

New York State Department of Taxation and Finance

# Wireless Communications Service Surcharge Report WCS-1-MN

Use this form to report transactions for the period: September 1, 2008, through November 30, 2008 You must file this form by December 15, 2008

309

Taxpayer iden	tification number	Business tele	ephone number		01		For offi	ice use only	
		( )			Change informat	of business ion - If your name,	1 01 0111	oo doo only	
Legal name		,	/		employer	identification			
						address, or ficer information			
DBA (doing bu	usiness as) name				has chan	ged, you must			
						DTF-95. If only			
Number and s	street					ress has changed, file Form DTF-96.			
					You can	get forms from			
City, state, ZIP code						site, by fax, or by ee <i>Need help?</i> on			
					the back.				
Please rea	ad the instructions on the back	chefore co	ompleting t	his form	1				
	appropriate information below					rt.			
	<b></b>								
Septembe	er 2008								
p									
Number of o	devices								
Total surcha	1.								
	,,		,						
October 2	2008								
							_		
Number of o	devices								
Total surcha	arge collected for the month (multiply	number of de	evices by 1.20)				2.		
November	r 2008								
Number of o	devices								
Total surcha	Total surcharge collected for the month (multiply number of devices by 1.20)								
							_		
Total surcharge collected for the period (add lines 1, 2, and 3)									-
Commission	n <i>(multiply line 4 by 1.166% (.01166);</i> se	e instructions	:)				5.		
Total amour	nt due (subtract line 5 from line 4)						6.		-
Payment en	nclosed						7.		
Mark an <b>X</b> i	n the box to the right if you are a wir	eless custo	mer remitting	the surch	arge dire	ectly to the New	∕ork Sta	ite Tax Department	∟
I certify that	t the above statements are true and	correct. I ma	ake these sta	tements v	vith the k	nowledge that kr	nowingly	y making a false or	
	statement on this document is a misc								ed to
investigate t	the accuracy of any information ente	red on this	report.						
Signature		Т	itle			Date	Te	elephone number	
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	Preparer's signature			Date .		Check if	Pr	reparer's SSN or PTIN	
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Paid	Firm's name or yours, if self-employed						EI	N (employer identification no	iumber)
preparer's						ZIP code	Te	Telephone number	
use only						(	)		
	Preparers e-mail address								

## Instructions

## **General information**

The County Law was amended in 2002 to expand the existing statewide cellular telephone service surcharge to include all wireless communications services. For bills rendered on or after August 1, 2002, a monthly \$1.20 fee is imposed for **each** device used to access these services. The surcharge is to be collected by wireless communications service suppliers from their customers. Therefore, wireless communications service plans that include multiple devices are subject to the new surcharge on **each** device, regardless of the pricing structure for the plan.

The surcharge applies to all wireless communications services if the wireless communications customer's place of primary use is in New York State. The place of primary use is the primary business street address or primary residential street address of the customer, within the licensed service area of the wireless communications service provider. A wireless communications service is any commercial mobile service, as that term is defined in section 332(d) of Title 47 of the United States Code, that offers real-time, two-way voice or data service that is interconnected with the public switched telephone network or otherwise provides access to emergency communications services. A wireless communications device is any equipment used to access a wireless communications service. Examples of wireless communications devices on which the surcharge is imposed include cellular telephones, two-way beepers, and other devices (for example, PDAs and handheld or laptop computers, etc.) that have two-way wireless communications capabilities over a public switched network. Examples of devices on which the surcharge is **not** imposed include one-way beepers, walkie-talkies, and medical lifeline services.

Wireless communications service suppliers providing service in New York State must add the surcharge to bills rendered on or after August 1, 2002, to every customer whose place of primary use is in New York State. The surcharge must be separately stated on the bill as a single charge; for example, \$1.20 for a plan with one device, \$2.40 for a plan with two devices, \$3.60 for a plan with three devices, etc.

For more information, including information about exempt customers, please see TSB-M-02(5)M, *State Wireless Communications Service Surcharge*.

## Specific instructions

Enter your legal name, doing business as (DBA) name, complete address, and taxpayer identification number (federal employer identification number (FEIN) or social security number (SSN)).

Changes in business information — If you need to change your address for other New York State taxes, or change other business information such as the name, ID number, physical address, owner/officer information, or paid preparer address, complete and send in Form DTF-95, Business Tax Account Update. If only your address has changed, you may use Form DTF-96, Report of Address Change for Business Tax Accounts. To obtain forms, see Need help? below.

#### Lines 1 through 3

**Monthly collections** — For each month of the period covered by this report, enter the number of devices subject to the surcharge, multiply by 1.20, and enter the total surcharge collected.

#### Lines 4 through 7

**Total surcharge collected for the period** — Add lines 1, 2, and 3. Enter the total on line 4.

**Commission** — As a supplier, you may retain 1.166% of your total collections as an administrative fee. Multiply the amount on line 4 by 1.166% (.01166) and enter the result on line 5.

**Total amount due** — Subtract line 5 from line 4 and enter the result on line 6. This is your total remittance due for the period covered by this report.

**Payment enclosed** — Enter on line 7 the amount of your remittance. This amount should be the same as line 6, *Total amount due.* 

## Sign and date the report

If you are a sole proprietor, you must sign the report and enter your title, the date, and your telephone number. If you are filing this report for a corporation, partnership, or other type of entity, an officer, employee, or partner must sign the report and enter his or her title, the date, and his or her telephone number. If anyone other than an employee, owner, partner, or officer of the business is paid to prepare the report, he or she is required to sign and date the report and provide his or her preparer information.

Attach your check or money order for the total amount due shown on line 6 payable to *Commissioner of Taxation and Finance*.

On your check or money order, write your taxpayer identification number, *Form WCS-1*, and *11/30/08*.

Please be sure to keep a copy of your completed report for your records.

Use the enclosed preprinted return envelope to mail your report. If you are using your own envelope, mail your report to:

NYS DEPARTMENT OF TAXATION AND FINANCE WIRELESS COMMUNICATIONS SERVICE SURCHARGE PO BOX 22020 ALBANY NY 12201-2020

#### Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your report and remit the surcharge. However, if, at a later date, you need to establish the date you filed your report or paid the surcharge, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help?* below for information on ordering forms and publications.) If you use **any** private delivery service, whether it is a designated service or not, address your report to: NYS Tax Department, Miscellaneous Tax I/S Unit, W A Harriman Campus, Albany NY 12227.

## Need help?



Internet access: www.nystax.gov (for information, forms, and publications)

**Fax-on-demand forms:** 1 800 748-3676

To order forms and publications: 1 800 462-8100 **Business Tax** Information Center: 1 800 972-1233

From areas outside the U.S. and outside Canada: (51)

(518) 485-6800

Text Telephone (TTY) Hotline (for persons with hearing and

speech disabilities using a TTY): 1 800 634-2110

### Privacy notification

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

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

This information is maintained by the Director of Records Management and Data Entry, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the United States and outside Canada, call (518) 485-6800.