

## **DTF-686**

New York State Department of Taxation and Finance

## **Tax Shelter Reportable Transactions**

## Attachment to New York State Return

Tax Law Section 25(a)(1)

All files files tenter tax period.				
	beginning	eginning ending		
Name(s) as shown on your return	Taxpayer tax return	Taxpayer identification number shown on page 1 of your tax return		
Spouse's name (for personal income tax, if applicable)	Spouse's	Spouse's identification number (if applicable)		
Mailing address				
City, village, town, or post office	State		ZIP code	
Taxpayer's e-mail address	-			
File this form with your business tax return, Form CT-3, CT-3-A, CT-3-S, CT-33-NL, CT-183, CT-184, CT-185, CT-186, CT-186-A, CT-186-E, CT-18 of tax, Form CT-8, or CT-9; with your report of federal changes, Form CT IT-201, IT-203, IT-204, IT-205, IT-150-X, IT-201-X, or IT-203-X; or with yo Form IT-113-X.	86-EZ, or CT-186-P; with r-3360; or with your perso	your application	ons for credit or refund x return, Form IT-150,	
1 Identify the type of federal reportable transactions. Mark an <b>X</b> in the box(es) that apply (see instructions, Form DTF-686-I).				
A. ● Listed transaction	D. ● Loss transaction			
B. ● Confidential transaction E. ● Transaction with brief assets holding period				
C. ● Transaction with contractual protection F. ● Transaction of interest				
2 Enter the total number of IRS Form(s) 8886 that are attached to this form				
3 Enter in the box(es) below the applicable code(s) for each federal listed transaction being reported (see instructions).				
• • • • • •	• •		•	
4 Identify the type of New York reportable transactions. Mark an X in the box(es) that apply (see instructions).				
A. • New York listed transaction				
B. • New York confidential transaction				
C. • New York transaction with contractual protection				
5 Enter the total number of New York Form(s) DTF-686-ATT that are attached to this form				
Waiver of the secrecy provisions of the Tax Law for purposes of a consolidated disclosure (see instructions)				
As an authorized officer of the above named corporation, I hereby cons sections 202, 211.8, 1467, and 1518 as such provisions relate to the dis				
Signature of authorized officer	fficial title	D	Pate	
E-mail address of authorized officer				



## Need help?



**Internet access:** www.nystax.gov (for information, forms, and publications)



**Fax-on-demand forms:** Forms are available 24 hours a day,

7 days a week. 1 800 748-3676



**Telephone assistance** is available from 8:00 A.M. to 5:00 P.M. (eastern time), Monday through Friday.

To order forms and publications: 1 800 462-8100

Corporation Tax Information Center: 1 888 698-2908

Personal Income Tax Information Center: 1 800 225-5829

From areas outside the U.S. and

outside Canada: (518) 485-6800



Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): If you have access to a TTY, contact us at 1 800 634-2110. If you do not own a TTY, check with independent living centers or community action programs to find out where machines are available for public use.



Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 972-1233.

**Privacy notification** — The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Director of Records Management and Data Entry, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the United States and outside Canada, call (518) 485-6800.

