



Department of Taxation and Finance

Attachment to Form IT-2658

Report of Estimated Metropolitan Commuter
Transportation Mobility Tax (MCTMT) for New York
Nonresident Individual Partners

IT-2658-MTA

Page _____ of _____

Legal name	Employer identification number
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Allocation of estimated MCTMT to partners *(attach additional Form(s) IT-2658-MTA if necessary)*

A Name and address of partner	B Partner's social security number	C Partner's percentage of ownership <i>(see instructions)</i>	D Amount of estimated MCTMT paid on behalf of partner <i>(see instructions)</i>	
Last name	<input type="text"/>	<input type="text"/> . <input type="text"/> %	<input type="text"/>	. 0 0
First name and middle initial				
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State	ZIP code
Last name	<input type="text"/>	<input type="text"/> . <input type="text"/> %	<input type="text"/>	. 0 0
First name and middle initial				
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State	ZIP code
Last name	<input type="text"/>	<input type="text"/> . <input type="text"/> %	<input type="text"/>	. 0 0
First name and middle initial				
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State	ZIP code
Last name	<input type="text"/>	<input type="text"/> . <input type="text"/> %	<input type="text"/>	. 0 0
First name and middle initial				
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State	ZIP code
Last name	<input type="text"/>	<input type="text"/> . <input type="text"/> %	<input type="text"/>	. 0 0
First name and middle initial				
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State	ZIP code

Page total *(add column D amounts)* **. 0 0**

Legal name	Employer identification number	Page _____ of _____
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A Name and address of partner	B Partner's social security number	C Partner's percentage of ownership <i>(see instructions)</i>	D Amount of estimated MCTMT paid on behalf of partner <i>(see instructions)</i>
Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State ZIP code
Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State ZIP code
Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State ZIP code
Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
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Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
Mailing address <i>(number and street or PO box; see instructions)</i>	Apartment number	City, village, or post office	State ZIP code
Last name	<input style="width:90%;" type="text"/>	<input style="width:10%;" type="text"/> . <input style="width:10%;" type="text"/> %	<input style="width:80%;" type="text"/> . 0 0
First name and middle initial			
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