-production credit for the second year (Form CT-261)	•	53b	
53c Empire State film post-production credit for the third year (Form CT-261)	•	53c	
54 Excelsior jobs tax credit component (Form CT-607)	•	54	
55 Excelsior investment tax credit component (Form CT-607)	•	55	
56 Excelsior research and development tax credit component (Form CT-607)	•	56	
57 Excelsior real property tax credit component (Form CT-607)	•	57	
58 Brownfield redevelopment tax credit site preparation credit component (Form CT-611)	•	58	
59 Brownfield redevelopment tax credit tangible property credit component (Form CT-611)	•	59	
60 Brownfield redevelopment tax credit on-site groundwater remediation credit component (Form CT-611)	•	60	
61 Recapture of brownfield redevelopment tax credit (Form CT-611)	•	61	
62 Brownfield redevelopment tax credit site preparation credit component (Form CT-611.1)	•	62	
63 Brownfield redevelopment tax credit tangible property credit component (Form CT-611.1)	•	63	
64 Brownfield redevelopment tax credit on-site ground water remediation credit component (Form CT-611.1)	•	64	
65 Recapture of brownfield redevelopment tax credit (Form CT-611.1)	•	65	
66 Remediated brownfield credit for real property taxes (Form CT-612)	•	66	
67 Recapture of remediated brownfield credit for real property taxes (Form CT-612)	•	67	
68 Environmental remediation insurance credit (Form CT-613)	•	68	
69 Recapture of environmental remediation insurance credit (Form CT-613)	•	69	
70 Security officer training tax credit (attach Form CT-631)	•	70	

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**Part 2 – Total S corporation New York State credits and taxes on early dispositions** (continued)

71 Economic transformation and facility redevelopment program jobs tax credit component (Form CT-633)	• 71	
72 Economic transformation and facility redevelopment program investment tax credit component (Form CT-633)	• 72	
73 Economic transformation and facility redevelopment program job training tax credit component (Form CT-633)	• 73	
74 Economic transformation and facility redevelopment program real property tax credit component (Form CT-633)	• 74	
75 Taxicabs and livery service vehicles accessible to persons with disabilities credit (Form CT-236)	• 75	
76 QETC employment credit (Form DTF-621)	• 76	
77 QETC capital tax credit (Form DTF-622)	• 77	
78 Recapture of QETC capital tax credit (Form DTF-622)	• 78	
79 Low-income housing credit (Form DTF-624)	• 79	
80 Recapture of low-income housing credit (Form DTF-626)	• 80	
81 Green building credit (Form DTF-630)	• 81	
82 Empire state jobs retention credit (Form CT-634)	• 82	
83 Recapture of empire state jobs retention credit (Form CT-634)	• 83	
84 New York youth works credit (Form CT-635)	• 84	
85 Beer production credit (Form CT-636)	• 85	
86 Alternative fuels and electric vehicle recharging property credit (Form CT-637)	• 86	
87 Recapture of alternative fuels and electric vehicle recharging property credit (Form CT-637)	• 87	
88 Minimum wage reimbursement credit (Form CT-639)	• 88	
89 Real property tax credit for manufacturers (Form CT-641)	• 89	
90 Recapture of real property tax credit for manufacturers (Form CT-641)	• 90	
91 New York City general corporation tax credit (see instructions)	• 91	500.
92 Other tax credit(s) and recapture(s) (see instructions)	• 92	

(complete Schedule B on the last page)

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**Schedule B – Shareholders' identifying information** (see instructions)

Photocopy Schedule B, as needed, attach additional sheets, and mark an X in the box.

<b>A</b> For each shareholder, enter last name, first name, middle initial on first line; enter home address on second and third lines. (attach federal Schedule K-1 for each shareholder)	<b>B</b> Identifying number (SSN or EIN)	<b>C</b> Percentage of ownership	<b>D</b> Shareholder residency status (make only one entry) 1 for New York State 2 for New York City 3 for Yonkers 4 for NYS nonresident	<b>E</b> Shareholder entity status (make only one entry) I for individual F for estate or trust E for exempt organization
1 SIMON, CLAUDE A 71 TONJES ROAD  CALLICOON NY 12723	1 106-50-1158	100.0000	1	I
2	2			
3	3			
4	4			
5	5			
6	6			
7	7			
8	8			
9	9			
10	10			
11	11			

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## **Filing Instructions**

**VERATEX INC**

### **Form NYC-579-GCT - Signature Authorization For E-Filed General Corporation Tax Return**

**Taxable Year Ended December 31, 2014**

**Date Due:** March 16, 2015

**Signature:** Form NYC-579-GCT, Signature Authorization For E-Filed General Corporation Tax Return should be signed and dated by an authorized officer of the corporation and returned to:

Cohn & Langer, CPAs  
18 Blanche St  
Plainview, NY 11803-4607

Your return is being filed electronically with the New York City Department of Finance and is not required to be mailed. If you mail a paper copy of your return, it will delay processing of your return.

