



CT-183

New York State Department of Taxation and Finance

Transportation and Transmission Corporation Franchise Tax Return on Capital Stock

Tax Law — Article 9, Section 183

Staple forms here

Final return Amended return

For calendar year 2006

Main form with fields for Employer identification number, File number, Business telephone number, Legal name of corporation, Trade name/DBA, Mailing name, State or country of incorporation, Date received, Date of incorporation, Foreign corporations: date began business in NYS, NAICS business code number, Principal business activity, and Audit.

Federal return filed (mark an X in one): Form 1120 Form 1120S Consolidated basis Other:

Do you do business, employ capital, own or lease property, or maintain an office in the Metropolitan Commuter Transportation District? (mark an X in the appropriate box) If Yes, you must file Form CT-183-M (see instructions) Yes No

With the exception of non-local telephone companies, every taxpayer required to file Form CT-183 must also file Form CT-184.

Payment section with field A: Pay amount shown on line 11. Make payable to: New York State Corporation Tax. Attach your payment here. Detach all check stubs. (See instructions for details.)

Tax computation (see Form CT-183/184-I, Instructions for Forms CT-183 and CT-184)

Table with 16 rows for tax computation (lines 1-16c) and a column for amounts. Line 3 shows 75.00.

Schedule A — Allocation percentage/issuer's allocation percentage (if no allocation is claimed, enter 100 on line 24 or 26; see instructions)

| Part 1 — General transportation and transmission corporations | | Average value for the year 2006 | |
|---|--|---------------------------------|-----------------|
| | | A New York State | B Everywhere |
| 17 | Accounts receivable | 17. | |
| 18 | Shares of stock of other companies owned (attach list showing corporate name, shares held, and actual value) | 18. | |
| 19 | Bonds, loans, and other securities, other than U.S. obligations | 19. | |
| 20 | Leaseholds | 20. | |
| 21 | Real estate owned..... | 21. | |
| 22 | All other assets (except cash and investments in U.S. obligations)..... | 22. | |
| 23 | Total (add lines 17 through 22) | 23. | |
| 24 | Allocation percentage (divide line 23, column A, by column B) | 24. | % |

| Part 2 — Corporations operating vessels not exclusively engaged in foreign commerce (see instructions) | | Average value for the year 2006 | |
|--|---|--|-----------------|
| | | A New York State territorial waters | B Everywhere |
| 25 | Aggregate number of working days..... | 25. | |
| 26 | Allocation percentage (divide line 25, column A, by column B) | 26. | % |

| Schedule B — Assets and liabilities | | As of December 31, 2006 | |
|-------------------------------------|--|-------------------------|--|
| 27 | Total assets | 27. | |
| 28 | Total liabilities | 28. | |
| 29 | Net worth (subtract line 28 from line 27; enter here and on line 53) | 29. | |
| 30 | Capital stock — preferred stock | 30. | |
| 31 | Capital stock — common stock | 31. | |
| 32 | Paid-in capital in excess of par or stated value | 32. | |
| 33 | Retained earnings (appropriated or unappropriated) | 33. | |
| 34 | Add lines 28, 30, 31, 32, and 33..... | 34. | |
| 35 | Cost of treasury stock..... | 35. | |
| 36 | Total liabilities and capital (subtract line 35 from line 34) | 36. | |

| Schedule C — Reconciliation of retained earnings | | | |
|--|--|-----|--|
| 37 | Balance at beginning of year..... | 37. | |
| 38 | Net income (attach profit and loss statement) | 38. | |
| 39 | Other additions (explain) | 39. | |
| 40 | Total (add lines 37, 38, and 39) | 40. | |
| 41 | Dividends..... | 41. | |
| 42 | Other deductions (explain) | 42. | |
| 43 | Total dividends and other deductions (add lines 41 and 42) | 43. | |
| 44 | Balance at end of year (subtract line 43 from line 40) | 44. | |

45 Did this corporation purchase any of its capital stock during the year? Yes • No •

If Yes, attach a separate sheet showing number and kinds of shares, consideration received for the issuances of the shares, and purchase price of each share.

Schedule D — Computation of tax based on the net value of issued capital stock

| A Class of stock | B Number of shares as of Dec. 31, 2006 | C Par value | D Amount paid in on each share | E Selling price during year | | F Average selling price | G Net value (column B × column F) |
|--|---|----------------|-----------------------------------|--------------------------------|-----|----------------------------|---|
| | | | | High | Low | | |
| Common | | | | | | | |
| Preferred | | | | | | | |
| No-par-value | | | | | | | |
| 46 Total | | | | | | Total net value | 46. ● |
| 47 Multiply line 46, column B, by the net value per share of stock outstanding at the end of the year, but not less than \$5.00 per share | | | | | | | 47. ● |
| 48 Taxable base (multiply line 47 by line 24 or 26) | | | | | | | 48. ● |
| 49 Tax (multiply line 48 by .0015 (1½ mills)) | | | | | | | 49. ● |
| 50 Total net value of issued capital stock (from line 46, column G) | | | | | | | 50. ● |
| 51 Taxable base (multiply line 50 by line 24 or 26) | | | | | | | 51. ● |
| 52 Tax (multiply line 51 by .0015 (1½ mills)) | | | | | | | 52. ● |
| 53 Net worth from line 29 | | | | | | | 53. ● |
| 54 Taxable base (multiply line 53 by line 24 or 26) | | | | | | | 54. ● |
| 55 Tax (multiply line 54 by .0015 (1½ mills)) | | | | | | | 55. ● |
| 56 Tax on allocated issued capital stock (amount from line 49, 52, or 55, whichever is largest; enter here and on line 1) | | | | | | | 56. ● |

Schedule E — Computation of tax if dividend rate is 6% or more on some or all classes of capital stock

Local telephone companies with no more than 1 million access lines in New York State: do not complete Schedule E. All other corporations **except** those operating vessels in foreign commerce complete Parts 1 and 2. Corporations operating vessels in foreign commerce complete Parts 3 and 4.

