

# CT-32-M

For calendar year **1987**

New York State Department of Taxation and Finance

or taxable period

beginning

ending

## Metropolitan Transportation Business Tax Surcharge Return

Article 32, Section 1455-B

For office use only

Affix Preaddressed Label Here →	Employer identification number	File number	Date received
	Name		
Mail to: NYS Tax Department Processing Unit P.O. Box 1909 Albany, N.Y. 12201	Number	Street	Business group code number (from federal return)
	City or town	State	

All corporations required to file Form CT-32 must file this form.

Does the above named corporation (taxable under Article 32 of the Tax Law) do business in the Metropolitan Commuter Transportation District (MCTD), which includes the counties of New York, Bronx, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester?

Yes

No

If you answered yes, complete this form and pay the tax surcharge.

If you answered no, it is not necessary to complete Schedule N or O. However, this form must be signed by an officer and returned to: **NYS Tax Department, Processing Unit, P.O. Box 1909, Albany, NY 12201-1909**

A. Payment — pay amount shown on line 9. Make check payable to: New York State Corporation Tax	Payment enclosed
\$	

### Schedule N — Computation of Tax Surcharge

1. Net New York State Franchise Tax from Form CT-32, Schedule A, line 7	1	
2. MCTD Allocation percentage from Schedule O, line 13	2	%
3. Allocated tax (multiply line 1 by line 2)	3	
4. Tax surcharge (multiply line 3 by 17%)	4	
5. Prepayments (a) Payment with CT-5		
(b) Credit transferred from Form CT-		
Total prepayments claimed (add lines 5a and 5b)	5	
6. Balance (subtract line 5 from line 4)	6	
7. Interest (compute using amount on line 6)	7	
8. Additional charges (compute using amount on line 6)	8	
9. Balance due (Add lines 6, 7 and 8 — enter payment on line A)	9	
10. Overpayment (Subtract line 4 from line 5)		
a. Refund of overpayment	10a	
b. Credit to N.Y. State Franchise Tax CT-	10b	

### Certification by an Elected Officer of the Corporation

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

Date	Signature of officer	Official title
Date	Signature of preparer or name of firm	Preparer's address

SCHEDULE O – Computation of MCTD Allocation Percentage		Column A	Column B
		Gross Income within MCTD	Gross Income within New York State
11. Gross income within New York State.....	11		\$
12. Gross income within the MCTD .....	12	\$	
13. MCTD Gross Income Allocation Percentage (Divide Column A by Column B).....			13 %

**INSTRUCTIONS**

**Who Must File**

Every banking corporation doing business in New York State that is subject to Article 32 of the New York State Tax Law must file. This includes all taxpayers that file Form CT-32 and all taxpayers that file on a combined basis.

**Who Must Pay the Surcharge**

Every taxpayer filing Form CT-32 who is doing business within the Metropolitan Commuter Transportation District (MCTD) must pay a business tax surcharge. The MCTD includes the counties of New York, Bronx, Queens, Kings, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester.

**Tax Rate**

The tax rate is 17% for calendar year 1987 or fiscal years ending in 1988.

The Metropolitan Transportation Business (MTB) tax surcharge applies to taxable years beginning on or after January 1, 1982, but ending before December 31, 1990. The MTB surcharge will not be imposed upon any taxpayer for more than 96 months.

The surcharge rate is applied to the portion of tax, after deduction of any credits, imposed under Article 32 attributable to the taxpayer's business activity carried on within the MCTD.

**Time for Filing**

Two and one-half months after the end of the taxable year.

**Payment of Tax Surcharge**

The entire tax surcharge must be paid on or before the original due date of the return.

**Extension of Time for Filing Tax Surcharge Return**

A request for an extension of time to file a tax surcharge return must be filed on Form CT-5 on or before the due date of the return, for the taxable period for which the extension is requested.

Requirements for a valid extension for all MTB tax surcharge returns are as follows:

- a. A separate application for extension, along with any estimated tax surcharge payments that may be due, must be filed on or before the due date of the return for the taxable period for which the extension is requested, **and**
- b. The total tax surcharge payment for the period for which this extension is requested must equal 90% of the tax surcharge as finally determined.

**Specific Instructions**

Answer "yes" or "no" to the question preceding Schedule N. **It is essential that banking corporations not doing business in the MCTD disclaim liability for the tax surcharge by answering "no".**

**Schedule N – Computation of Tax Surcharge**

Line 1. Enter your New York State franchise tax from your franchise tax report, Form CT-32, Schedule A, line 7.

Line 2. Enter your MCTD allocation percentage from **Schedule O**, line 13.

Line 5a. Enter any payment made with Form CT-5, Application for **Six Month Extension**.

Line 5b. You can apply an overpayment of franchise tax made on your franchise tax report, Form CT-32. Enter at this line the form number, period in which the overpayment occurred (use month and year) and amount to be applied. At the overpayment line of your Form CT-32, indicate the amount of money to be applied to the **MTB tax** surcharge.

Line 7. If you do not pay the tax on or before the due date (without regard to any extension of time) you must pay interest on the amount of the underpayment from the due date to the date paid. Determine the interest rate in accordance with Part 603 of the Tax Regulations.

Line 8. Additional charges for late filing are computed on the amount of tax less any payment made on or before the prescribed due date.

- a. If a return is not filed when due or if the application for extension is invalid, add to the tax 5% per month up to 25% (Section 1085 (a)(1)(A)).
- b. If a return is not filed within 60 days of the prescribed due date, the addition to tax cannot be less than the smaller of \$100 or 100% of the amount required to be shown as tax (Section 1085 (a)(1)(B)).
- c. In case of failure to pay the tax shown on a return, add to the tax, ½ % per month up to 25% (Section 1085(a)(2)).
- d. The total of the additional charges in a and c may not exceed 5% for any one month, except as provided for in b above (Section 1085(a)).

If you think you are not liable for these additional charges, attach a statement to your return explaining the delay in filing and/or payment (Section 1085).

**Schedule O – Computation of MCTD Gross Income Allocation Percentage**

The MCTD gross income allocation percentage is determined by dividing the taxpayer's gross income within the MCTD by the taxpayer's gross income within New York State. Gross income means federal gross income as defined in Section 61 of the Internal Revenue Code plus any amount excluded from federal gross income under Section 103 of the Internal Revenue Code minus the eligible gross income of an international banking facility, if the taxpayer elects to utilize the IBF modification. (see Regulations, Section 23-1.3(b)).

- A taxpayer that does all of its New York State business within the 12 counties of the MCTD can enter 100% at line 13 and at line 2 of Schedule N.
- A taxpayer that does part of its business outside of the MCTD must compute its MCTD gross income allocation percentage by completing Schedule O.

Corporations filing on a combined basis are required to file only one report for the combined group. Combined figures, as shown on your Form CT-32-A, should be used to complete this form.