**ELECTRONIC RETURN ORIGINATORS (ERO): DO NOT MAIL THIS FORM TO THE DEPARTMENT OF FINANCE. KEEP THIS FOR YOUR RECORDS**

Financial Institution Information - must be included if electronic payment is authorized		
AMOUNT OF AUTHORIZED DEBIT:	FINANCIAL INSTITUTION ROUTING NUMBER: <div style="border: 1px solid black; height: 20px; width: 100px; margin: 5px auto;"></div>	FINANCIAL INSTITUTION ACCOUNT NUMBER:

**Part A - Declaration and authorization of corporate officer** For Form NYC-100, NY-Corporation Tax Return  
Under penalty of perjury, I declare that I am an officer of the corporation authorized to act on behalf of the above-named corporation, and that I have examined the information on its 2014 New York City electronically filed corporation tax return, including any accompanying schedules, attachments, and statements or other report checked above, and to the best of my knowledge and belief, the electronically filed corporation tax return or other report is true, correct, and complete. The ERO has my consent to send the 2014 New York City electronically filed corporation tax return or other report checked above to New York City Department of Finance through the Internal Revenue Service. I authorize the ERO to enter my PIN as my signature on the 2014 New York City electronically filed corporation tax return or other report, or I will enter my PIN as my signature on the 2014 New York City electronically filed corporation tax return or other report. If I am paying the New York City corporation tax owed by electronic funds withdrawal, I authorize the New York City Department of Finance and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on the corporation's 2014 New York City electronically filed corporation tax return or other report, and I authorize the financial institution to debit the amount from that account.



# GENERAL CORPORATION TAX RETURN 2014

For CALENDAR YEAR 2014 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Check box if you are filing  
a 52-53-week taxable year

Amended return \_\_\_\_\_ Final return Check box if the corporation has ceased operations.

Special short period return  
(See instructions)

Check box if a pro-forma federal return is attached \_\_\_\_\_ Check box if you claim any 9/11/01-related federal tax benefits. (See Instr.)

Enter 2-character special condition code, if applicable. (See instructions): \_\_\_\_\_

Name VERATEX INC	
In Care Of	
Address (number and street) 534 WEST 42ND STREET #8	
City and State NEW YORK NY	Zip Code 10036
Business Telephone Number 516-702-3002	Date business began in NYC 01-01-76

Taxpayer's Email Address:
EMPLOYER IDENTIFICATION NUMBER 13-2804148
BUSINESS CODE NUMBER AS PER FEDERAL RETURN 424300

## SCHEDULE A Computation of Tax - BEGIN WITH SCH. B ON PG. 3. COMPLETE ALL OTHER SCHEDULES. TRANSFER APPLICABLE AMTS. TO SCH. A.

A. Payment		Amount being paid electronically with this return		A.	Payment Amount
1.	Allocated net income (from Schedule B, line 27)	1.	0.	X .0885	1.
2a.	Allocated capital (from Schedule E, line 14)	2a.		X .0015	2a.
2b.	Total allocated capital - Cooperative Housing Corps.	2b.		X .0004	2b.
2c.	Cooperatives - enter:	BORO	BLOCK	LOT	
3.	Alternative Tax (from Alternative Tax Schedule on page 2) (see instructions)				3.
4.	Minimum tax (see instructions) - NYC Gross Receipts:		897,554.		4.
5.	Allocated subsidiary capital (see instructions)	5.		X .00075	5.
6.	Tax (line 1, 2a, 2b, 3 or 4, whichever is largest, PLUS line 5)				6.
7.	UBT Paid Credit (attach Form NYC-9.7)				7.
8a.	REAP Credit (attach Form NYC-9.5)				8a.
8b.	LMREAP Credit (attach Form NYC-9.8)				8b.
9a.	Real Estate Tax Escalation, Employment Opportunity Relocation and IBZ Credits (attach Form NYC-9.6)				9a.
9b.	Biotechnology Credit (attach Form NYC-9.10)				9b.
10.	Net tax after credits (line 6 less total of lines 7, 8a, 8b, 9a and 9b)				10.
11.	First installment of estimated tax for period following that covered by this return:				
	(a) If application for extension has been filed, enter amount from line 2 of Form NYC-EXT				11a.
	(b) If application for extension has not been filed and line 10 exceeds \$1,000, enter 25% of line 10				11b.
12.	Sales tax addback per Admin. Code §11-604.12(c) and 11-604.17a(c) (see instructions)				12.
13.	Total of lines 10, 11a, 11b and 12				13.
14.	Prepayments (from Prepayments Schedule, page 2, line G) (see instructions)				14.
15.	Balance due (line 13 less line 14)				15.
16.	Overpayment (line 14 less line 13)				16.
17a.	Interest (see instructions)	17a.			
17b.	Additional charges (see instructions)	17b.			
17c.	Penalty for underpayment of estimated tax (attach Form NYC-222)	17c.			
18.	Total of lines 17a, 17b and 17c				18.
19.	Net overpayment (line 16 less line 18)				19.
20.	Amount of line 19 to be: (a) Refunded - _____ Direct deposit - fill out line 20c OR _____ Paper check				20a.
	(b) Credited to 2015 estimated tax				20b.
20c.	Routing Number _____ Account Number _____ ACCOUNT TYPE _____				
	Checking _____ Savings _____				
21.	TOTAL REMITTANCE DUE (see instructions)				21.

