CT-2658

Report of Estimated Tax for Corporate Partners

For Payments on Behalf of C Corporations Only

(mark an X in one)	15, 2005 September 15, 20		Page 1 of	
Legal name	15, 2005 <u>Coptember 15, 20</u>	Employer identification numbe		
Trade name of business if different from lega	al name above	Total number of partners from all Form(s) CT-2658 and CT-2658-ATT		
Address (number and street or rural route)		Total New York source income		
City, village, or post office State ZIP code		Total estimated tax paid from		
Contact name	Contact phone number (all Form(s) CT-2658 and CT-2658-ATT		
Allocation of estimated tax to Legal name of corporate partner	corporate partners (attac	h Form(s) CT-2658-ATT	if necessary)	
Business address City	State ZIP code	New York source income	Amount of estimated tax paid	
Contact name	Telephone number			
Employer identification number (EIN)	Percentage of ownership			
	• . %			
Legal name of corporate partner Business address City	State ZIP code	New York source income	Amount of estimated tax paid	
Contact name	Telephone number			
Employer identification number (EIN)	Percentage of ownership			
Legal name of corporate partner	•	New York	Amount of	
Business address City	State ZIP code	source income	estimated tax paid	
Contact name Employer identification number (EIN)	Telephone number () Percentage of ownership			
Employer Identification number (Em)	• Wileising %			
		New York source income page total	Amount of estimated tax page total	
	Page totals			
Preparer's signature Preparer's signature preparer's	Preparer's SSN or PTIN	Signature of general par	tner	
use only Firm's name (or yours, if self-employed)	Employer identification number	─ Sign here		
Address	Date Mark X if self-employed	Date Day	ytime phone number (optional)	

Mail this form to: NYS ESTIMATED CORPORATION TAX, PROCESSING UNIT, PO BOX 22109, ALBANY NY 12201-2109

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Legal name			Employer identification number		
Legal name of corporate partner					
Business address	City	State ZIP co	ode	lew York source income	Amount of estimated tax paid
Contact name	• Tel				
Employer identification number (EIN)	n number (EIN) Percentage of ownership				
Legal name of corporate partner	•		%		
Business address	City	State ZIP co	ode	lew York source income	Amount of estimated tax paid
Contact name	• Tel	ephone number			
Employer identification number (EIN)	Percentage of	of ownership			
Legal name of corporate partner	•		%		
Business address	City	State ZIP co	ode	lew York source income	Amount of estimated tax paid
Contact name	• Tel	ephone number			
Employer identification number (EIN)	Percentage of		.,		
Legal name of corporate partner		<u></u>	%		
Business address	City	State ZIP co		lew York source income	Amount of estimated tax paid
Contact name	• Tel	ephone number			
Employer identification number (EIN)	Percentage of				
Legal name of corporate partner	•	<u>.</u>	%		
Business address	City	State ZIP co		lew York source income	Amount of estimated tax paid
Contact name	• Tel	ephone number			
Employer identification number (EIN)	Percentage of				
		<u> </u>		ew York source	Amount of estimated tax
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