



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 <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:60%;" 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:60%;" 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:60%;" 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:60%;" 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:60%;" 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

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