Part 1 — Tax rate computation based on dividends paid during the year (see instructions)

| A Class of stock | B Value of stock on which dividends were paid | C Dividends paid | D Dividend rate (C ÷ B) | E Tax rate computation — If column D is 6% or more, multiply each percent (including fractions of a percent) in column D by .000375 (¾ of a mill). When multiplying, do not convert the percentage amount in column D to a decimal. |
|------------------------|--|---------------------|-------------------------------|--|
| 57 Common | | | % | Enter tax rate here: |
| 58 Preferred | | | % | Enter tax rate here: |
| 59 No-par-value | | | % | Enter tax rate here: |
| 60 Total | | | | |

Part 2 — Tax computation (see instructions)

| | | | | |
|---|------------|--|--|--------------|
| 61 Par value common stock (from line 57, column B) | 61. | | | |
| 62 Taxable base (multiply line 61 by line 24) | 62. | | | |
| 63 Tax (multiply line 62 by line 57, column E) | | | | 63. ● |
| 64 Par value preferred stock (from line 58, column B) | 64. | | | |
| 65 Taxable base (multiply line 64 by line 24) | 65. | | | |
| 66 Tax (multiply line 65 by line 58, column E) | | | | 66. ● |
| 67 Amount paid in on no-par-value stocks (from line 59, column B) | 67. | | | |
| 68 Taxable base (multiply line 67 by line 24) | 68. | | | |
| 69 Tax (multiply line 68 by line 59, column E) | | | | 69. ● |
| 70 Total value of stockholders' equity | 70. | | | |
| 71 Capital subject to tax on dividends (add lines 61, 64, and 67) | 71. | | | |
| 72 Capital not previously taxed (subtract line 71 from line 70) | 72. | | | |
| 73 Taxable base (multiply line 72 by line 24) | 73. | | | |
| 74 Tax (multiply line 73 by .0015 (1½ mills)) | | | | 74. ● |
| 75 Tax on allocated issued capital stock using dividend rates (add lines 63, 66, 69, and 74; enter here and on line 2) | | | | 75. ● |

Part 3 — Tax rate computation based on dividends paid during the year (see instructions)

| | A Paid-in capital | B Dividends paid | C Dividend rate (B ÷ A) | D Tax rate computation — If column C is 6% or more, multiply the percent (including fractions of a percent) in column C by .000375 (3/8 of a mill). When multiplying, do not convert the percentage amount in column C to a decimal. |
|-----|-----------------------------|----------------------------|--------------------------------------|--|
| 76. | | | % | Enter tax rate here: |

Part 4 — Tax computation

| | | | | |
|----|---|---|-----|--|
| 77 | Taxable base (multiply line 76, column A, by line 26) | • | 77. | |
| 78 | Tax (multiply line 77 by line 76, column D; enter here and on line 2) | • | 78. | |

Schedule F — Composition of prepayments on line 7 (see instructions)

| | Section 183 amount |
|----|--|
| 79 | Payment with extension request, from Form CT-5.9, line 5 |
| 80 | Overpayment credited from prior year |
| 81 | Overpayment credited from Form CT-183-M |
| 82 | Total prepayments (add lines 79, 80, and 81; enter here and on line 7) |

Summary of credits claimed on line 5 against current year's franchise tax (mark an X in the box(es) indicating the form(s) filed, and attach the form(s); see instructions for lines 5 and 83)

| | | | | | | | | | | | | | |
|--------|---|--------|----------------------------|--------|----------------------------|--------|----------------------------|---------|----------------------------|---------------|----------------------------|-----|--|
| CT-40 | • <input type="checkbox"/> | CT-41 | • <input type="checkbox"/> | CT-43 | • <input type="checkbox"/> | CT-243 | • <input type="checkbox"/> | CT-249 | • <input type="checkbox"/> | CT-259 | • <input type="checkbox"/> | | |
| CT-611 | • <input type="checkbox"/> | CT-612 | • <input type="checkbox"/> | CT-613 | • <input type="checkbox"/> | CT-631 | • <input type="checkbox"/> | DTF-630 | • <input type="checkbox"/> | Other credits | • <input type="checkbox"/> | | |
| 83 | Total tax credits above that are refund eligible (see instructions) | | | | | | | | | | • | 83. | |

| | | | |
|-------------------------------|--|-----------------------------------|--------------------------------------|
| Third – party designee | Do you want to allow another person to discuss this return with the Tax Dept? (see instructions) Yes <input type="checkbox"/> (complete the following) No <input type="checkbox"/> | | |
| | Designee's name | Designee's phone number () | Personal identification number (PIN) |

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 | | |

See instructions for where to file.