



Department of Taxation and Finance

IT-2658

Report of Estimated Tax for Nonresident Individual Partners and Shareholders For Payments on Behalf of Nonresident Individuals Only of Personal Income Tax and Metropolitan Commuter Transportation Mobility Tax (MCTMT)

Due date (mark an **X** in one box): April 15, 2026 June 15, 2026 September 15, 2026 January 15, 2027

Legal name of partnership or New York S corporation	Employer identification number	Mark an X in the box if filer is an S corporation..... <input type="checkbox"/>	
Trade name of business if different from legal name above	Contact name		
Address (number and street or rural route; see instructions, Form IT-2658-I)	Contact phone number ()		
City, village, or post office	State	ZIP code	Contact email address

You must complete Forms IT-2658-NYS and IT-2658-MTA, whichever are applicable (see *instructions*). **Submit all applicable schedules with this return.**

NYS estimated personal income tax

1 Total number of partners/shareholders from all Form(s) IT-2658-NYS **1**

2 Total New York source income **2** . **00**

3 Total estimated personal income tax paid from all Form(s) IT-2658-NYS **3** . **00**

Estimated MCTMT

4 Total number of partners from all Form(s) IT-2658-MTA **4**

5 Total net earnings from self-employment allocated to the MCTD (Metropolitan Commuter Transportation District) **5** . **00**

6 Total estimated MCTMT paid from all Form(s) IT-2658-MTA **6** . **00**

Total payment

7 Total payment (add lines 3 and 6) **7** . **00**

Third-party designee? (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Print designee's name	Designee's phone number ()	Personal identification number (PIN)
	Email:		

▼ Paid preparer must complete (see instr.) ▼		Date
Preparer's signature	Preparer's NYTPRIN	
Firm's name (or yours, if self-employed)	Preparer's PTIN or SSN	
Address	Employer identification number	
	NYTPRIN excl. code	
Email:		

▼ Sign here ▼	
Signature of general partner, member, or authorized person	
Date	Daytime phone number ()
Email:	

Make your check or money order payable in U.S. funds to: **Commissioner of Taxation and Finance**Mail this form to: NYS ESTIMATED INCOME TAX
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