



Attachment to Form IT-2658

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

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 (see instructions)	D Amount of estimated MCTMT paid on behalf of partner (see instructions)	
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
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Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	Apartment number	City, village, or post office	State	ZIP code
Last name				. 0 0
First name and middle initial				
Mailing address (number and street or PO box; see instructions)	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:100%;" type="text"/>	<input style="width:100%;" type="text"/> . <input style="width:100%;" type="text"/> %	<input style="width:100%;" 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:100%;" type="text"/>	<input style="width:100%;" type="text"/> . <input style="width:100%;" type="text"/> %	<input style="width:100%;" 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:100%;" type="text"/>	<input style="width:100%;" type="text"/> . <input style="width:100%;" type="text"/> %	<input style="width:100%;" 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:100%;" type="text"/>	<input style="width:100%;" type="text"/> . <input style="width:100%;" type="text"/> %	<input style="width:100%;" 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:100%;" type="text"/>	<input style="width:100%;" type="text"/> . <input style="width:100%;" type="text"/> %	<input style="width:100%;" 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