**SCHEDULE A - Continued Computation of Tax - BEGIN WITH SCH. B ON PAGE 3. COMPLETE ALL OTHER SCHEDULES. TRANSFER APPLICABLE AMOUNTS TO SCH. A.**

21a. Issuer's allocation percentage (from Schedule E, line 15)	21a.	100.0000 %
22. NYC rent deducted on federal tax return or NYC rent from Schedule G, Part 1. <b>THIS LINE MUST BE COMPLETED</b> (see instr.)	22.	20,100.
23. Federal return filed: ___ 1120    ___ 1120C <u>X</u> 1120S    ___ 1120F    ___ 1120-RIC    ___ 1120-REIT    ___ 1120H    ___ Other/None		
24. Gross receipts or sales from federal return	24.	897,554.
25. EIN of Parent Corporation		
26. Total assets from federal return	26.	642,865.
27. EIN of Common Parent Corporation		
28. Compensation of stockholders (from Sched. F, line 1)	28.	
29. Business allocation percentage (from Schedule H, line 5) - if not allocating, enter 100%	29.	100.0000 %

**COMPOSITION OF PREPAYMENTS SCHEDULE**

PREPAYMENTS CLAIMED ON SCHEDULE A, LINE 14	DATE	AMOUNT
A. Mandatory first installment paid with preceding year's tax		375.
B. Payment with Declaration, Form NYC-400 (1)		
C. Payment with Notice of Estimated Tax Due (2)		
D. Payment with Notice of Estimated Tax Due (3)		
E. Payment with extension, Form NYC-EXT		
F. Overpayment from preceding year credited to this year		
G. TOTAL of A through F (enter on Schedule A, line 14)		375.

**ALTERNATIVE TAX SCHEDULE**

Refer to page 7 of instructions before computing the alternative tax.

Net income/loss (See instructions)	1. \$	
Enter 100% of salaries and compensation for the taxable year paid to stockholders owning more than 5% of the taxpayer's stock. (See Instr.)	2. \$	
Total (line 1 plus line 2)	3. \$	
Statutory exclusion - Enter \$40,000. (if return does not cover an entire year, exclusion must be prorated based on the period covered by the return)	4. \$	
Net amount (line 3 minus line 4)	5. \$	
15% of net amount (line 5 x 15%)	6. \$	
Investment income to be allocated (amount on Schedule B, line 23b x 15%. Do not enter more than the amount on line 6 above. Enter "0" if not applicable.)	7. \$	0.
Business income to be allocated (line 6 minus line 7)	8. \$	
Allocated investment income (line 7 x investment allocation % from Schedule D, line 2F)	9. \$	0.0000 %
Allocated business income (line 8 x business allocation % from Schedule H, line 5)	10. \$	100.0000 %
Taxable net income (line 9 plus line 10)	11. \$	0.
Tax rate	12.	8.85% (.0885)
Alternative tax (line 11 x line 12) Transfer amount to page 1, Schedule A, line 3	13. \$	0.



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**SCHEDULE B Computation and Allocation of Entire Net Income**

