



# CT-186-P

Amended return

New York State Department of Taxation and Finance

# Utility Services Tax Return — Gross Income

Tax Law — Article 9, Section 186-a

For calendar year 2004

Employer identification number		File number	Business telephone number ( )	If you claim an overpayment, mark an X in the box <input type="checkbox"/>	
Legal name of corporation			Trade name/DBA		
Mailing name (if different from legal name above) c/o Number and street or PO box			State or country of incorporation	Date received (for Tax Department use only)	
City State ZIP code			Date of incorporation		
NAICS business code number (from federal return)		If address above is new, mark an X in box <input type="checkbox"/>	If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95. If only your address has changed, you may file Form DTF-96. You can get these forms from our Web site, by phone, or by fax. See the <i>Need help?</i> section of the instructions.		Audit (for Tax Department use only)
Date corporation came under the supervision of the NYS Department of Public Service					

Type of service or commodity you sell (mark an X in all boxes that apply)

Gas  Electricity  Steam  Water  Refrigeration

If this is your first return, enter name of prior owner or operator, if any

Address of prior owner or operator

If this is your final return, enter name of new owner, if any

Address of new owner

### Metropolitan transportation business tax (MTA surcharge) (mark an X in the appropriate box below)

Do you do business in the Metropolitan Commuter Transportation District? If Yes, you must file Form CT-186-P/M (see instructions) ..... Yes  No

**Do not file Form CT-186-P** — If you are a telephone or telegraph company or other provider of telecommunication services, even if those services are not your primary business, do not file this form. Instead, file Form CT-186-E, *Telecommunications Tax Return and Utility Services Tax Return*.

<b>A.</b> Pay amount shown on line 13. Make check payable to: <b>New York State Corporation Tax</b> Attach your payment here. Detach all check stubs.	Payment enclosed	
	<b>A.</b>	

### Computation of tax

1	Tax on gross income (enter amount from line 45)	1.	
2	Long-term care insurance tax credit (attach Form CT-249; see instructions)	2.	
3	Tax after long-term care insurance tax credit (subtract line 2 from line 1)	3.	
4	Power for jobs tax credit (see instructions)	4.	
5	Net tax (subtract line 4 from line 3)	5.	
First installment of estimated tax for next period:			
6a	If you filed a request for extension, enter amount from Form CT-5.9, line 2	6a.	
6b	If you did not file Form CT-5.9 and line 5 is over \$1,000, see instructions; otherwise enter 0	6b.	
7	Total (add lines 5 and 6a or 6b)	7.	
8	Total prepayments (enter amount from line 51)	8.	
9	Balance (if line 8 is less than line 7, subtract line 8 from line 7)	9.	
10	Penalty for underpayment of estimated tax (mark an X in the box if Form CT-222 is attached) <input type="checkbox"/>	10.	
11	Interest on late payment (see instructions)	11.	
12	Late filing and late payment penalties (see instructions)	12.	
13	Balance due (add lines 9 through 12; enter payment here and on line A above)	13.	
14	Overpayment (if line 7 is less than line 8, subtract line 7 from line 8)	14.	
15	Amount of overpayment to be credited to next period	15.	
16	Balance of overpayment (subtract line 15 from line 14)	16.	
17	Amount to be credited to Form CT-186-P/M	17.	
18	Amount of overpayment to be refunded (subtract line 17 from line 16)	18.	

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

Signature of authorized person		Official title	Date
Paid preparer use only	Signature of individual preparing this return		Firm's name (or yours if self-employed)
	Address	City	State ZIP code ID number Date

Mail your return on or before March 15, 2005, to:

**NYS CORPORATION TAX  
PROCESSING UNIT  
PO BOX 22038  
ALBANY NY 12201-2038**

41301040094

**Computation of gross income**

**Part I — Computation of receipts from the sale of gas and electric service of whatever nature**

19	Receipts from the sale of gas and electric services (see instructions)	19.	
20	Receipts from the sale of the commodity of gas and electricity for ultimate consumption or use in New York State	20.	
21	Allowable deduction from receipts on line 20 (see instructions)	21.	
22	Net receipts from the sale of the commodity of gas and electricity for ultimate consumption or use in New York State after allowable deductions (subtract line 21 from line 20)	22.	
23	Noncommodity receipts (receipts from transportation, transmission, or distribution of gas or electricity) (subtract line 20 from line 19)	23.	
24	Allowable exclusions from receipts on line 23 (see instructions)	24.	
25	Net noncommodity receipts (receipts from transportation, transmission, or distribution of gas or electricity) after allowable exclusions (subtract line 24 from line 23; enter here and on line 43)	25.	

**Part II — Computation of receipts from the sale of steam, water, and refrigeration utility services (see instructions)**

26	Receipts from the sale of steam for ultimate consumption or use in New York State	26.	
27	Receipts from the sale of water for ultimate consumption or use in New York State	27.	
28	Receipts from the sale of refrigeration for ultimate consumption or use in New York State	28.	
29	Receipts from the sale of services rendered in New York State (see instructions)	29.	
30	Receipts from the sale of merchandise in New York State (see instructions)	30.	
31	All other receipts from sales made or services rendered in New York State (see instructions)	31.	
32	Receipts from steam, water, and refrigeration utility services (add lines 26 through 31)	32.	

**Part III — Receipts from interest and dividends allocated to New York State (attach list, if necessary)**

A	B	C	D	E
Name of entity	Type of security	Amount of interest and dividends received	Issuer's allocation percentage	Interest and dividends allocated to NYS (column C x column D)
			%	
			%	
			%	
			%	
33	Interest and dividends allocated to New York State (add column E amounts)			33.
34	Receipts from royalties			34.
35	Total receipts from interest, dividends, and royalties (add lines 33 and 34)			35.

**Part IV — Computation of profits (see instructions)**

36	Profits from the sale of securities	36.	
37	Profits from the sale of real property	37.	
38	Profits from the sale of personal property	38.	
39	All other profits	39.	
40	Profits before allowable deductions (add lines 36 through 39)	40.	
41	Allowable deductions from profits (attach list)	41.	
42	Profits after allowable deductions (subtract line 41 from line 40)	42.	

**Part V — Computation of tax on gross income**

43	Receipts from line 25	x .02125	43.	
44	Receipts from lines 22, 32, 35, and 42	x .004	44.	
45	Tax on gross income (add lines 43 and 44; enter here and on line 1)			45.

**Composition of prepayments claimed on line 8 (see instructions)**

	Date paid	Amount	
46	Mandatory first installment	46.	
47a	Second installment from Form CT-400	47a.	
47b	Third installment from Form CT-400	47b.	
47c	Fourth installment from Form CT-400	47c.	
48	Payment with extension request, Form CT-5.9, line 5	48.	
49	Overpayment credited from prior years	49.	
50	Overpayment credited from Form CT-186-P/M <input type="text" value="Period"/>	50.	
51	Total prepayments (add lines 46 through 50; enter here and on line 8)		51.