

New York State Department of Taxation and Finance

IT-2658

Report of Estimated Tax for Nonresident Individual Partners and Shareholders

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For Payments on Behalf of Nonresident Individuals Only

Due d	late (mark an X in one box): Api	il 15, 2	2014	June	e 16, 2014		Septembe	er 15, 2014		January 15, 2015		
	Legal name					bo	ark an X in the street in th	ne 🔠		loyer identification numbe	r	
Print or type	Trade name of business if different from legal name above						Total number of partners/shareholders from all Form(s) IT-2658 and IT-2658-ATT					
	Address (number and street or rural route; see instructions, Form IT-2658-					Tot	Total New York source income					00
	City, village, or post office State ZIP cod					Tota ta	al estimated ax paid from a	all				
Conta	ct name		Contact (ot phone n	umber		orm(s) IT-265 nd IT-2658-A					00
Conta	ct e-mail address		·			·						
	ation of estimated tax to r					and s	harehold	lers (attac	h Fo	rm(s) IT-2658-ATT if ne	ecess	sary)
	r's/shareholder's first name and middle			hareholder'	's last name	Social	security nu	mber (SSN)				
Mailing	g address (number and street or rural route;	see instru	uctions)	Apar	rtment number	Porco	ntage of ow	norchin		Amount of estimated tax behalf of nonresident pa shareholder		
City, vi	llage or post office	State		ZIP co	de	Perce	• • •	nership]%	STATETIONE	•	00
Partne	r's/shareholder's first name and middle	initial	Partner's/s	hareholder'	's last name	Social	security nu	mber (SSN)				
Mailing	g address (number and street or rural route;	see instru	uctions)	Apar	rtment number					Amount of estimated tax behalf of nonresident pa		
City, village or post office State		ZIP code		Percentage of owr		nership %		shareholder		00		
Partne	r's/shareholder's first name and middle	initial	Partner's/s	hareholder'	's last name	Social	security nu	mber (SSN)				
Mailing	g address (number and street or rural route;	see instru	uctions)	Apar	rtment number					Amount of estimated tax behalf of nonresident pa		
City, village or post office State			ZIP code		Percentage of ownership %]%	shareholder		00		
												00
			F	Page tota	al (add last co	lumn aı	mounts)				•	00
•	Paid preparer must complete (see in	nstructio	ns) 🔻	Date:	. NOTED III			Signature of gauthorized		il partner or member, elected of	ficer, c	or
Preparer's signature Firm's name (or yours, if self-employed)			► Preparer's NYTPRIN ▼ Preparer's PTIN or SSN			Sign	4411011204					
Address			Employer identification number			here	Date		Daytime phone number			
					Mark an X if self-employed	\dashv				()		
E-ma	ail:				_ con omployed							

Mail this form to: NYS ESTIMATED INCOME TAX, PROCESSING CENTER, PO BOX 4123, BINGHAMTON NY 13902-4123



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Legal name				Employer	dentification number		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
Mailing address (number and street or rural	route; see inst	ructions) Apartment number	Described of supposed	-:	Amount of estimated tax paid or behalf of nonresident partner or shareholder		
City, village or post office	State	ZIP code	Percentage of ownersh	%	. 00		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
Mailing address (number and street or rural	route; see inst	ructions) Apartment number		- 1	Amount of estimated tax paid or behalf of nonresident partner or shareholder		
City, village or post office	State	ZIP code	Percentage of ownersh	nip %	• 00		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
Mailing address (number and street or rural	route; see inst	ructions) Apartment number			Amount of estimated tax paid or behalf of nonresident partner or shareholder		
City, village or post office	State	ZIP code	Percentage of ownersh	mip 	• 00		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
Mailing address (number and street or rural	route; see inst	ructions) Apartment number			Amount of estimated tax paid or behalf of nonresident partner or		
City, village or post office	State	ZIP code	Percentage of ownersh	mip %	shareholder . 00		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
ailing address (number and street or rural route; see instructions) Apartment number					Amount of estimated tax paid on behalf of nonresident partner or		
City, village or post office	State	ZIP code	Percentage of ownersh	nip %	shareholder . 00		
Partner's/shareholder's first name and n	niddle initial	Partner's/shareholder's last name	Social security number	r (SSN)			
Mailing address (number and street or rural	route; see inst	Apartment number			Amount of estimated tax paid on behalf of nonresident partner or		
City, village or post office	State	ZIP code	Percentage of ownersh	nip %	shareholder . 00		
		Page total (add last co	lumn amounts)		. 00		