1. Federal taxable income before net operating loss deduction and special deductions (see instructions)	1.	-136,229.
2. Interest on federal, state, municipal and other obligations not included in line 1 above (see instructions)	2.	
3. Deductions directly attributable to subsidiary capital (attach list) (see instructions)	3.	
4. Deductions indirectly attributable to subsidiary capital (attach list) (see instructions)	4.	
5a. NYS Franchise Tax, including MTA taxes and other business taxes deducted on the federal return (attach rider) (see instr.) SEE STMT 1	5a.	1,000.
5b. NYC General Corporation Tax deducted on federal return (see instructions)	5b.	1,597.
6. New York City adjustments relating to (see instructions):		
(a) Sales and compensating use tax credit	6a.	
(b) Employment opportunity relocation costs credit and IBZ credit	6b.	
(c) Real estate tax escalation credit	6c.	
(d) ACRS depreciation and/or adjustment (attach Form NYC-399 and/or NYC-399Z)	6d.	
7. Additions:		
(a) Payment for use of intangibles	7a.	
(b) Domestic Production Activities Deduction (see instructions)	7b.	
(c) Other (see instructions) (attach rider)	7c.	
8. Total additions (add lines 1 through 7c)	8.	-133,632.
9a. Dividends from subsidiary capital (itemize on rider) (see instr.)	9a.	
9b. Interest from subsidiary capital (itemize on rider) (see instructions)	9b.	
9c. Gains from subsidiary capital	9c.	
10. 50% of dividends from nonsubsidiary corporations (see instructions)	10.	
11. New York City net operating loss deduction (attach Form NYC-NOLD-GCT) (see instr.)	11.	
12. Gain on sale of certain property acquired prior to 1/1/66 (see instructions)	12.	
13. NYC and NYS tax refunds included in Sch. B, line 8 (see instructions)	13.	
14. Sales tax refunds or credits from vendors or New York State. Also include on page 1, Sch. A, line 12 (see instr.)	14.	
15. Wages and salaries subject to federal jobs credit (attach federal Form 5884) (see instructions)	15.	
16. Depreciation and/or adjustment calculated under pre-ACRS or pre - 9/11/01 rules (attach Form NYC-399 and/or NYC-399Z) (see instr.)	16.	
17. Other deductions: (see instructions) (attach rider)	17.	
18. Total deductions (add lines 9a through 17)	18.	
19. Entire net income (line 8 less line 18) (see instructions)	19.	0.
20. If the amount in line 19 is not correct, enter correct amount here and explain on rider (see instr.)	20.	
21. Investment income - (complete lines a through h below) (see instructions)		
(a) Dividends from nonsubsidiary stocks held for investment (see instructions)	21a.	
(b) Interest from investment capital (include federal, state and municipal obligations) (itemize on rider)	21b.	
(c) Net capital gain (loss) from sales or exchanges of nonsubsidiary securities held for investment (itemize on rider or attach Federal Schedule D)	21c.	
(d) Income from assets included on line 3 of Schedule D	21d.	
(e) Add lines 21a through 21d inclusive	21e.	
(f) Deductions directly or indirectly attributable to investment income (attach list) (see instructions)	21f.	
(g) Balance (subtract line 21f from line 21e)	21g.	
(h) Interest on bank accounts included in income reported on line 21d	21h.	
22. New York City net operating loss deduction apportioned to investment income (attach rider) (see instr.)	22.	
23a. Investment income (line 21g less line 22)	23a.	
23b. Investment income to be allocated (see instructions)	23b.	
24. Business income to be allocated (line 19 or line 20 less line 23b)	24.	
25. Allocated investment income (line 23b multiplied by: 0.0000 % - Schedule D, line 2) (see instr.)	25.	
26. Allocated business income (line 24 multiplied by: 100.0000 % - Schedule H, line 5)	26.	0.
27. Total allocated net income (line 25 plus line 26 (enter at Schedule A, line 1))	27.	0.

**S CORPORATIONS**  
see instructions  
for line 1



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11

ATTACH ALL PAGES OF FEDERAL RETURN



SCHEDULE C		Subsidiary Capital and Allocation					
A	B	C	D	E	F	G	
DESCRIPTION OF SUBSIDIARY CAPITAL LIST EACH ITEM (USE RIDER IF NECESSARY)	EMPLOYER IDENTIFICATION NUMBER	% of Voting Stock Owned	Average Value	Liabilities Directly or Indirectly Attributable to Subsidiary Capital	Net Average Value (column C minus column D)	Issuer's Allocation Percentage	Value Allocated to NYC (column E x column F)
		%				%	
1. Total Cols C, D and E (including items on rider)		1.					
2. Total Column G - Allocated subsidiary capital: Transfer this total to Schedule A, line 5						2.	

SCHEDULE D		Investment Capital and Allocation					
A	B	C	D	E	F	G	H
DESCRIPTION OF INVESTMENT LIST EACH STOCK AND SECURITY (USE RIDER IF NECESSARY)	No. of Shares or Amount of Securities	Average Value	Liabilities Directly or Indirectly Attributable to Investment Capital	Net Average Value (column C minus column D)	Issuer's Allocation Percentage	Value Allocated to NYC (column E x column F)	Gross Income from Investment
					%		
1. Totals (incl. 1. items on rider)							
2. Investment allocation percentage (line 1G divided by line 1E rounded to the nearest one hundredth of a percentage point)				2.		%	
3. Cash - (To treat cash as investment capital, you must include it on this line.) 3.							
4. Investment capital (total of lines 1E and 3E - enter on Schedule E, line 10) 4.							

