



**NYC** **APPLICATION FOR**  
**6** **AUTOMATIC EXTENSION**  
**GENERAL CORPORATION TAX**

▲ DO NOT WRITE IN THIS SPACE - FOR OFFICIAL USE ONLY ▲

**2006**

For CALENDAR YEAR 2006 or FISCAL YEAR beginning \_\_\_\_\_, 2006 and ending \_\_\_\_\_, \_\_\_\_\_  
Print or Type ▼

Name (if combined corporate filer, give name of reporting corporation - see instructions)		EMPLOYER IDENTIFICATION NUMBER  [ ] - [ ]
Address (number and street)		
City and State	Zip Code	
Business Telephone Number		

State or country of incorporation	Date of incorporation
Date began business in New York City	Person to contact
Principal business activity	

A. Payment	Pay amount shown on line 7 - Make check payable to: NYC Department of Finance ●	Payment Enclosed
1a. Tax for 2005 or fiscal year 2006	Estimated tax for 2006 or fiscal year 2007 (see instructions) .... ● 1b.	
2. <b>COMBINED FILERS ONLY:</b> Enter total minimum tax due from Schedule A, line 15 below (see instructions). ● 2.		
3. <b>TOTAL ESTIMATED TAX</b> for 2006 or fiscal year 2007 (line 1b plus line 2)..... ● 3.		
4. If amount on line 3 exceeds \$1,000, enter 25% of line 3 (see instructions)..... ● 4.		
5. Total of lines 3 and 4 or \$300 (minimum tax), whichever is greater ..... ● 5.		
6. Prepayments (from "Composition of Prepayments", below.) ..... ● 6.		
7. Balance due (line 5 less line 6). Enter payment amount on line A above ..... ● 7.		

**SCHEDULE A This schedule should be completed by NYC combined return filers (NYC-3A)**

List name and Employer Identification Number for each authorized member in the combined group.

	NAME OF MEMBER CORPORATION (EXCLUDING REPORTING CORPORATION)	EMPLOYER IDENTIFICATION NUMBER	Check box if not required to pay minimum tax (see instructions)	MINIMUM TAX DUE \$300
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.	Total minimum tax due - transfer amount to line 2 (Attach rider for additional names) .....			15.

**COMPOSITION OF PREPAYMENTS**

PREPAYMENTS REPORTED ON LINE 6	DATE	AMOUNT	TWELVE DIGIT TRANSACTION ID CODE
A. Mandatory first installment paid with preceding year's tax .....			
B. Payment with Declaration, Form NYC-400 (1) .....			
C. Payment with Notice of Estimated Tax Due (2) .....			
Payment with Notice of Estimated Tax Due (3) .....			
D. Overpayment from preceding year credited to this year .....			
E. <b>TOTAL</b> of A through D (enter on line 6).....			

**CERTIFICATION OF AN ELECTED OFFICER OF THE CORPORATION**

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete.

SIGN HERE → Signature of Officer: Title: Date:

**GENERAL INFORMATION**

1. The filing of this application on or before the due date automatically provides an extension of six months after such due date for the filing of your completed tax return, provided the tax is properly estimated and the application is accompanied by a remittance for the amount shown on line 7. (If line 6 exceeds line 5, no remittance is required.)
2. A taxpayer that has received an automatic six-month extension by filing Form NYC-6 may request up to two additional three-month extensions by filing Form NYC-6.1 (Application for Additional Extension). A separate Form NYC-6.1 must be filed for each additional three-month extension requested. The Department of Finance may grant one or both additional three-month extensions if good cause exists.
3. A properly estimated tax must be either:
  - a) not less than 90% of the tax for the year for which an extension is requested as finally determined;
  - or -
  - b) not less than the tax shown on the return for the preceding taxable year if that year consisted of 12 months.

**NOTE:** for this purpose, the tax as finally determined includes a final determination of the tax due for the taxable period after an audit, the filing of an amended return or some other adjustment or correction.

A taxpayer failing to meet all requirements will not receive the extension. If the tax return for which the extension was requested is filed after the due date, the return will be treated as late and late charges will be assessed.

**LINES 1a and 1b**

Enter on line 1a the tax for the year preceding the tax year covered by this application. For a corporation that filed a Form NYC-4S, this is the amount the corporation entered on line 5 of

its return for the preceding year. For a corporation that filed a Form NYC-3L, this is the amount the corporation entered on line 10 of Schedule A of its return for the preceding year. For a combined group that filed a Form NYC-3A, this is the amount the group entered on line 12 of Schedule A of the group's return for the preceding year.

On line 1b, enter the estimated tax for 2006 or fiscal year 2007 after allowable credits. See paragraph 3 under "General Information".

**LINE 2****COMBINED FILERS**

For tax periods ending on or after December 31, 1997, advance permission to file on a combined basis is not required. Provided the group of corporations meet the requirements for filing a combined return, the group is deemed to have tentative permission to file on a combined basis. However, the combined filing is subject to revision or disallowance on audit. The combined group should file a joint application for automatic extension on one Form NYC-6. The minimum tax payment of \$300 must be paid for each taxpayer included in the combined group except the reporting corporation, which is responsible for the combined tax.

Use the Employer Identification Number of the "reporting corporation" (the group member paying the combined tax) when completing page 1.

**LINE 4****FIRST INSTALLMENT OF ESTIMATED TAX**

If the estimated tax shown on line 3 exceeds \$1,000, payment of the amount shown on line 4 is required as the first installment payment on account of estimated tax for the calendar year or fiscal year following the tax year covered by this application. The amount shown on line 4, if properly computed, is your required first installment of estimated tax for such following year, and is not to be changed when filing your completed tax return.

If the tax for the period following that covered by this application is expected to exceed \$1,000, a declaration of estimated tax and installment payments are required. Form NYC-400 is to be used for this purpose. (If the tax on this application exceeds \$1,000, Form NYC-400 will automatically be mailed to the taxpayer.)

**NOTE**

A combined return member is excused from the minimum tax payment if it does **not** fall within any of the following categories:

- a) does business in the City;
- b) employs capital in the City;
- c) owns or leases property in the City; or
- d) maintains an office in the City.

**WHEN TO FILE**

Calendar year taxpayers must file this application on or before March 15, 2007. For fiscal years beginning in 2006, file on or before the 15th day of the third month following the close of the fiscal year.

**SIGNATURE**

This report must be signed by an officer authorized to certify that the statements contained herein are true. If the taxpayer is a publicly-traded partnership or another unincorporated entity taxed as a corporation, this return must be signed by a person duly authorized to act on behalf of the taxpayer.

**CAUTION**

An extension of time to file your federal tax return or New York State Franchise Tax return does **NOT** extend the filing date of your New York City tax return.

**ELECTRONIC FILING**

Note: Register for electronic filing. NYCeFile is an easy, secure and convenient way to file and pay an extension on-line.

For more information log on to:

**[nyc.gov/nycefile](http://nyc.gov/nycefile)**

Make remittance payable to the order of: NYC DEPARTMENT OF FINANCE

Payment must be made in U.S.dollars, drawn on a U.S. bank.

To receive proper credit, you must enter your correct Employer Identification Number on your application and remittance.

**MAILING INSTRUCTIONS**

**APPLICATIONS WITH REMITTANCES**  
 NYC DEPARTMENT OF FINANCE  
 P.O. BOX 5070  
 KINGSTON, NY 12402-5070

**APPLICATIONS WITHOUT REMITTANCES**  
 NYC DEPARTMENT OF FINANCE  
 P.O. BOX 5080  
 KINGSTON, NY 12402-5080