

CT-2658

Department of Taxation and Finance

Report of Estimated Tax for Corporate Partners

For Payments on Behalf of C Corporations Only

Page 1

Due date (mark an X in one box): Ap	ril 18, 2016	June 1	5, 2016	September 15, 2016	Janua	ıry 17, 2017 🔟	
Legal name of Partnership				Employer ic	entification	on number (EIN)	
Trade name of business if different	Total number of partners from all Form(s) CT-2658 and CT-2658-ATT						
Address (number and street or rural ro	oute)			Total New York	. 2000 7	•••	
011 111				source income			. 00
City, village, or post office	Stat	e	ZIP code	Total estimated tax paid from			
Contact name		Contact p	phone number	all Form(s) CT-2658 and CT-2658-ATT			. 00
Contact e-mail address				-			
Ilocation of estimated tax to	corporat	e partners (attach Form(s) C	T-2658-ATT if necessary)			
egal name of corporate partner				Naw Yark assumation are	Δ		
Business address (see instructions)	City	State	e ZIP code	New York source income		mount of estimated tax paid	
Contact name		Telepho	ne number		00 .		. 00
Partner's EIN	Р	ercentage of ow	nership	•			
			%				
egal name of corporate partner	·						
Business address (see instructions)	City	State	e ZIP code	New York source income		mount of estimated tax paid	
Contact name		Telepho	one number		00 .		00
Partner's EIN	P	ercentage of ow	nership	• 1			. 00
			%				
egal name of corporate partner							
Business address (see instructions)	City	State	e ZIP code	New York source income		nount of estimated tax paid	
Contact name		Telepho	one number		00 .		. 00
Partner's EIN	Р	ercentage of ow	/ nership	•			. 00
			%				
				NY source income page t	otal Es	timated tax paid pag	ge total
		Pa	ge totals		00		. 00
▼ Paid preparer must complete (see instructions) ▼ Date:				▼ Sign here ▼			
Preparer's signature			er's NYTPRIN	Signature of general partr	er		
Firm's name (or yours, if self-employed)		▼ Prepare	er's PTIN or SSN	71			
Address	• Employe	er identification numb	Date	▼ Da	ytime phone number		
			NYTPRIN excl. code	E-mail:			
E-mail:				1			

Page 2 of _____

Legal name of Partnership		Employer identification number (EIN)				
Legal name of corporate partner						
Business address (see instructions) City		State	ZIP code	New York source income	Amount of estimated tax paid	
Contact name		Telephone nu	mber	. 00	. 00	
Partner's EIN	P	Percentage of ownership	ip			
		•	<u></u> %			
Legal name of corporate partner				New York source income	Amount of	
Business address (see instructions)	City	State	ZIP code	New York source income	Amount of estimated tax paid	
Contact name			mber	.00	_ 00	
Partner's EIN	P	Percentage of ownership	ip	•	•	
		•	%			
Legal name of corporate partner	·					
Business address (see instructions)	City	State	ZIP code	New York source income	Amount of estimated tax paid	
Contact name		Telephone nu	mber	.00	_ 00	
Partner's EIN	P	ercentage of ownersh	ip	•	• • •	
		•	%			
Legal name of corporate partner						
Business address (see instructions)	City	State	ZIP code	New York source income	Amount of estimated tax paid	
Contact name	Telephone number		mber	.00	00	
Partner's EIN	P	ercentage of ownersh	ip	• • •	• • • •	
			%			
Legal name of corporate partner	'					
Business address (see instructions) City		State	ZIP code	New York source income	Amount of estimated tax paid	
Contact name		Telephone nu	mber	.00	_ 00	
Partner's EIN	P	Percentage of ownersh	ip	• • • •	• • • •	
			%			
				New York source income page total	Amount of estimated tax paid page total	
		Page to	itals	.00	. 00	