SCHEDULE E		Computation and Allocation of Capital		
Basis used to determine average value in column C. Check one. (Attach detailed schedule.)				
<input type="checkbox"/> - Annually <input type="checkbox"/> - Semi-annually <input type="checkbox"/> - Quarterly				
<input type="checkbox"/> - Monthly <input type="checkbox"/> - Weekly <input type="checkbox"/> - Daily				
		COLUMN A Beginning of Year	COLUMN B End of Year	COLUMN C Average Value
1. Total assets from federal return				1.
2. Real property and marketable securities included in line 1				2.
3. Subtract line 2 from line 1				3.
4. Real property and marketable securities at fair market value				4.
5. Adjusted total assets (add lines 3 and 4)				5.
6. Total liabilities (see instructions)				6.
7. Total capital (column C, line 5 less column C, line 6)				7.
8. Subsidiary capital (Schedule C, column E, line 1)				8.
9. Business and investment capital (line 7 less line 8) (see instructions)				9.
10. Investment capital (Schedule D, line 4) (see instructions)				10.
11. Business capital (line 9 less line 10)				11.
12. Allocated investment capital (line 10 x _____ % from Schedule D, line 2)				12.
13. Allocated business capital (line 11 x _____ % from Schedule H, line 5)				13.
14. Total allocated business and investment capital (line 12 plus line 13) (enter at Schedule A, line 2a or 2b) 14.				
15. Issuer's allocation percentage (sum of Sch. E, line 14 and Sch. C, col. G, line 2 + Sch. E, line 7 rounded to the nearest one hundredth of a percentage point) (enter on page 2 - line 21a. See Instr.) 15.				100.0000 %

SCHEDULE F		Certain Stockholders	
Include all stockholders owning in excess of 5% of taxpayer's issued capital stock who received any compensation, including commissions.			
Name, Country and U.S. Zip Code (Attach rider if necessary)	Social Security Number	Official Title	Salary & All Other Compensation Received from Corporation (If none, enter "0")

1. Total, including any amount on rider. (Enter on Schedule A, line 28)

1.



**SCHEDULE I Business Allocation for Aviation Corporations and Corporations Operating Vessels****Part 1 Business allocation for aviation corporations**

		AVERAGE FOR THE YEAR	
		COLUMN A - NEW YORK CITY	COLUMN B - EVERYWHERE
1. Aircraft arrivals and departures	1.		
2. New York City percentage (column A divided by column B)	2.		%
3. Revenue tons handled	3.		
4. New York City percentage (column A divided by column B)	4.		%
5. Originating revenue	5.		
6. New York City percentage (column A divided by column B)	6.		%
7. Total of lines 2, 4 and 6	7.		%
8. Allocation percentage (line 7 divided by three rounded to the nearest one hundredth of a percentage point) (enter on Schedule H, line 5)	8.		%

**Part 2 Business allocation for corporations operating vessels in foreign commerce**

	COLUMN A - NEW YORK CITY TERRITORIAL WATERS	COLUMN B - EVERYWHERE
1. Aggregate number of working days	1.	
2. Allocation percentage (column A divided by column B rounded to the nearest one hundredth of a percentage point) (enter on Schedule H, line 5)	2.	%

**SCHEDULE J The following information must be entered for this return to be complete. (REFER TO INSTRUCTIONS BEFORE COMPLETING THIS SECTION.)**

