

Metropolitan Transportation Business Tax Surcharge Return Tax Law — Article 9, Section 183-a

For calendar year 1989

For office use only

Name	-			—	· · · · · · · · · · · · · · · · · · ·		cation number,			
				place lae	BEL HERE		s or owner/ information	Date rece	nived	
Number and street City or town			State	ZIP code		anged, file	Date rece			
Trumber and street.				Otalo	2.11 0000		TF-95 (see			
						instruct	tions).			
Trad	e name		Sta	ate or country of inco	orporation		date			
1						1				
Bus	iness telephone number	Foreign	corporation	s: date began busine	ess in NYS					
1) .			•						
If you	do business, employ capita	al own or lease n	roperty or	maintain an offic	e in the Metro	nolitan C	Commuter Trans	nortation	District (MCTD), (cou	inties of
New 1	York, Bronx, Kinas, Queens,	, Richmond, Dutc	hess, Nas	sau, Orange, Putr	nam, Rockland	i, Suffolk	and Westchest	er), you i	must file this form. If	not,
you d	lo not have to file this form.	However, you mu	st disclain	n liability for the N	MTB tax surcha	arge on l	Form CT-183.			
A. F	Payment — pay amount s	shown on line 10	0 — Mak	e check payable	e to: New Yo	rk State	Corporation	Тах	Payment enclosed	
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	Tax surcharge (multiply line							1 1		-
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5b (Credit transferred from Fo	orm CI		A	50					7
	Total prepayments claime									_
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	Additional late charges (c	•							<u> </u>	
	Balance due (add lines 7,							1 1		
	Overpayment <i>(if line 4 is s</i>									
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13	Amount of overpayment to	be credited to N	IYS franc	hise tax Form C1	F		Period	13		
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Part I — MCTD Allocation — Section 183-a — Ger			_ Gener					erage Value for the Year		
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14	Bills and accounts rece	ivable			<u>1</u>	4				
15	Shares of stock of other	r companies ow	ned (atta	ch list showing						
	corporate name, shares he	eld and actual val	ue)		1	15				
16	Bonds, loans and other									
	the United States, held,				1	16				
17	Leaseholds	· ·	=			7	·	1		1
18	Real estate owned					18				
	All other assets (except of					19				
19	• •			-		20	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		And the first state of the first	·
20	Total (add lines 14 through				1	.0				1
21	MCTD allocation percer			-				. [
	enter here and on line 2)					21		- %		
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22	00 0				 	2			www.paper	
23 MCTD allocation percentage (divide line 22, col			22, colum	nn A by column B						
enter here and on line 2)						. 23			· · · · · · · · · · · · · · · · · · ·	
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Instructions

General Information

Change of Business Information - If there have been any changes in your business' name, ID number, mailing address, business address, telephone number or owner/officer information, complete Form DTF-95, Change of Business Information. If you need a form, call 1 800 462-8100 (from out of state (518) 438-1073) to request one.

Mail your completed Form DTF-95 to:

NYS Tax Department, Registration Section Building 8, Room 409, W.A. Harriman Campus, Albany, NY 12227

Who Must File

Corporations, joint stock companies, associations and publicly traded partnerships which do transportation or transmission business, file Forms CT-183 and CT-184 and conduct business in the Metropolitan Commuter Transportation District (MCTD), must file Forms CT-183-M and CT-184-M and 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.

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

Tax Rate

The tax rate for calendar year 1989 is 17%. Deduct any tax credits from the tax imposed under sections 183 and 184. Then apply the surcharge rate to the portion attributable to activities carried on within the MCTD.

When and Where to File

Mail this 1989 return and payment due to:

NYS Corporation Tax, Processing Unit P.O. Box 1909, Albany, NY 12201-1909

on or before March 15, 1990.

Extension of Time for Filing Tax Surcharge Return

You may request additional time to file a tax surcharge return. File Form CT-5.9 on or before the due date of the return for which the extension is requested. In order for the extension to be valid, the payment must equal or exceed 90% of the surcharge as finally determined.

Computation of Tax Surcharge

Line 1 - Enter your New York State franchise tax from your 1988 return, Form CT-183, line 4.

Line 2 - Enter the MCTD allocation percentage from line 21 or line 23.

Line 5a - Enter any payment made with Form CT-5.9, Application for Three-Month Extension.

Line 5b - You can apply an overpayment of franchise tax from Form CT-183. Enter the period in which the overpayment occurred (month and year) and amount to be applied. On the overpayment line of Form CT-183 indicate the amount of money to be applied to the MTB tax surcharge.

Line 7 - If line 6 is smaller than line 4, subtract line 6 from line 4. If line 4 is smaller than line 6, go to line 11 for overpayments.

Line 8 - If you do not pay the tax by March 15, 1990, you must pay interest on the amount of the underpayment from the due date to the date paid. You may call the Taxpayer Assistance Bureau for the current rate or to have the interest computed for you. From within New York State call 1 800 CALL TAX (1 800 225-5829); from outside New York State call (518) 438-8581.

Line 9 - Additional charges for late filing are computed on the amount of tax less any payment made on or before the due date.

- a. If you do not file a return 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 you do not file a return within 60 days of the 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. If you do not pay the tax shown on the 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).

Line 11 - If line 4 is smaller than line 6, subtract line 4 from line 6 and enter the result on line 11.

Schedule A — Computation of MCTD Allocation Percentage — Section 183-a

If you do **all** of your New York State business within the 12 counties of the MCTD you do not need to complete this schedule. Enter 100% on line 2. If you do part of your New York State business **outside** the MCTD, you must compute an MCTD allocation percentage by completing the appropriate part(s) of this schedule.

Corporations taxable under Article 9, section 183, are required to pay an annual tax, computed on the basis of the preceding year. Therefore, the computation of your 1989 tax surcharge and MCTD allocation percentage must be based on amounts from your 1988 Form CT-183. This return was due on March 15, 1989.

Part I — General Transportation Corporations

All corporations taxable under section 183-a except corporations operating vessels, must use Part I of Schedule A to compute their MCTD allocation percentage. The same instructions used for 1988 Form CT-183, Schedule B, apply except you must substitute "New York State" for "Everywhere" and "MCTD" for "New York State."

Part II — Corporations Operating Vessels in MCTD Territorial Waters

Corporations operating vessels in the navigable lakes, rivers, streams and waters within New York State and the MCTD must use Part II to compute their section 183-a MCTD allocation percentage. The allocation percentage is computed by dividing the aggregate number of working days of the vessels owned or leased in all navigable lakes, rivers, streams and waters within the MCTD by the aggregate number of working days of the vessels owned or leased in New York State territorial waters.