New York State Department of Taxation and Finance

New York Reportable Transaction Disclosure Statement and Request for a Determination

DTF-686-ATT

2013

All filers must enter tax period:

beginning _____ ending _____

Name(s) as shown on return	Taxpayer identification number shown on page 1 of your tax return
Spouse's name *(for personal income tax, if applicable)*	Spouse's identification number *(if applicable)*
Mailing address	

City, village, town, or post office	State	ZIP code

Taxpayer's e-mail address

A Mark an **X** in the box if a protective disclosure .... ☐

B Mark an **X** in the box if requesting a determination .... ☐

1a Name of New York reportable transaction	**1b** Initial year participated in transaction *(yyyy)*

2 Identify the type of New York reportable transaction. Mark an **X** in the boxes that apply *(see instructions)*.

a ☐ New York listed transaction **b** ☐ New York confidential transaction

c ☐ New York transaction with contractual protection

3 If the transaction is a listed transaction, or substantially similar to a listed transaction, identify here *(see instructions)*.

_____

4 If you participated in the transaction through another entity, such as a partnership, an S corporation, or a foreign corporation, provide the information below for the entity(ies).

a Name ....

b Type of entity ....

c Form number of New York State tax return filed ....

d Employer identification number (EIN) ....

5 Enter below the name and address of each person to whom you paid a fee with regard to the transaction if that person promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. Attach additional sheets if necessary.

Name	Identifying number *(if known)*
Mailing address *(number and street or rural route)* Apartment number	Fee paid
City, village, or post office State ZIP code	

687001130094

6 Facts

    a Identify the type of tax benefit generated by the transaction. Mark an *X* in the boxes that apply *(see instructions)*.

☐ Deductions   ☐ Exclusions from gross income   ☐ Tax credits   ☐ Other _____

☐ Capital loss   ☐ Nonrecognition of gain   ☐ Deferral

☐ Ordinary loss   ☐ Adjustments to basis   ☐ Absence of adjustments to basis

    b Further describe below the amount and nature of the expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into.

7 Identify all tax exempt, foreign, and related entities and individuals involved in the transaction. Mark an *X* in the appropriate box(es) *(see instructions)*. Include their name(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its country of incorporation or existence. For each related entity, explain how it is related. Attach additional sheets if necessary. Include your name and identifying number on all attached sheets.

    a Type of entity: ☐ Tax-exempt   ☐ Foreign   ☐ Related

Name	Identifying number
Address	
Description	

    b Type of entity: ☐ Tax-exempt   ☐ Foreign   ☐ Related

Name	Identifying number
Address	
Description	

687002130094