- 1a. New York City principal business activity JOBBER
- 1b. Other significant business activities (attach schedule, see instructions) \_\_\_\_\_
2. Trade name of reporting corporation, if different from name entered on page 1 \_\_\_\_\_
3. Is this corporation included in a consolidated federal return? \_\_\_\_\_ YES ☒ NO
- If "YES", give parent's name \_\_\_\_\_ EIN \_\_\_\_\_  
enter here and on page 2, line 25
4. Is this corporation a member of a controlled group of corporations as defined in IRC section 1563, disregarding any exclusion by reason of paragraph (b)(2) of that section? \_\_\_\_\_ YES ☒ NO
- If "YES", give common parent corporation's name, if any \_\_\_\_\_ EIN \_\_\_\_\_  
enter here and on page 2, line 27
5. Has the Internal Revenue Service or the New York State Department of Taxation and Finance corrected any taxable income or other tax base reported in a prior year, or are you currently under audit? \_\_\_\_\_ YES ☒ NO
- If "YES", by whom? \_\_\_\_\_ Internal Revenue Service State period(s): Beg.: \_\_\_\_\_ End.: \_\_\_\_\_  
MMDDYY MMDDYY
- \_\_\_\_\_ New York State Department of Taxation and Finance State period(s): Beg.: \_\_\_\_\_ End.: \_\_\_\_\_  
MMDDYY MMDDYY
6. If "YES" to question 5, has Form(s) NYC-3360 (Report of Federal/State Change in Tax Base) been filed? \_\_\_\_\_ YES ☒ NO
7. Did this corporation make any payments treated as interest in the computation of entire net income to shareholders owning directly or indirectly, individually or in the aggregate, more than 50% of the corporation's issued and outstanding capital stock? If "YES", complete the following (if more than one, attach separate sheet) \_\_\_\_\_ YES ☒ NO
- Shareholder's name: \_\_\_\_\_ SSN/EIN: \_\_\_\_\_
- Interest paid to Shareholder: \_\_\_\_\_ Total indebtedness to shareholder described above: \_\_\_\_\_ Total interest paid: \_\_\_\_\_
8. Was this corporation a member of a partnership or joint venture during the tax year? \_\_\_\_\_ YES ☒ NO
- If "YES", attach schedule listing name(s) and Employer Identification Number(s).
9. At any time during the taxable year, did the corporation have an interest in real property (including a leasehold interest) located in NYC or a controlling interest in an entity owning such real property? \_\_\_\_\_ YES ☒ NO
10. a) If "YES" to 9, attach a schedule of such property, indicating the nature of the interest and including the street address, borough, block and lot number.
- b) Was any NYC real property (including a leasehold interest) or controlling interest in an entity owning NYC real property acquired or transferred with or without consideration? \_\_\_\_\_ YES ☒ NO
- c) Was there a partial or complete liquidation of the corporation? \_\_\_\_\_ YES ☒ NO
- d) Was 50% or more of the corporation's ownership transferred during the tax year, over a three-year period or according to a plan? \_\_\_\_\_ YES ☒ NO
11. If "YES" to 10b, 10c or 10d, was a Real Property Transfer Tax Return (Form NYC-RPT) filed? \_\_\_\_\_ YES ☒ NO
12. If "NO" to 11, explain: \_\_\_\_\_
13. Does the corporation have one or more qualified subchapter S subsidiaries? \_\_\_\_\_ YES ☒ NO
- If "YES": Attach a schedule showing the name, address and EIN, if any, of each QSSS and indicate whether the QSSS filed or was required to file a City business income tax return. (see instructions)
14. If a federal return was filed on Form 1120S, enter the number of Fed K1 returns attached: 1
15. Does this taxpayer pay rent greater than \$200,000 for any premises in NYC in the borough of Manhattan south of 96th Street for the purpose of carrying on any trade, business, profession, vocation or commercial activity? \_\_\_\_\_ YES ☒ NO
16. If "YES", were all required Commercial Rent Tax Returns filed? \_\_\_\_\_ YES ☒ NO
- Please enter Employer Identification Number which was used on the Commercial Rent Tax Return: \_\_\_\_\_

**SCHEDULE K Federal Return Information**

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

Enter on lines 1 through 10 in the Federal Amount column the amounts reported on your federal return or pro-forma Federal return. (See instructions)

**Federal 1120**

	▼ Federal Amount ▼
1. Dividends	1.
2. Interest income	2.
3. Capital gain net income	3.
4. Other income	4.
5. Total income	5. 196,347.
6. Bad debts	6.
7. Interest expense	7. 3,834.
8. Other deductions	8. 45,538.
9. Total deductions	9. 332,576.
10. Net operating loss deduction	10.

**CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION**

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete. Email Address: \_\_\_\_\_  
 I authorize the Dept. of Finance to discuss this return with the preparer listed below. (See instructions) YES ☒ NO ☐

SIGN HERE: Signature of officer		Title	PRESIDENT	Date		Preparer's SSN or PTIN
PREPARER'S USE ONLY →	Preparer's signature	Preparer's printed name	ALLAN C COHN CPA	Check if self-employed <input checked="" type="checkbox"/>	Date	02-26-15
	COHN & LANGER, CPAS					P00447700
	18 BLANCHE ST					
	PLAINVIEW NY					45-4014297
					11803-4607	
	▲ Firm's name (or yours, if self-employed)	▲ Address			▲ Zip Code	

**MAILING INSTRUCTIONS**

Attach copy of all pages of your federal tax return or pro forma federal tax return.

Make remittance payable to the order of NYC DEPARTMENT OF FINANCE. Payment must be made in U.S. dollars and drawn on a U.S. bank.

To receive proper credit, you must enter your correct Employer Identification Number on your tax return and remittance.

The due date for the calendar year 2014 return is on or before March 16, 2015.

For fiscal years beginning in 2014, file on or before the 15th day of the 3rd month following the close of the fiscal year.

