

# CT-184-M

# **Transportation and Transmission Corporation MTA Surcharge Return**

	M Tax	TA Surcha Law — Article 9,	arge Re	eturn e	F	- or calendar year	1993
Employer identification number		File number		If your name, employer identification number, address or owner/	For office use only		
Number and street	City or town	State		officer information has changed, file Form DTF-95 (see instructions).	Date rec	eived	
Trade name		State or country of inco	rporation	date /			
Business telephone number		ations: date began busine					
f you do business, employ capital, ou must file this form. If not, you o	own or lease property, or mai to not have to file this form. H	ntain an office in the Met lowever, you must disclai	ropolitan Commu m liability for the	iter Transportation District MTA surcharge on Form	(MCTD), ( CT-184.	see instructions for coun	ties),
A. Payment — pay amou	int shown on line 12 —	Make check payab	le to: <b>New Yo</b>	ork State Corporation	on Tax	Payment enclosed	
Computation of MTA Surci							
1 NYS franchise tax from	1993 Form CT-184, line	94			1		<u> </u>
2 MCTD allocation percer	ntage from line 18, 20 o	or 22, whichever is a	applicable		2		%
3 Allocated tax (multiply lin	ie i by line 2)	• • • • • • • • • • • • • • • • • • • •			3		
4 MTA surcharge (multiply First installment of es	time 3 by 1/% (.1/))	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	4		
ia If application for extens		ount from Form CT	FO !: 5		<u> </u>		
<b>ib</b> If Form CT-5.9 was not	filed see instructions	ount nom Form CI-	5.9, line 5	• • • • • • • • • • • • • • • • • • • •	<u>5a</u>		-
6 Add lines 4 and 5a or 5	inea, see mstructions .	,			5b		-
7 Total prepayments (from	line 20)				6		
8 Balance (if line 7 is less	than line 6 subtract line 7	from line 6)			7		+
9 Interest on late paymen	t (see instructions)	nom me o,			9	***	+
Late filing and late pays	ment penalties <i>(see instr</i>	ructions)		· · · · · · · · · · · · · · · · · · ·	10		-
1 Penalty for underpayme	ent of estimated tax - (c	heck hox if Form CT-22:	2 is attached	if none enter "0"	<u>10</u>	<u> </u>	+
2 Balance due (add lines &	3 through 11 - enter payme	ent on line A above)	- 15 anached		12		+
3 Overpayment (if line 6 is	less than line 7. subtract	line 6 from line 7\		• • • • • • • • • • • • • • • • • • • •	13		+
4 Amount of overpayment	to be credited to NYS	Franchise tax			14		-
5 Amount of overpayment	t to be credited to MTA	surcharge for 1994			15		+
6 Amount of overpayment	t to be refunded (subtrac	ct lines 14 and 15 from	n line 13)		16	<del></del>	+
<b>schedule A</b> — Computa	tion of MCTD Allocat	ion Percentage —	Section 18	4-a <b>— Use 1993 F</b>	igures		
Part I — MCTD Allocation — (trucking, pipeline	s, railroads, messenger	services, etc.)	rporations	A MCTD		B New York Stat	е
7 Revenue mileage or mi			<u>17</u>				
8 MCTD allocation percer by line 17, column B; en	ter here and on line 2)		18		%		
Part II — MCTD Allocation	for Corporations Opera	iting Vessels in MCT	D	A A		В	
Territorial Waters			Γ	MCTD Territorial W	aters	NYS Territorial Wa	ters
9 Aggregate number of w	orking days		<u>19</u>				
MCTD allocation percer	nage (divide line 19, colui	mn A,					
Part III MCTD Allocotion	ter here and on line 2)		20		%		
Part III — MCTD Allocation Telegraph Corpo	rations <b>only</b> — Section	194.5		A		В	
1 Gross operating revenu			<u> </u>	MCTD		New York State	<u>e</u>
2 MCTD allocation percer	o nom services Nace (divide line of selec	mn A	<u>21</u>				
by line 21. column B: en	ter here and on line 2)	um A,	22		0.4		
,	L Oil in/o L)		66	<u></u>	<b>%</b>		

