## STATE OF MARYLAND DEPARTMENT OF ASSESSMENTS & TAXATION FRANCHISE TAX UNIT 301 West Preston Street Baltimore, Maryland 21201-2395

## PUBLIC SERVICE COMPANY FRANCHISE TAX RETURN ELECTRIC AND GAS COMPANIES

Report for the Calendar Year 2016
(File this report on or before March 15, 2017)

No.11

Date Received by Department

2016 MARYLAND FORM

is report on or before March 15, 2017)

This date may not be extended

| 3. State & Year of Incorporation (if Incorporated) 4. Department I.D. #   | Zip Code                                    | 2. Mailing Address   |
|---|---|--|
| (Required)  Franchise Tax Computation: As part of this return, attach financial statements and a copy of the entity's annual regulatory authorities. FAILURE TO FILE THE REQUIRED SUPPORTING DOCUMENTS WILL CAUSE THE RETURN PUBLIC SERVICE COMPANY - ELECTRIC  A-1. Gross Receipts:  1. Total Electric Operating Revenues  2. Less: Gross charges from the sale of electricity  3. Less: Other Exclusion (Attach detailed schedule)  4. Total Operating Revenues excluded from gross receipts (Add lines 2 & 3)  5. Total Electric Operating Revenues subject to Franchise Tax (Subtract line 4 from line 1)  6. Franchise Tax Rate  7. Franchise Tax based on Gross Receipts (Multiply line 5 by line 6)  A-11. Delivery:  8. Number of kilowatt hours of electricity delivered for final consumption in Maryland  9. Franchise Tax Rate for each kWh  10. Franchise Tax Due based on Delivery (Multiply line 8 by line 9)  Credit for electricity delivered for final consumption to a single industrial customer for use in a production activity at the same location in the State  11a00002 per kWh in excess of 500 million up to 1,500 million kWh  b000455 per kWh in excess of 505 million up to 1,500 million kWh  c. Total credit (Add lines 11a and 11b)  12. Franchise Tax Due based on Gross Receipts (Enter line 7)  14. Franchise Tax Due based on Pelivery (Enter line 7)  15. Total Franchise Tax Due based on Delivery (Enter line 12)  15. Total Franchise Tax Due-Electric (Add lines 13 & 14)  PUBLIC SERVICE COMPANY - NATURAL GAS  B-1. Gross Receipts:  1. Total Natural Gas Operating Revenues  2. Less: Gross charges from sale of natural gas  3. Less: Other Exclusion (Attach detailed schedule) |   |  |
| 5. Franchise Tax Computation: As part of this return, attach financial statements and a copy of the entity's annual regulatory authorities. FAILURE TO FILE THE REQUIRED SUPPORTING DOCUMENTS WILL CAUSE THE RETURN PUBLIC SERVICE COMPANY - ELECTRIC A-I. Gross Receipts:  1. Total Electric Operating Revenues 2. Less: Gross charges from the sale of electricity  | ederal I.D. #                               |  |
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| Less: Gross charges from sale of natural gas  |   | -  |
| 3. Less: Other Exclusion (Attach detailed schedule)   |   |  |
|   |   |  |
| 4. Total Operating Revenues excluded from gross receipts (Add lines 2 & 3)  |   |  |
| 5. Total Natural Gas Operating Revenues subject to Franchise Tax (Subtract line 4 from line 1)  |   |  |
| 6. Franchise Tax Rate x   |   |  |

| B-II. Delivery:   |  |   |   |                              |
|---|--|---|---|------------------------------|
| 8. Number of therms of na   | tural gas delivered for final co                               | nsumption in Maryland   | ····· <u> </u>  |                              |
| 9. Franchise Tax Rate for   | each therm   |   |   | x .00402                     |
| 10. Franchise Tax Due base  | ed on Delivery (Multiply line 8                                | 3 by line 9)  |   | ·                            |
| 11. Credit for natural gas  | delivered for final consumpt                                   | ion to an industrial  |   |                              |
| customer for use in a p   | production activity in the Sta                                 | te (Multiply number of therm  | s by .00402)  |                              |
| 12. Franchise Tax Due afte  | er Credit based on Delivery (                                  | Subtract line 11 from line 10)  | <u> </u>  |                              |
| B-III. Total Franchise Tax  | Due:   |   |   |                              |
| 13. Franchise Tax Due base  | ed on Gross Receipts (Enter lin                                | ne 7)   | <u> </u>  |                              |
| 14. Franchise Tax Due base  | ed on Delivery (Enter line 12)                                 |   | <u> </u>  |                              |
| 15. Total Franchise Tax   | <b>Due-Natural Gas</b> (Add lin                                | nes 13 & 14)  | <u> </u>  |                              |
| C. FRANCHISE TAX CO   | MPUTATION SUMMARY  |   |   |                              |
| 1. Total Franchise Tax Du   | e - Electric (Enter line 15 of A                               | ı-III)  | ······  |                              |
| 2. Total Franchise Tax Du   | e - Natural Gas (Enter line 15                                 | of B-III)   | ·····   |                              |
| 3. Total Franchise Due -  | Electric & Natural Gas (Add                                    | l lines 1 & 2)  |   |                              |
| PAYMENTS AND CRE  | DITS:  |   |   |                              |
| 4a. 2016 Estimated Franch   | ise Tax Payments   | <u> </u>  |   |                              |
| b. Maryland-Mined Coal  | Credit (Attach required certif                                 | ication from SDAT)  |   |                              |
| c. Business Tax Credits a   | as Computed on Form AT3-74, I                                  | Part E, line 11   |   |                              |
| d. Total Payments and   | Credits (Add lines 4a through                                  | 4c)   | <u></u>   |                              |
| 5. Balance of Franchise 7   | Tax Due (If line 3 exceeds line                                | e 4d, enter the difference)   | <u> </u>  |                              |
|   | d exceeds Line 3, enter the dis                                |   | ment  |                              |
| should be applied to e  | stimated tax for 2017 🔲 or                                     | be refunded   |   |                              |
| I declare under the examined by me and to the Officer's Signature | penalties of perjury that this<br>e best of my knowledge and l | s return, including any accordelief is a true, correct, and o   | mpanying schedules and complete return.  Preparer's Signature | d statements, has been  Date |
|   |  |   |   |                              |
|   |  |   |   |                              |
| Title   |  |   | me, address and phone n                                       | umher                        |
| Title   |  | Tilli lia   | me, address and phone if                                      | umoci                        |
|   | Tax Payments of \$10,000 or                                    | ole to Department of Assessi<br>r more must be remitted by<br>s made through EFT, check   | Electronic Funds Trans  | fer                          |
| Please  | use the bank account nun                                       | ber as indicated in the A   | CH credit tax paymer  | <u>nt instructions</u>       |
|   | Depar  | ail this form with payment t<br>tment of Assessments and T<br>Franchise Tax Unit<br>301 West Preston Street<br>ltimore, Maryland 21201-23 | axation   |                              |
|   | FOR A  | SSISTANCE CALL: (410) 767-1   | 1940  |                              |
|   |  | FOR DEPARTMENT USE ONLY   |   |                              |
| REPORT RECEIVED   | DOCTED   | AUDITED   | TAY DEFICIENCY  | INTERDECT (DENIAL TRY        |
|   | POSTED   | AUDITED   | TAX DEFICIENCY  | INTEREST/PENALTY             |