**ALL RETURNS EXCEPT REFUND RETURNS**  
 NYC DEPARTMENT OF FINANCE  
 GENERAL CORPORATION TAX  
 P.O. BOX 5564  
 BINGHAMTON, NY 13902-5564

**REMITTANCES**  
**PAY ONLINE WITH FORM NYC-200V**  
**AT NYC.GOV/ESERVICES**  
**OR**  
**Mail Payment and Form NYC-200V ONLY to:**  
 NYC DEPARTMENT OF FINANCE  
 P.O. BOX 3646  
 NEW YORK, NY 10008-3646

**RETURNS CLAIMING REFUNDS**  
 NYC DEPARTMENT OF FINANCE  
 GENERAL CORPORATION TAX  
 P.O. BOX 5563  
 BINGHAMTON, NY 13902-5563



**NYC-ATT-S-CORP**

Finance

**CALCULATION OF FEDERAL TAXABLE  
INCOME FOR S CORPORATIONS**

2014

**ATTACH TO FORM NYC-3A, NYC-3L, NYC-4S OR NYC-4SEZ**

All federal S Corporations must complete this schedule and include it when filing Form NYC-3A, NYC-3L, NYC-4S, or NYC-4SEZ. Amounts on Part I, Lines 1 through 8, 12 and 13 and Part II, Lines 15 through 18 are carried directly from your Federal form 1120S, Schedule K.

**SPECIFIC LINE INSTRUCTIONS****PART I**

**Line 9** - If the calculated value for line 9 is negative, enter 0.

**Line 10** - The capital loss carryover from prior years that may be used in the current tax year for City purposes. This amount may not exceed the value on line 9.

**Line 11** - Subtract Line 10 from Line 9.

**PART II**

**Line 19** - If the Domestic Production Activities Deduction has been taken on the corporate level, do not include it on line 19, but enter it on Part II Line 20.

**Line 20** - If the Domestic Production Activities Deduction has not been taken on the corporate level, or if the corporation is not eligible to take the deduction, leave line 20 blank.

**PART III**

**Line 22 - Federal Taxable Income:** Calculate the value of Part I, Line 14 minus Part II, Line 21 and enter

form NYC-4S, or on Schedule B2, Line 1 of your form NYC-4SEZ. For members of a Combined Group included in an NYC-3A, enter on Form NYC-3A, Schedule B Column A, line 1, if this form NYC-ATT-S-Corp is for the reporting corporation. For any other member of the combined group, enter on Form NYC-3A/B, Schedule B, line 1, in the column for this corporation. If there is only one other member of the combined group, enter on Form NYC-3A, Schedule B Column B, line 1

For CALENDAR YEAR 2014 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Name as shown on NYC-3A/ATT, NYC-3L, NYC-4S or NYC-4SEZ

VERATEX INC

EMPLOYER IDENTIFICATION NUMBER

13-2804148

**PART I - ADDITIONS TO ORDINARY BUSINESS INCOME**

	From Federal Form 1120S	
1. Ordinary business income (loss)	Schedule K, Line 1	1. -136,229.
2. Net rental real estate income (loss)	Schedule K, Line 2	2.
3. Other net rental income (loss)	Schedule K, Line 3c	3.
4. Interest income	Schedule K, Line 4	4.
5. Ordinary dividends	Schedule K, Line 5a	5.
6. Royalties	Schedule K, Line 6	6.
7. Net short-term capital gain (loss)	Schedule K, Line 7	7.
8. Net long-term capital gain (loss)	Schedule K, Line 8a	8.
9. Sum of lines 7 and 8	See Instructions	9.
10. Capital Loss Carryover	See Instructions	10.
11. Net Capital Gain	See Instructions	11.
12. Net Section 1231 gain (loss)	Schedule K, Line 9	12.
13. Other income (loss)	Schedule K, Line 10	13.
14. <b>TOTAL ADDITIONS</b> (Sum of lines 1 through 6 plus lines 11 through 13)		14. -136,229.

**PART II - DEDUCTIONS FROM ORDINARY BUSINESS INCOME**

Make applicable adjustments for C Corporation treatment of items 15 through 21

15. Section 179 deduction	Schedule K, Line 11	15.
16. Contributions	Schedule K, Line 12a	16.
17. Investment interest expense	Schedule K, Line 12b	17.
18. Section 59(e)(2) expenditures	Schedule K, Line 12c(2)	18.
19. Other deductions (do not include Domestic Productions Activities Deduction)	See Instructions	19.
20. Domestic Production Activities Deduction (If deducted at corporate level)	See Instructions	20.
21. <b>TOTAL DEDUCTIONS</b> (Sum of lines 15 through 20)		21.

