

# CT-184-R Foreign Omnibus and Taxicab Corporation Tax Return Tax Law — Article 9, Section 184

7											
									For calendar year	1990	
Employer identification in	number	File number	File number			If your name, employer identification number, address or owner/ officer information			For office use only		
Number and street	City or town	State	ZIP code	bas showed file			Da	te rece	aived		
Trade name		Business telephone nu		Business gr (from federa			er				
Location of commerce	cial domicile		Date	began b	usine	ss in NY	S				
Is this corporation as	uthorized to do business in New York Sta No	te? State or country of inc	orporation	1	date			·			
A. Payment — p	pay amount shown on line 9 — I	Make check payable	to: New York	k State	Cor	poratio	on Tax	ď	Payment enclosed		
Tax Computatio	n			*							
	Number of trips made into N	lew York State (see in:	structions on	· F	1						
				L.	2	\$15	00				
	Multiply line 1 by line 2.		-				' '	3		00	
		iax st	ırcharge (mu				· · · · · ·	4	I	+	
	Ralance of mai	ntenance fee (authoriz	MTB tax :				1	5 6			
	Balance of mar	internative lee (authoriz		ns only, al (add li			' 1	7			
			1010	ii (add iii		epaym	· · ·	8	·	<b>†</b>	
	Balanc	e due (if line 8 is less	than line 7. su	ıbtract li				9		1	
	Overpayment, to be refu							10			
Computation of	Metropolitan Transportation	Business (MTB) Ta	x Surcharg	е		····			· · · · · · · · · · · · · · · · · · ·		
	Total number of trips	made into New York	State (from li	ine 1)	11						
	·	Number of trips mad	le into the M	ICTD	12						
		MCTD allocation	percentage	(divide li	ne 1	2 by line	9 11)	13		%	
				ount from			}	14		00	
			cated tax (m							ļ	
	MTB tax surch	harge (multiply line 15 t	by 17% (.17); (	enter hei	re ar	d on lin	ne 5)	16		1	
Certification. I co	ertify that this return and any att	achments are to the I	best of my k	nowled	ge a	nd beli	ef tru	e, co	rrect and complete		
Date	Signature of elected officer or auth			Offic					,		
Data	Signature of individual or name of	firm proportion this return		Prop	arar'	o addrae		<del></del>			

Mail to: NYS Corporation Tax, Processing Unit, P.O. Box 1909, Albany, NY 12201-1909, on or before March 15, 1991.

### **Instructions**

#### **General Information**

Certain foreign omnibus and foreign taxicab corporations that conduct at least one but fewer than twelve trips into New York State during a year are taxable under Article 9, section 184. These corporations are no longer taxed under Article 9-A and are also exempt from tax under Article 9, section 183 (Chapter 485 of the Laws of 1988). For more information, see TSB-M-88(8)C.

#### Who Must File

Foreign omnibus and taxicab corporations that do business or employ capital in New York State only by reason of conducting fewer than twelve trips into this state during a year and that do not own or lease property (other than the vehicles used to conduct the trips) or maintain an office in this state, must file Form CT-184-R.

Foreign omnibus and taxicab corporations that conduct 12 or more trips into New York State, do business, employ capital, own or lease property or maintain an office in New York State are taxable under Article 9-A and must file Form CT-3.

#### When and Where to File

Filing periods for this form must be based on a calendar year regardless of the federal reporting period. File your return on or before March 15, 1991.

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

If you cannot meet the filing deadline, ask for a three-month extension of time by filing Form CT-5.9. Indicate on Form CT-5.9 that you will be filing Form CT-184-R.

#### Penalties for Late Filing

If you are liable for this tax and do not file this return and pay the tax due by March 15, or the extended due date, the corporation will become taxable under Article 9-A, and will be liable for ail penalties and interest provided by Article 27 of the Tax Law.

#### Tax Rate

The tax rate is \$15 per trip made into New York State for up to 11 trips (so the maximum tax is \$165).

In addition, the metropolitan transportation business (MTB) tax surcharge applies, for trips made into the Metropolitan Commuter Transportation District (MCTD), at 17% of the allocated tax (see the instructions for lines 11 through 16).

#### Foreign Corporations — Maintenance Fee

If you are authorized to do business in New York by the New York State Department of State, you must pay an annual maintenance fee of \$300. This fee may be claimed as a credit against tax due under Article 9. See the instructions for line 6.

#### License Fee — Form CT-240

As a foreign corporation (organized under the laws of any other state or country) you must also file Form CT-240 and pay a license fee. File Form CT-240 when you file your first franchise tax return. The minimum license fee is \$10.

#### 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 don't have a form, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State, call (518) 438-1073.

Mail your completed Form DTF-95 to:

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

#### **Taxpayer Assistance**

If you need forms or publications, call toll free (from New York State only) 1 800 462-8100. From areas outside New York State, call (518) 438-1073. For information, call toll free (from New York State only) 1 800 CALL TAX (1 800 225-5829). From areas outside New York State, call (518) 438-8581. Taxpayer assistance is available Monday through Friday from 8:00 a.m. to 5:00 p.m.

If you need to write, address your letters to: NYS Tax Department, Taxpayer Assistance Bureau, W.A. Harriman Campus, Albany, NY 12227.

### Line-by-Line Instructions

Line 1 — Enter the number of trips made into New York State. A corporation is conducting a trip into New York State when one of its vehicles (owned, leased or operated) enters the state and transports passengers to, from, or to and from a New York location. A corporation will not be considered to be conducting a trip into New York State if its vehicles only make incidental stops at locations in the state while in transit from a location outside New York to another location outside New York.

Attach a statement to the return containing the following information for each trip:

Date of trip Place of origination
Number of vehicles used Destination
Number and location of stops made in New York

Line 4 — Enter 15% of line 3. Section 30 of Chapter 190 of the Laws of 1990 imposes a tax surcharge of 15% on tax due under section 184 for the calendar year 1990.

Line 5 — Enter MTB tax surcharge from line 16, if applicable.

Line 6 — If you are authorized to do business in New York State, enter the difference between the maintenance fee of \$300 and the taxes computed on lines 3, 4 and 5.

#### Example:

Annual maintenance fee	\$300.00
Line 3: 6 trips times \$15	
Line 4: Tax surcharge (\$90 times .15)	
Line 5: MTB tax surcharge (\$90 times .17)	15.30
Balance of maintenance fee: enter on line 6	\$181.20

If you are not authorized, enter "0" on line 6.

Line 7 — Add lines 3 through 6.

**Line 8** — Enter the amount paid with Form CT-5.9, *Application* for Extension, and any other amounts paid or carried over from previous years.

## Computation of Metropolitan Transportation Business (MTB) Tax Surcharge

If you make trips into the Metropolitan Commuter Transportation District (MCTD) you must complete this section and pay the MTB tax surcharge. The MCTD includes the 12 counties of New York, Bronx, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester.

If you did not make any trips into the MCTD, enter "0" on line 5; do not complete lines 11 through 16.

Line 11 — Enter the total number of trips made into New York State (from line 1).

Line 12 — Enter the number of trips made into the MCTD (counties listed above).

Line 13 — To determine the percentage of trips made into the MCTD, divide line 12 by line 11.

Line 14 - Enter the amount from line 3.

Line 15 — Multiply line 14 by line 13 to determine allocated tax.

**Line 16** — Multiply line 15 by the MTB tax surcharge rate of 17% (.17). Enter the result here and on line 5.