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PART III			8- 40524	
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Information Requ	FACING PAG ired of Brokers and Deal		on 17 of the	
· · · · · · · · · · · · · · · · · · ·	Exchange Act of 1934 an			
REPORT FOR THE PERIOD BEGIN	12/31/2009			
REPORT FOR THE FERIOD BEGIN	MM/DD/YY	AND ENDING	MM/DD/YY	
	A. REGISTRANT IDENT	IFICATION		
NAME OF BROKER-DEALER: Cart	er Capital Corporation		OFFICIAL USE ONLY	
ADDRESS OF PRINCIPAL PLACE OF BUSINESS: (Do not use P.O. Box No.)		O. Box No.)	FIRM I.D. NO.	
167 Old Post Road				
	(No. and Street)			
Southport	СТ		06890	
(City)	(State)	· · · · ·	(Zip Code)	
NAME AND TELEPHONE NUMBEI Michael Carter	R OF PERSON TO CONTACT		EPORT -254-3333	
			(Area Code – Telephone Number)	
В	. ACCOUNTANT IDENT	IFICATION		
INDEPENDENT PUBLIC ACCOUNT	TANT whose opinion is contain	ed in this Report*		
Dworken, Hillman, LaMorte & Sterczal	a, P.C.			
	(Name – if individual, state l	ast, first, middle name)	n 111	
4 Corporate Drive, Suite 488	Shelton	СТ	06484	
(Address)	(City)	(State)	(Zip Code)	
CHECK ONE:				
Certified Public Accour	itant			
D Public Accountant				
Accountant not resident	in United States or any of its p	ossessions.		
	FOR OFFICIAL USI	ONLY		

AB

*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See Section 240.17a-5(e)(2)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1410 (06-02)

OATH OR AFFIRMATION

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I,	, swear (or affirm) that, to the best of
my knowledge and belief the accompanying Carter Capital Corporation	g financial statement and supporting schedules pertaining to the firm of , as
of December 31	, 20 <u>09</u> , are true and correct. I further swear (or affirm) that
neither the company nor any partner, prop classified solely as that of a customer, exce	rietor, principal officer or director has any proprietary interest in any account pt as follows:
Ava Ula Notary Public	<u>Signature</u> <u>PMS:DENT</u> Title GINA VOLPACCHIO Notary Public My Commission Expires Feb. 28, 2011
 (f) Statement of Changes in Liabilities (g) Computation of Net Capital. (h) Computation for Determination of 1 (i) Information Relating to the Possess (j) A Reconciliation, including approprion Computation for Determination of the Computation for Determination of the Computation for Determination of the Computation. (k) A Reconciliation between the auditic consolidation. (l) An Oath or Affirmation. (m) A copy of the SIPC Supplemental Field (n) A report describing any material in advancement. 	e boxes): Condition. ers' Equity or Partners' or Sole Proprietors' Capital. Subordinated to Claims of Creditors. Reserve Requirements Pursuant to Rule 15c3-3. tion or Control Requirements Under Rule 15c3-3. riate explanation of the Computation of Net Capital Under Rule 15c3-1 and the the Reserve Requirements Under Exhibit A of Rule 15c3-3. ed and unaudited Statements of Financial Condition with respect to methods of Report. lequacies found to exist or found to have existed since the date of the previous audit.
**For conditions of confidential treatment of	of certain portions of this filing, see section 240.17a-5(e)(3).

CARTER CAPITAL CORPORATION

STATEMENTS OF CHANGES IN SHAREHOLDER'S EQUITY

	Common <u>Stock</u>	Retained Earnings <u>(Deficit)</u>	<u> </u>
Balance, January 1, 2008	\$21,000	(\$ 272)	\$20,728
Net income		4,012	4,012
Balance, December 31, 2008	\$21,000	\$ 3,740	\$24,740
Net income		11,045	11,045
Balance, December 31, 2009	<u>\$21,000</u>	<u>\$14,785</u>	<u>\$35,785</u>