

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

Page _	of

Legal name	Employer identif	fication numb					
Allocation of estimated MCTMT to	partners (attach a	dditional Fori	m(s) IT-265	58-MTA if r	necessary)		
A Name and address of partner	B Partner's social security number		C Partner's pero of owners (see instruc	ship	D Amount of estimated MCTMT paid on behalf of partner (see instructions)		
Last name				0/		. 0 0	
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post office	ce		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 Ci	ity, village, or post offic	ce		State	ZIP code	
Last name							
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post offic	ce		State	ZIP code	
Last name							
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post offic	ce		State	ZIP code	
Last name							
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post offic	ce		State	ZIP code	
Last name							
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post offi	ce		State	ZIP code	
Last name							
First name and middle initial			•	%		. 0 0	
Mailing address (number and street or PO box; see instructions)	Apartment number Ci	ity, village, or post office	ce		State	ZIP code	
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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 (see instructions)		D Amount of estimated MCTMT paid on behalf of partner (see instructions)		
Last name				%			.00
First name and middle initial				/0			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			. 0 0
First name and middle initial			•	70			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			. 0 0
First name and middle initial			•	70			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			. 0 0
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Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			. 0 0
First name and middle initial			•	70			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			.00
First name and middle initial			•	70			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
Last name				%			. 0 0
First name and middle initial				/0			. 0 0
Mailing address (number and street or PO box; see instructions)	Apartment number	r City, village, or pos	t office			State	ZIP code
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