New York State Department of Taxation and Finance

1990

CT-32-M Metropolitan Transportation Business Tax Surcharge Return

Article 32, Section 1455-B

For calendar year 1990 or tax period:

beginning

ending

Employer identification number	File number	If your name, employer identification number, address or owner/officer information has changed, file Form DTF-95 (see instructions).	*For office use only*
Name			*Date received*
Number and street / City or town / State / ZIP code			
Trade name	State or country of incorporation / date		
Business telephone number ( )	Foreign corporations: date began business in NYS	Business group code number (from federal return)	

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 MTB tax surcharge on Form CT-32.

A. Payment — pay amount shown on line 12. Make check payable to: ***New York State Corporation Tax*** | Payment enclosed

Computation of Metropolitan Commuter Transportation District (MCTD) Allocation Percentage

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

Computation of MTB Tax Surcharge

Net New York State franchise tax from Form CT-32, Schedule A, line 7a or CT-32-A, line 7c	4	
Allocated tax *(multiply line 4 by line 3)*	5	
MTB Tax surcharge *(multiply line 5 by 17% (.17))*	6	
Prepayments (a) Payment with Form CT-5 or Form CT-5.3	7a	
(b) Credit transferred from Form CT- Period	7b	
Total prepayments claimed *(add lines 7a and 7b)*	8	
Balance *(If line 8 is less than line 6, subtract line 8 from line 6)*	9	
Interest on late payment	10	
Late filing and late payment penalties	11	
Balance due *(add lines 9, 10 and 11 — enter payment on line A)*	12	
Overpayment *(If line 6 is less than line 8, subtract line 6 from line 8)*	13	
Amount of overpayment to be refunded	14	
Amount of overpayment to be credited to NY State Franchise Tax Form CT- Period	15	

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
Date	Signature of individual or name of firm preparing this return	Preparer's address

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

Instructions

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 pay a business tax surcharge. The MCTD includes the counties of New York, Bronx, Queens, Kings, Richmond, Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk and Westchester.

If you file Form CT-32 (Article 32 taxpayers), use Form CT-32-M to report and pay the Metropolitan Transportation Business (MTB) tax surcharge.

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

MTB Tax Surcharge Rate

The tax rate is 17% for calendar year 1990 or fiscal years ending before December 31, 1991.

When and Where to File

File this return and any amount due within 2½ months after the end of your reporting period. If you are reporting for the 1990 calendar year, file your return on or before March 15, 1991.

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

Extension of Time for Filing MTB Tax Surcharge Return

You may request additional time to file an MTB tax 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 MTB tax surcharge estimated to be due.

The payment:

— must equal or exceed your MTB tax surcharge for the preceding tax period (if it was for a period of 12 months); or

— equal or exceed 90% of the MTB tax 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, ID number, mailing 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.

Specific Instructions

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 plus any amount excluded from federal gross income under section 103 of the Internal Revenue Code 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).)

Computation of MTB Tax Surcharge

Line 4 - Enter your New York State franchise tax from Form CT-32, Schedule A, line 7a or Form CT-32-A, line 7c.

Line 7a - Enter any payment made with Form CT-5, or Form CT-5.3, *Application for Six-Month Extension.*

Line 7b - You can apply an overpayment of franchise tax from Form CT-32 to this MTB tax surcharge. Enter on this line the form number, period in which the overpayment occurred (month and year) and amount to be applied. On the overpayment line of Form CT-32, indicate the amount of money to be applied to the MTB tax surcharge.

Line 10 - If you do not pay the MTB tax 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. You may call the Taxpayer Assistance Bureau for the current rate or to have the interest computed for you; call toll free (from within New York State only) 1 800 CALL TAX (1 800 225-5829); from areas outside New York State (518) 438-8581.

Line 11 - Additional charges for late filing are computed on the amount of tax less any payment made on or before the due date.

a. If you do not file a return when due or if your application for extension is invalid, add to the tax 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 tax 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 tax 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)). Compute the additional charges on the line 9 amount.

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 line 6 is less than line 8, subtract line 6 from line 8. This is the amount of overpayment. You may divide it on lines 14 and 15 in any way you choose.