



New York State Department of Taxation and Finance

**Request for Three-Month Extension to File  
Form CT-186-E**

(for telecommunications tax return and utility services tax return)

Tax Law — Article 9, Section 193

**CT-5.9-E**

For calendar year 2014

Employer identification number (EIN)	File number	Business telephone number ( )	
Legal name of corporation		Trade name/DBA	
Mailing name (if different from legal name) c/o Number and street or PO box		State or country of incorporation	Date received (for Tax Department use only)
City State ZIP code		Date of incorporation	
		Foreign corporations: date began business in NYS	
		Audit use	
If you need to update your address or phone information for corporation tax, or other tax types, you can do so online. See <i>Business information</i> in Form CT-1.			

**Important:** File this form to request a three-month extension of time to file Form CT-186-E. **Do not** use this form to request an extension for any other New York State tax forms.

<b>A.</b> Pay amount shown on line 12. Make payable to: <b>New York State Corporation Tax</b> Attach your payment here. Detach all check stubs. (See instructions for details.)	<b>A</b>	Payment enclosed
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Computation of estimated taxes and MTA surcharges		A. NYS tax	B. MTA surcharge
1 Excise tax on telecommunications services (see instructions) .....	1		
2 Tax on the furnishing of utility services .....	2		
3 Total taxes (add lines 1 and 2) .....	3		
4 MTA surcharge related to telecommunication services .....	4		
5 MTA surcharge on the furnishing of utility services .....	5		
6 Total MTA surcharges (add lines 4 and 5) .....	6		
<b>First installment of estimated tax:</b>			
7a If line 1 is over \$1,000, see instructions; otherwise enter 0 .....	7a		
7b If line 2 is over \$1,000, see instructions; otherwise enter 0 .....	7b		
8 Add lines 7a and 7b .....	8		
9 Total (column A, add lines 3 and 8; column B, add lines 6 and 8) .....	9		
10 Total prepayments (transfer amounts from line 17, columns A and B) .....	10		
11 Balance (subtract line 10 from line 9) .....	11		
12 Total taxes and surcharges balance (add line 11, columns A and B and enter here; enter the payment amount on line A above) .....	12		

Composition of prepayments claimed on line 10 (see instructions)		A. NYS tax	B. MTA surcharge
	Date paid	Amount	Amount
13 Mandatory first installment .....	13		
14a Second installment from Form CT-400 .....	14a		
14b Third installment from Form CT-400 .....	14b		
14c Fourth installment from Form CT-400 .....	14c		
15 Overpayment credited from prior years .....	15		
16 Overpayment credited from Form CT-_____ Period _____ .....	16		
17 Total prepayments (total all entries in column A and column B; also enter on line 10) ..	17		

<b>Paid preparer use only</b> (see instr.)	Firm's name (or yours if self-employed)		Firm's EIN		Preparer's PTIN or SSN	
	Signature of individual preparing this document		Address		City	State ZIP code
	E-mail address of individual preparing this document			Preparer's NYTPRIN		Date

See instructions for where to file.

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