



CT-186-P

New York State Department of Taxation and Finance

Utility Services Tax Return — Gross Income

Tax Law — Article 9, Section 186-a

For calendar year 1997

Employer identification number		File number	If address on return is new, check box (see instructions). <input type="checkbox"/>	For office use only
Taxpayer's business name		If your name, employer identification number, address or owner/officer information has changed, you must file Form DTF-95 (see instructions). If no form is enclosed, call 1 800 462-8100 to request one. From areas outside the U.S. and Canada, call (518) 485-6800.		
Mailing Name and Address	Business name at location below (if different from business name above)		If no form is enclosed, call 1 800 462-8100 to request one. From areas outside the U.S. and Canada, call (518) 485-6800.	Date received
	C/o Street or PO Box			Audit use
	City	State		
Trade name		Business telephone number ()	Business activity code number (from federal return)	
Nature of business		State or country of incorporation	Date of incorporation	
<input type="checkbox"/> Check box if overpayment claimed	Date came under the supervision of New York State Department of Public Service			

Type of service or commodity you resell (check all that apply)

Gas
 Electricity
 Steam
 Water
 Refrigeration

If this is your first return, enter name of prior owner or operator, if any: _____ Address of prior owner or operator: _____

If this is your final return, enter name of new owner, if any: _____ Address of new owner: _____

Metropolitan Transportation Business Tax (MTA Surcharge)

Do you do business in the Metropolitan Commuter Transportation District? (see instructions) Yes No If Yes, you must file Form CT-186-P/M.

A. Payment — pay amount shown on line 11. Make check payable to: *New York State Corporation Tax*

Attach your payment here. Payment enclosed

Computation of Tax	
1 Gross income (amount from line 37) × 3.5% (.035) =	1
2 Power for Jobs tax credit (see instructions)	2
3 Net tax (subtract line 2 from line 1)	3
First installment of estimated tax for next period:	
4a If a request for extension was filed, enter amount from Form CT-5.9, line 2	4a
4b If Form CT-5.9 was not filed and line 3 is over \$1,000, enter 25% (.25) of line 3	4b
5 Total (add lines 3 and 4a or 4b)	5
6 Total prepayments (from line 43)	6
7 Balance (if line 6 is less than line 5, subtract line 6 from line 5)	7
8 Penalty for underpayment of estimated tax (check box if Form CT-222 is attached <input type="checkbox"/> if none, enter "0")	8
9 Interest on late payment (see instructions)	9
10 Late filing and late payment penalties (see instructions)	10
11 Balance due (add lines 7 through 10; enter payment on line A above)	11
12 Overpayment (if line 5 is less than line 6, subtract line 5 from line 6)	12
13 Amount of overpayment to be credited to next period	13
14 Balance of overpayment (subtract line 13 from line 12)	14
15 Amount to be credited to Form CT-186-P/M	15
16 Amount of overpayment to be refunded (subtract line 15 from line 14)	16

Certification. I certify that this return and any attachments are to the best of my knowledge and belief true, correct and complete.

Signature of elected officer or authorized person		Official title	Date
Paid Preparer Use Only	Firm's name (or yours if self-employed)		ID number
	Address		Signature of individual preparing this return

Mail your return on or before March 16, 1998, to: **NYS CORPORATION TAX, PROCESSING UNIT, PO BOX 1909, ALBANY NY 12201-1909.**

Schedule A — Computation of Gross Income

Part I — Computation of Receipts

17	Receipts from the sale of gas and electricity for ultimate consumption or use in New York State	17	●	
18	Receipts from the sale of steam for ultimate consumption or use in New York State	18	●	
19	Receipts from the sale of water for ultimate consumption or use in New York State	19	●	
20	Receipts from the sale of refrigeration for ultimate consumption or use in New York State	20	●	
21	Receipts from the sale of services rendered in New York State	21	●	
22	Receipts from the sale of merchandise in New York State	22	●	
23	All other receipts from sales made or services rendered in New York State	23	●	
24	Receipts before allowable deductions (add lines 17 through 23)	24		
25	Allowable deductions from receipts (attach list).....	25	●	
26	Receipts after allowable deductions (subtract line 25 from line 24).....	26		

Receipts from interest and dividends allocated to New York State (attach list, if necessary)

A Name of Entity	B Type of Security	C Amount of Interest And Dividends Received	D Issuer's Allocation Percentage	E Interest and Dividends Allocated to NYS (multiply column C by column D)	
27	Interest and dividends allocated to New York State (add column E amounts)			27	●
28	Receipts from royalties			28	●
29	Total receipts (add lines 26, 27 and 28).....			29	

Part II — Computation of Profits (see instructions)

30	Profits from the sale of securities	30		
31	Profits from the sale of real property	31		
32	Profits from the sale of personal property	32		
33	All other profits	33		
34	Profits before allowable deductions (add lines 30 through 33)	34		
35	Allowable deductions from profits (attach list).....	35	●	
36	Profits after allowable deductions (subtract line 35 from line 34).....	36	●	

Part III — Computation of Gross Income

37	Gross income (add lines 29 and 36; enter here and on line 1).....	37	
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Effective for tax years beginning on or after January 1, 1995, if you have any receipts from telecommunication services, even if it is not your primary business, do not file this form. You must file Form CT-186-E, *Telecommunications Tax Return and Utility Services Tax Return*, to report tax under section 186-e of the Tax Law, as well as the tax under section 186-a of the Tax Law, if any.

For more detailed information, see Form CT-186-E-I, *Instructions for Form CT-186-E*.

Composition of Prepayments Claimed on Line 6		Date Paid	Amount
38	Mandatory first installment	38 / /	
39a	Second installment (including CT-400 installments)	39a / /	
39b	Third installment	39b / /	
39c	Fourth installment.....	39c / /	
40	Payment with extension request, Form CT-5.9, line 5.....	40 / /	
41	Credit from prior years		41
42	Credit from Form CT-186-P/M.....		42
43	Total (add lines 38 through 42; enter here and on line 6).....		43