

New York State Department of Taxation and Finance

Utility Services Tax Return — Gross Operating Income Tax Law — Article 9, Section 186-a For calendar year 1998

| Employ | er identification number | | | File number | | Check box if | | For office u | se only | |
|---|--|--|---|--|----------------|--|-----------|---|-------------------------------|----------|
| | I I - I I I | 1 1 1 | ı | | 1 | overpayment claimed | ш | | | |
| | Legal name of corporation | 1 | · | Trade name / DB/ | 4 | • | | | | |
| | | | | | | | | Date receiv | red | |
| me | Mailing name (if different from legal name) | and address | | <u> </u> | | State or country of inco | rporation | | | |
| ng name address | c/o | PLAC | CE LA | BEL HEF | RE | | | | | |
| gg | Number and street or PO box | | | | | Date of incorporation | | | | |
| | Thumber and enest of the best | | | | | Date of moorporation | | | | |
| Maili and | City | State | 2 | ZIP code | | Foreign corporations: dat | o bogan | | | |
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| check bo | ox (see you must file Form DTF-95 (see | ation number, address, or owner/ e instructions). If you need Form D | TF-95, call 1 | 800 462-8100 to | / \ | lephone number | | | | |
| instruction | | e the U.S. and outside Canada, ca | | | () | | | | | |
| | ness activity code number (from federal return nstructions) | n; | Principal I | business activity | | | | | | |
| | <u> </u> | ● ☐ Other | | ı | | | | : | | |
| Nature | of business | Name of agent, if any | | Date | sale of utilit | ty services began | | | | |
| | | | | | | | | | | |
| Type c | of service or commodity you resell | (check all that apply) | | _ | | | | | | |
| | Gas ■ ☐ Electricity | ● | • _ |] Water | • 📙 | Refrigeration | | | | |
| If this i | s your first return, enter name of pri | ior owner or operator, if | any | Address of pi | ior owner | or operator | | | | |
| If this i | s your final return, enter name of ne | ow owner if any | | Address of ne | ow owner | | | | | |
| • | 3 your milar return, enter name of he | ew owner, it arry | | • | SW OWITEI | | | | | |
| The bo | ooks of the taxpayer are in the care | of | | | | | | | | |
| NI | | | | A -1-1 | | | | | | |
| Name: | | 0 | | Address: | | | | | | |
| | u do business in the Metropolitan | | | | | | | | orm CT 10 | C A /N/I |
| | | inotructions) | | | Voc | No If Voc | vou mi | | | |
| | sportation District (MCTD)? (see | | | | Yes | No If Yes, | you mu | ist file F | 01111 6 1-10 | O-A/IVI. |
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| Schedule A, Part I — Computation of Gross Operating Income (other than telephone and telegraph) for 1/1/98-9/30/98 | | | | | | | | | |
|--|----------------------|----------------------------------|-----------------------|-------------------------------------|--|------------------------|----|--------------------------------|--|
| | Type of nmodity | B. Utility purchased from | C. Quantity purchased | D. Purchase price | E. Quantity consumed that was not sold | F. Quantit sold | у | G. Receipts from quantity sold | |
| | | | | | | | | | |
| | | | | | | | | | |
| Amounts f | from attached | list | ı | | | | | | |
| 15 To | otal receipt | s from the sale or fu | rnishing of each | commodity (add column G | amounts) | | 15 | • | |
| 16 Ot | ther receipts f | rom services rendered whi | ch are directly conne | cted with the sale or furnishing of | of each commodity liste | d above | 16 | • | |
| 17 To | otal <i>(add lin</i> | es 15 and 16) | | | | | 17 | | |
| 18 Al | llowable de | eductions (attach list). | | | | | 18 | • | |
| | | | | 7) | | | 19 | | |
| | - | - | | 3.5% (.035)) | | | 20 | • | |

| Schedule A, Part II — Computation of Gross Operating Income (other than telephone and telegraph) for 10/1/98-12/31/98 | | | | | | | | |
|---|----------------------------|------------------------------|----------------------------------|--|-------------------------|----|---------------------------------------|--|
| A. Type of commodity | B. Utility purchased from | C. Quantity purchased | D. Purchase price | E. Quantity consumed that was not sold | F. Quantity sold | | G. Receipts from quantity sold | |
| | | | | | | | | |
| | | | | | | | | |
| Amounts from attache | ed list | | | | | | | |
| 21 Total receip | ots from the sale or fu | rnishing of each | commodity (add column | G amounts) | | 21 | • | |
| 22 Other receipts | from services rendered whi | ch are directly conne | cted with the sale or furnishing | g of each commodity liste | d above | 22 | • | |
| 23 Total (add li | nes 21 and 22) | | | , , , , , , , , , , , , , , , , , , , | | 23 | | |
| | | | | | | 24 | • | |
| | | | 3) | | | 25 | | |
| = | - · | | 3.25% (.0325)) | | | 26 | • | |
| • | | | and 26; enter here and on | | | 27 | | |

| Com | Composition of Prepayments Claimed on Line 4 | | | Date Paid | | Amount |
|-----|---|-----|---|-----------|--|--------|
| 28 | Mandatory first installment | 28 | / | / | | |
| | • | | / | / | | |
| | Third installment | 29b | / | / | | |
| 29c | Fourth installment | 29c | / | / | | |
| 30 | Payment with extension request, Form CT-5.9, line 5 | 30 | / | / | | |
| 31 | Credit from prior years | 31 | | | | |
| | 32 Credit from Form CT-186-A/M Period | | | | | |
| 33 | Total (add lines 28 through 32; enter here and on line 4) | 33 | | | | |

Who May Not File Form CT-186-A — Effective for tax years beginning on or after January 1, 1998, if you have any receipts from telecommunication services, even if it is not your primary business, you must file Form CT-186-E or Form CT-186-EZ to report tax under section 186-e of the Tax Law. For more detailed information, see the instructions for Forms CT-186-E or CT-186-EZ in the CT-186-E-P packet.

Privacy Notification

The right of the Commissioner of Taxation and Finance and the Department of Taxation and Finance to collect and maintain personal information, including mandatory disclosure of social security numbers in the manner required by tax regulations, instructions, and forms, is found in Articles 8, 9, 9-A, 13, 19, 27, 32, 33, and 33-A of the Tax Law; and 42 USC 405(c)(2)(C)(i).

The Tax Department will use this information primarily to determine and administer corporate tax liabilities under the Tax Law, for certain tax refund offsets, and for any other purpose authorized by law.

Failure to provide the required information may result in civil or criminal penalties, or both, under the Tax Law.

This information will be maintained by the Director of the Registration and Data Services Bureau, NYS Tax Department, Building 8 Room 924, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the U.S. and outside Canada, call (518) 485-6800.