**PART III - CALCULATION OF FEDERAL TAXABLE INCOME**

22. <b>Federal Taxable Income</b>	See Instructions	22. -136,229.
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NYC - ATT-S-CORP 2014

11

# NET OPERATING LOSS DEDUCTION COMPUTATION 2014

## GENERAL CORPORATION TAX

ATTACH TO FORM NYC-3A, NYC-3L, NYC-4S or NYC-4SEZ

For CALENDAR YEAR 2014 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Print or Type ▼

Name as shown on NYC-3A, NYC-3L, NYC-4S or NYC-4SEZ:

VERATEX INC

EMPLOYER IDENTIFICATION NUMBER

13-2804148

### SCHEDULE A - NYC Net Operating Loss Deduction Schedule (NOLD)

APPLICABLE YEAR	COLUMN A - Tax Year	COLUMN B - Federal Taxable Income (Loss) before NOL and special deductions	COLUMN C - Amount from NYC-3A, NYC-3L, NYC-4S or NYC-4SEZ (See instructions)	COLUMN D - NYC Net Operating Loss Generated (attach rider for Separate Return Limitation Year (SRLY) Loss)	COLUMN E - NYC Net Operating Loss Utilized	COLUMN F - NYC Net Operating Loss Expired	COLUMN G - NYC Net Operating Loss Remaining
<b>A. NOL Carryforward from prior years</b> →							
1. 20th pre-ceeding yr							
2. 19th pre-ceeding yr							
3. 18th pre-ceeding yr							
4. 17th pre-ceeding yr							
5. 16th pre-ceeding yr	12-31-98						
6. 15th pre-ceeding yr	12-31-99						
7. 14th pre-ceeding yr	12-31-00						
8. 13th pre-ceeding yr	12-31-01						
9. 12th pre-ceeding yr	12-31-02						
10. 11th pre-ceeding yr	12-31-03						
11. 10th pre-ceeding yr	12-31-04						
12. 9th pre-ceeding yr	12-31-05						
13. 8th pre-ceeding yr	12-31-06						
14. 7th pre-ceeding yr	12-31-07						
15. 6th pre-ceeding yr	12-31-08	2,062.	2,062.				
16. 5th pre-ceeding yr	12-31-09	14,130.	15,130.				
17. 4th pre-ceeding yr	12-31-10	7,545.	8,545.				
18. 3rd pre-ceeding yr	12-31-11	-127,930.	-125,392.	125,392.			125,392.
19. 2nd pre-ceeding yr	12-31-12	-85,367.	-82,947.	82,947.			208,339.
20. 1st pre-ceeding yr	12-31-13	-112,684.	-110,095.	110,095.			318,434.
21. Current year	12-31-14	-136,229.	-133,632.	133,632.			452,066.

Note: Current Year's Net Operating Loss Utilized should be carried forward to NYC-3A or NYC-3L, Sch. B, Line 11 or NYC-4S, Sch. B, Line 6a or NYC-4SEZ, Sch. B2, line 4.

Were there any special federal Net Operating Loss elections? YES ☐ NO ☒

### SCHEDULE B - Complete the Net Operating Loss Apportionment to Investment Income (if applicable)

#### NYC Net Operating Loss Apportionment To Investment Income

##### DESCRIPTION

- Investment Income before Net Operating Loss from NYC-3A or NYC-3L, Sch. B line 21g
- Entire Net Income before Net Operating Loss from NYC-3A or NYC-3L, Sch. B line 19 or 20 plus line 11
- Ratio: (Divide line 1 by line 2)
- Net Operating Loss (NYC-3A or NYC 3L, Sch. B line 11)
- Net Operating Loss Apportionment to Investment Income (multiply line 3 by line 4 and enter on NYC-3A or NYC-3L, Sch. B line 22)

AMOUNT	
1.	
2.	
3.	%
4.	
5.	

<b>NYC</b>	<b>Federal Net Operating Loss Worksheet</b>	<b>2014</b>
For calendar year 2014 or fiscal year beginning _____, ending _____		

Name  VERATEX INC	Employer Identification Number  13-2804148
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Preceding Taxable Year	Income/(Loss)	Prior Year		Current Year	Next Year
		NOL Utilized (Income Offset)	Carryovers	(Income Offset By NOL Carryback)/Carryover NOL Utilized	Carryover
17th 12-31-97					
16th 12-31-98					
15th 12-31-99					
14th 12-31-00					
13th 12-31-01					
12th 12-31-02					
11th 12-31-03					
10th 12-31-04					
9th 12-31-05					
8th 12-31-06					
7th 12-31-07					
6th 12-31-08	2,062				
5th 12-31-09	14,130				
4th 12-31-10	7,545				
3rd 12-31-11	-127,930		127,930		127,930
2nd 12-31-12	-85,367		85,367		85,367
1st 12-31-13	-112,684		112,684		112,684
NOL Carryover Available To Current Year			325,981		
Current Year	-136,229				136,229
NOL Carryover Available To Next Year					462,210

## New York Statements

### Statement 1 - Form NYC-3L, Page 3, Schedule B, Lines 5a and 5b - NY State Franchise Tax and Other Taxes

Description	NYS Tax	MTA Tax	New York City Tax	Other Income Taxes
NYS CORP TAXES	\$ 1,000	\$	\$	\$
NYC CORP TAXES			1,597	
Total	\$ 1,000	\$ 0	\$ 1,597	\$ 0