



CT-32-M

New York State Department of Taxation and Finance

Banking Corporation MTA Surcharge Return Tax Law — Article 32, Section 1455-B

1997 calendar yr. filers, check box
Other filers enter tax period:

beginning
ending

Employer identification number		File number		If your name, employer identification number, address or owner/officer information has changed, you must file Form DTF-95 (see instructions). If no form is enclosed, call 1 800 462-8100 to request one. From areas outside the U.S. and Canada, call (518) 485-6800.	For office use only	
Mailing Name and Address	Taxpayer's business name				Date received	
	Business name at location below (if different from business name above)					
	C/o Street or PO Box					
City			State	ZIP code		
<input type="checkbox"/>	Check box if overpayment claimed			Location of headquarters		Business activity code number (from federal return)
Business telephone number		State or country of incorporation		Date of incorporation	Foreign corporations: date began business in NYS	

If you do business in the Metropolitan Commuter Transportation District (the counties of New York, Bronx, Kings, Queens, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester), you must file this form. If not, you do not have to file this form; however, you must disclaim liability for the MTA surcharge on Form CT-32.

A. Payment — pay amount shown on line 14. Make check payable to: New York State Corporation Tax	Payment enclosed
Attach your payment here.	

Computation of Metropolitan Commuter Transportation District (MCTD) Allocation Percentage

1	Gross income within MCTD	
2	Gross income within New York State	
3	MCTD gross income allocation percentage (divide line 1 by line 2)	%

Computation of MTA Surcharge

4	Net New York State franchise tax from Form CT-32, Schedule A, line 7, or Form CT-32-A, Schedule A, line 9	
5	Allocated tax (multiply line 4 by line 3)	
6	MTA surcharge (multiply line 5 by 17% (.17))	
First installment of estimated MTA surcharge for next period:		
7a	If a request for extension was filed, enter amount from Form CT-5, line 7, or Form CT-5.3, line 10	
7b	If Form CT-5 or Form CT-5.3 was not filed, see instructions	
8	Add lines 6 and 7a or 7b	
9	Total prepayments (from line 25)	
10	Balance (if line 9 is less than line 8, subtract line 9 from line 8)	
11	Penalty for underpayment of estimated MTA surcharge (check box if Form CT-222 is attached <input type="checkbox"/> ; if none, enter "0")	
12	Interest on late payment (see instructions)	
13	Late filing and late payment penalties (see instructions)	
14	Balance due (add lines 10 through 13; enter payment on line A above)	
15	Overpayment (if line 8 is less than line 9, subtract line 8 from line 9)	
16	Amount of overpayment to be credited to New York State franchise tax	
17	Amount of overpayment to be credited to MTA surcharge for next period	
18	Amount of overpayment to be refunded	

Composition of Prepayments on Line 9

		Date Paid	Amount
19	Mandatory first installment		
20	CT-400 installments	(1)	
		(2)	
		(3)	
21	Payment with extension request, Form CT-5, line 10, or Form CT-5.3, line 13		
22	Credit from prior years		
23	Add lines 19 through 22		
24	Credit transferred from Form CT-32 or CT-32-A	Period	
25	Total prepayments (add lines 23 and 24; enter here and on line 9)		

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

Signature of elected officer or authorized person		Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)	ID number	Date
	Address		Signature of individual preparing this return

Mail your return to: NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 1909, ALBANY NY 12201-1909

Instructions

General Information

If you file Form CT-32 or CT-32-A, use Form CT-32-M to report and pay the metropolitan transportation business tax surcharge (MTA surcharge).

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-32-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.

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

MTA Surcharge Rate

The MTA surcharge rate is 17%.

When and Where to File

File your return within 2½ months after the end of your reporting period. If you are reporting for the calendar year, file your return on or before March 15th. If your filing date falls on a Saturday, Sunday, or legal holiday, then you must file your return on or before the next business day. Mail your return to: **NYS Corporation Tax, Processing Unit, PO Box 1909, Albany, NY 12201-1909.**

Extension of Time for Filing MTA Surcharge Return

You may request additional time to file an MTA surcharge return. File Form CT-5 or Form CT-5.3 on or before the due date of the return for which the extension is requested and pay the MTA surcharge estimated to be due.