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

Date	Signature of elected officer or authorized person	Official title
Deta		
Date	Signature of preparer or name of firm preparing this return	Preparer's address

# **Prepayments**

Co	mposition of Prepayments on line 7			·
		Date of Payment	Amount	
23	Mandatory first installment			
24	CT-400 installments	-		
	(2)			
	(3)			
25	Payment with extension application, Form CT-5.9, line A			
26	Credit from prior years			_
27	Add lines 23 through 26			<del>-  </del>
28	Credit transferred from Form CT-184 Per	iod		<del></del>
	Total prepayments (add lines 27 and 28; enter here and on line 7)			

### Instructions

# **General Information**

#### Who Must File

If you do business, employ capital, own or lease property or maintain an office in the Metropolitan Commuter Transportation District (MCTD) you must file Form CT-184-M and pay the 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, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester.

If you file Form CT-184, use Form CT-184-M to report and pay the MTA surcharge.

#### When and Where to File

File this return and any amount due on or before March 15, 1994.

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

You may request additional time to file an MTA surcharge return. 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. Do not use the label on this form.

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. If your address has changed, check the box next to the name and address on Form CT-184.

## Line Instructions

#### Computation of MTA Surcharge

Line 1 - All transportation and transmission corporations: Enter the New York State franchise tax from your 1993 franchise tax return, Form CT-184, line 4.

Line 2 - Enter the MCTD allocation percentage from Schedule A, Part I, II or III, whichever is appropriate.

Telephone and telegraph corporations enter the MCTD allocation percentage described in Schedule A, Part III instructions.

Line 4 - The MTA surcharge rate is 17% for the calendar year 1993.

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

Line 5b - Enter 25% (.25) of the amount on line 4, if:

 franchise tax plus the state tax surcharge on Form CT-184, line 6, is more than \$1,000.

Enter "0" if:

 franchise tax plus state tax surcharge on Form CT-184, line 6 is not more than \$1,000. Line 8 - If line 7 is less than line 6, subtract line 7 from line 6 to compute your unpaid balance. If line 6 is less than line 7, go to line 13 for

Line 9 - If you do not pay the MTA surcharge by March 15, 1994, 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 5a or 5b, first installment of estimated tax for the next period. You may call the Taxpayer Assistance Bureau for the current rate or to have the interest computed for you. Call the Business Tax Information Center (from the continental U.S. only) 1 800 972-1233. You can also 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 10 - Additional charges for late filing and late payment are computed on the amount of MTA surcharge less any payment made on or before the due date. Exclude from the penalty computation any amount shown on line 5a or 5b, first installment of estimated tax for the next period.

- 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 tax (section 1085(a)(1)(B)).
- c. If you do not pay the MTA surcharge shown on a return, add to the MTA surcharge 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 you underpaid your estimated tax, use Form CT-222, Underpayment of Estimated Tax by a Corporation, to compute the penalty. Attach Form CT-222 and check box. If no penalty is due, enter "0" on line 11

Line 13 - If line 6 is less than line 7, subtract line 6 from line 7. This is the amount of overpayment. You may divide it on lines 14, 15 and 16 in any way you choose.

# Schedule A — Computation of MCTD Allocation Percentage — Section 184-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 business outside the MCTD, you must compute an MCTD allocation percentage by completing the appropriate part of this schedule.

# Part I — General Transportation Corporations

General transportation corporations such as trucking, pipeline, railroad and messenger service companies must use this section to compute their section 184-a MCTD allocation percentage which is based on miles traveled within the 12 counties of the MCTD compared to total miles traveled in New York

#### Part II — Corporations Operating Vessels in MCTD Territorial Waters

Corporations operating vessels must use Part II. The same type of information used on Form CT-183 in Schedule A, Part II is required; however, you must use 1993 figures.

# Part III — Telephone and Telegraph Companies

A telephone or telegraph corporation must determine the portion of its tax attributable to business activity carried on within the MCTD by multiplying the tax imposed under section 184 of this article by the ratio of its total gross operating revenue from transmission services performed wholly within the MCTD to its total gross operating revenue from transmission services performed within the entire state during the period covered by the return. Attach a statement showing the computation.