

## CT-186-A/M

# Metropolitan Transportation Business Tax (MTA Surcharge) Return

If your name, employer identification number, address or owner/ officer

Tax Law — Article 9, Section 186-c

For calendar year 1992

For office use only

Data received

Number and street	City or to	Oity or town State		ntormation hanged, f DTF-95 (se nstruction:	ile Form e	Date 1909/90		
State or country of incorporation	date /	Foreign corporations: date began business in NYS	Business te	lephone nu	mber			
Dutchess, Nassau, Orange, F form. However, you must disc	Putnam, Rockla claim liability fo	mater Transportation District (tand, Suffolk and Westchester), or the MTA surcharge on Form	, you must con CT-186-A.	mplete th	is form. If r	ot, you o		his
****		14 — Make check payable to:				`		
		uter Transportation Distri					·	Т
		86-A, line 4)					-	+
· · · · · · · · · · · · · · · · · · ·		ne 1 which was derived from						9/0
		2 by line 1)				3		- 70
Computation of MTA Sur						4	l	T
	•	Form CT-186-A, line 5)						+
		4711						1
- · · · · · · · · · · · · · · · · · · ·	-	17))						
First installment of estima		ອວ nter amount from Form CT-5.9	lina E			7a	<u> </u>	T
• • • • • • • • • • • • • • • • • • • •	•	tions						†
								<b>—</b>
								$\top$
		act line 9 from line 8)						
· · · · · · · · · · · · · · · · · · ·		s)						
		(see instructions)						1
		lax - (check box lif Form CT						
		nter amount on line A)						1
•	•	· ·						
15 Overpayment (if line 8 is less than line 9, subtract line 8 from line 9)								
17 Amount of overpayment to be credited to New York State franchise tax								
		to MTA surcharge for 1993 .						
Composition of Prepaym								
					Date P	aid	Amount	
19 Mandatory first installmen	nt							↓
20 CT-400 installments				(1)				↓
				(2)			· · · · · · · · · · · · · · · · · · ·	<del> </del>
				(3)				
21 Payment with extension a	pplication, Forr	m CT-5.9, line <b>A</b>						↓
22 Credit from prior years .								<u> </u>
23 Add lines 19 through 22								
24 Credit from Form CT-186-A								<del></del>
25 Total (add lines 23 and 24;	enter here and	on line 9)				<u></u>		
Certification. I certify that th	is return and a	any attachments are to the be	est of my know	vledge ar	nd belief tru	e, correc	t and complete.	
Date		elected officer or authorized person			Official title			
Date	Signature of preparer or name of firm preparing this return				Preparer's address			

#### **Instructions**

#### **General Information**

If you file Form CT-186-A, use Form CT-186-A/M to report and pay the MTA surcharge.

#### Who Must File

If you do business in the Metropolitan Commuter Transportation District (MCTD) you must pay a metropolitan transportation business tax surcharge on business done in the Metropolitan Transportation Authority region (MTA surcharge). The MCTD includes the counties of New York, Bronx, Queens, Kings, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester.

#### MTA Surcharge Rate

The MTA surcharge rate is 17% for calendar year 1992.

#### When and Where to File

File this return and any amount due on or before March 15, 1993.

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

#### Extension of Time for Filing MTA Surcharge Return

You may request additional time to file a MTA surcharge return. To do this, file Form CT-5.9 on or before the due date of the return for which the extension is requested and pay the MTA surcharge estimated to be due.

Your total MTA surcharge payment must either:

- equal or exceed 100% of the MTA surcharge for the preceding year (if it was for a period of 12 months); or
- equal or exceed 90% of the MTA surcharge for this period as finally determined.

#### Identifying Information

To ensure that your corporation tax forms are processed as quickly and efficiently as possible, it is important that we have the necessary identifying information from your preprinted mailing label. Please include your employer identification number and file number on each form filed. These numbers can be copied directly from the label.

If you use a paid preparer or accounting firm, make sure they use the label information when completing all forms prepared for you.

#### Change of Business Information

If there have been any changes in your business name, identification 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.

**Line A** — After completing your return, enter the amount of your payment. Your payment should be the full amount shown on line 14.

#### **Computation of MCTD Allocation Percentage**

If you do all your New York State business within the 12 counties of the MCTD, enter 100% on line 3.

If you do part of your business outside the MCTD, compute your MCTD allocation percentage by completing lines 1 through 3.

**Line 1** — Enter your gross operating income from sources within New York State.

Line 2 — Enter your gross operating income from sources within the MCTD

Line 3 — Divide line 2 by line 1. This is your MCTD allocation percentage.

#### Computation of MTA Surcharge

Line 4 — Enter your New York State franchise tax from Form CT-186-A. line 5.

### First Installment of Estimated Tax for 1993 (Line 7a or 7b)

If on Form CT-186-A you are required to make a first installment of estimated franchise tax and tax surcharge for 1993, you must also make a first installment of the MTA surcharge for 1993.

Line 7a — If you have filed an application for extension (Form CT-5.9), enter the amount from line 5 of Form CT-5.9.

Line 7b - Enter 25% of the amount on line 6, if:

- you did not file Form CT-5.9, and
- the franchise tax plus the tax surcharge on Form CT-186-A, line 7, is more than \$1,000.

Enter "0" if:

- you did not file Form CT-5.9, and
- the franchise tax plus the tax surcharge on Form CT-186-A, line 7, is not more than \$1,000.

Line 11 — If you do not pay the MTA surcharge 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. Exclude from the interest computation any amount shown on line 7a or 7b, first installment of estimated tax for 1993

You may call the Taxpayer Assistance Bureau for the current interest rate or to have the interest computed for you. 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.

Line 12 — Late filing and late payment penalties are computed on the amount of the MTA surcharge less any payment made on or before the due date. Exclude from the penalty computation any amount shown on line 7a or 7b, first installment of estimated tax for 1993.

- a. If you do not file a return when due or if the application for extension is invalid, add to the MTA surcharge 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 MTA surcharge cannot be less than the smaller of \$100 or 100% of the amount required to be shown as MTA surcharge (section 1085(a)(1)(B)).
- c. If you do not pay the MTA surcharge 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).

**Line 13** — If you underpaid your estimated MTA surcharge, use Form CT-222, *Underpayment of Estimated Tax By Corporations*, to compute the penalty. Attach Form CT-222 and check box. If no CT-222 penalty is due, enter "0" on line 13.

Line 15 — If line 8 is less than line 9, subtract line 8 from line 9. This is the amount of overpayment. You may divide it on lines 16, 17 and 18 in any way you choose.