Employer Identification Number, File Number, and Other Identifying Information

To assist us in processing your corporation tax forms as quickly and efficiently as possible, it is important that we have the necessary identifying information from your preprinted label. **Keep a record of the label information for future use.** Please be certain to include your employer identification number and file number on each corporation tax form mailed. This will facilitate processing of your return to the correct account. Without this information, we may not be able to process your return.

If you use a paid preparer or accounting firm, make sure they use the mailing label or 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 and you have not previously notified us, complete Form DTF-95, *Change of Business Information*. If you don't have a form, call toll free 1 800 462-8100. From areas outside the U.S. and Canada, call (518) 485-6800 to request one.

Amended Return

If you are filing an amended return, please write **Amended Return** across the top.

Reporting Period

If you are a calendar year filer, check the box in the upper right corner on the front of the form.

If you are a fiscal year filer, complete the beginning and ending tax period boxes in the upper right corner on the front of the form.

Line Instructions

Whole Dollar Amounts - You may elect to show amounts in whole dollars rather than dollars and cents. Round an amount from 50 cents through 99 cents to the next higher dollar, and round any amount less than 50 cents to the next lower dollar.

Percentages - When computing allocation percentages, convert decimals into percentages by moving the decimal point two spaces to the right. Percentages should be carried out to four decimal places. For example: $5,000/7,500 = .666666 = 66.6667\%$.

Negative amounts, if any, should be shown in parentheses.

Line A — Make your payment in United States funds. A foreign check or foreign money order will only be accepted if payable through a United States bank or if marked **Payable in U.S. Funds**.

Computation of MCTD Gross Income Allocation Percentage

- If you do all of your New York State business within the 12 counties of the MCTD, skip lines 1 and 2 and enter 100% on line 3.
- If you do part of your business outside of the MCTD, compute your MCTD gross income allocation percentage on lines 1 through 3.

The MCTD gross income allocation percentage is determined by dividing your gross income within the MCTD by your gross income within New York State. Gross income is federal gross income as defined in section 61 of the Internal Revenue Code (IRC) plus any amount excluded from federal gross income under section 103 of the IRC 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).)

First Installment of Estimated Tax for the Next Tax Period

If, on your Form CT-32, you are required to make a first installment of estimated franchise tax for the next tax period, you must also make a first installment of the MTA surcharge for the next tax period.

Line 7b — Enter 25% of the amount on line 6 if Form CT-5 or Form CT-5.3 was not filed, and the franchise tax shown on Form CT-32, line 7, or Form CT-32-A, line 7, is over \$1,000. Otherwise, enter "0".

Line 11 — If you underpaid your estimated MTA surcharge, 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 12 — If you do not pay the MTA surcharge on or before the original due date, (determined without regard to any extension of time to file), you must pay interest on the amount of the underpayment from the original due date to the date paid. Exclude from the interest computation any amount shown on line 7a or line 7b, first installment of estimated MTA surcharge for the next tax period.

Line 13 — 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, determined with regard to any extension of time for filing. Exclude from the penalty computation any amount shown on line 7a or line 7b, first installment of estimated MTA surcharge for the next tax period.

- A If you do not file a return when due or if your request 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 the MTA surcharge in item A above 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 MTA surcharge, ½% per month up to 25% (section 1085(a)(2)).
- D The total of the additional charges in items A and C may not exceed 5% for any one month, except as provided for in item 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).

NOTE: You may have the interest (line 12) and penalty (line 13) computed for you by calling the Business Tax Information Center at 1 800 972-1233.

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 line 16, 17 or 18 in any way you choose.

Line 18 – Collection of debts from your refund — We will keep all or part of your refund if you owe a past-due legally enforceable debt to the Internal Revenue Service or a New York State agency. This includes any state department, board, bureau, division, commission, committee, public authority, public benefit corporation, council, office, or other entity performing a governmental or proprietary function for the state or a social services district. Any amount over your debt will be refunded.

If you have any questions about whether you owe a past-due legally enforceable debt to the Internal Revenue Service or a state agency, contact the IRS or that particular state agency.

For New York State tax liabilities **only** call 1 800 835-3554 (outside the U.S. and Canada call (518) 485-6800) or write to NYS TAX DEPARTMENT, TAX COMPLIANCE DIVISION, W A HARRIMAN CAMPUS, ALBANY NY 12227.