

# NYC APPLICATION FOR

		1	AUTOMA				a bo not wate in the	O AOL I	OK OFFICIAL SOL ONLY		
	BANKING CORPORATION TAX  BANKING CORPORATION TAX										
ATTACH A COPY OF THIS FORM TO FORM NYC-1 OR NYC-1A											
		For CALENDAR YEAR 2006 or FISCAL YEAR beginning, 2006 and							]		
	Name (if combined filer, give name of reporting corporation - see instructions)										
	ATTACH A COPY OF THIS FORM TO FORM NYC-1 OR NYC-1A  For CALENDAR YEAR 2006 or FISCAL YEAR beginning										
		Audiess (number and street)					EMPLO	EMPLOYER IDENTIFICATION NUMBER			
		or Type	City and State		Zip	Code			<del></del>	<del>-</del>	
		Print					_				
		Business Telephone Number									
		State or country of incorporation			Date of incorporation					=	
		_	State of country of incorporation			Date of incorporation					
			Date began business in New York City			Person to contact					
		-	Principal business activity								
									— Payment Enclosed –		
١.	Payment	Pa	ay amount shown on line 7 - Make o	check payal		<u> </u>					
1a.	Preceding yea	ır's	tax	1b.		nated tax for 200 2007 <i>(see instru</i>					
2.			·	_	•	•	•				
	COMBINED FILERS ONLY: Enter total minimum tax due from Schedule A, line 15, below (see instructions). ● 2.										
3.		TOTAL ESTIMATED TAX for 2006 or fiscal year 2007 (line 1b plus line 2)									
4.			3 exceeds \$1,000, enter 25% of line								
5.	Total of lines 3	Total of lines 3 and 4 or \$125 (minimum tax), whichever is greater ● 5.									
6.	Prepayments (1	fror	m "Composition of Prepayments Sch	edule", belo	w.)		• 6.				
7.	Balance due (li	ine	5 less line 6) Enter payment amoun	t on line A a	bove		• 7.				
SC	HEDULE	E A	A This schedule should be co	mpleted b	y NYC	combined ret	urn filers (N	YC-1A	7)		
Lis	t name and Emp	oloy	yer Identification Number for EACH a	authorized m	nember	in the combined	group.				
	NAME OF ME	MRF	ER CORPORATION (EXCLUDING REPORTING CORPORAT	ION)	EMPLOYER IDENTIFICATION		Check box if not required to pay minimum tax		MINIMUM TAX DUE		
	NAME OF MEMB				NUMBER		(see instructions)		\$125		
8.											
9.											
10. 11.											
12.											
13.											
14.											
15.	Total minimum	tax	due - transfer amount to line 2 (Atta	ach rider for	additio	nal names)		15.			
CO	MPOSITION	1 C	OF PREPAYMENTS SCHED	ULE							
			EPORTED ON LINE 6		ATE	AMOL	JNT	TWELVE	DIGIT TRANSACTION I	CODE	
	-		tallment paid with preceding year's ta								
	-		aration, Form NYC-400B (1)ce of Estimated Tax Due (2)								
	-		ce of Estimated Tax Due (2)								
	-		preceding year credited to this year								
			and D, (enter on line 6)								
			CERTIFICATION OF AN								
I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete.											

	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.) (Refer to instructions accompanying Form NYC-1 for the proper method of computing the estimated tax due.)
- 2. A taxpayer that has received an automatic six-month extension obtained by filing Form NYC-6B may request up to two additional three-month extensions by filing Form NYC-6.1B. A separate Form NYC-6.1B must be filed for each additional three-month extension requested. The Department of Finance may grant additional three-month extensions if good cause exists.

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

#### NYC-1 FILERS -

Enter on line 1a the tax from the year preceding the year covered by this application. Enter on line 1b the estimated tax for the period for which this extension is requested. This is the amount a Form NYC-1 filer estimates will be entered on line 9 of Schedule A of its return for the year covered by this application or the amount a combined group filing a Form NYC-1A estimates will be entered on line 11 of Schedule A of its return for the year covered by this application.

#### NYC-1A COMBINED FILERS -

Enter on line 1a the preceding year's combined tax and on line 1b the estimated combined tax for the period for which this extension is required. See paragraph 2 under "General Information".

#### LINE 2 COMBINED FILERS

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-6B. The minimum tax payment of \$125 must be paid for each taxpayer included in the combined group except the reporting corporation, which is responsible for the combined tax. Schedule A must be filled out.

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 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-400B is to be used for this purpose. (If the tax on this application exceeds \$1,000, Form NYC-400B will automatically be mailed to the taxpayer.)

#### NOTE

A combined return member is excused from the minimum tax payment if it is not doing business in the City and therefore not subject to the Tax on Banking Corporations.

#### 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 3rd month following the close of the taxpayer's fiscal year.

#### **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.

#### **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.

#### **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

#### MAIL THIS FORM TO:

NYC DEPARTMENT OF FINANCE P. O. BOX 5120 KINGSTON, NY 12402-5120

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.