

Department of Taxation and Finance

Attachment to Form IT-2658

IT-2658-MTA

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

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egal name		Employer identification number				
Allocation of estimated MCTMT to	partners (attach	additional Fo	orm(s) IT-26	58-MTA if n	ecessary)	
A Name and address of partner	B Partner's Social Security number		C Partner's percentage of ownership (see instructions)		D Amount of estimated MCTMT paid on behalf of partner (see instructions)	
Last name				%		. 0 0
First name and middle initial			•	70		. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post of	office		State	ZIP code
Last name				0/		
First name and middle initial			•	%		. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post of	office		State	ZIP code
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Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post of	office		State	ZIP code
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Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post of	опісе		State	ZIP code
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Legal name	Employer identification number	Page	of

A Name and address of partner	B Partner's Social Security number		C Partner's percentage of ownership (see instructions)		D Amount of estimated MCTMT paid on behalf of partner (see instructions)	
Last name				%		. 0 0
First name and middle initial			•	70		, 0
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First name and middle initial			•	%		. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or pos	t office		State	ZIP code
Last name						
First name and middle initial			•	%		. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or pos	t office		State	ZIP code
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