



Nonresident Cooperative Unit Estimated Income Tax Payment Form

For use on sale or transfer of a cooperative unit by a nonresident of New York State Tax Law—Article 22, Section 663

Mail your completed Form IT-2664 together with your Form TP-584, Combined Real Estate Transfer Tax Return, Credit Line Mortgage Certificate, and Certification of Exemption from the Payment of Estimated Personal Income Tax (see Form IT-2664-I, Instructions for Form IT-2664).

For office use only

This form is valid for sales or transfers (date of conveyance) after December 31, 2010, but before January 1, 2012.

- A The transferor/seller is: [] an individual [] an estate or trust
B Is the transferor/seller reporting the gain for federal income tax purposes under the installment method? Yes [] No []
C Mark an X in the box if only a portion of the cooperative unit being sold or transferred qualifies as the principal residence of the transferor(s)/seller(s) listed below. []

Part 1 - Sale or transfer information

Form with fields for Transferor/seller name, Spouse's name, Address, Mailing address, Location and description of cooperative unit, Tax map designation, and Date of conveyance.

Part 2 - Estimated tax information (Complete Worksheet for Part 2 on page 2 before completing this part.)

Table with 3 rows: 1 Sale price, 2 Total gain, 3 Estimated tax due. Includes numerical input fields and a '00' value in the final cell.

Part 3 - Nonpayment of estimated tax by a nonresident upon the sale or transfer of a cooperative unit (see instructions)

- 4 This is to certify that the transferor/seller of this cooperative unit is a nonresident of New York State and is not required to pay estimated tax under Tax Law section 663 due to one of the following reasons:
A [] The sale or transfer of this cooperative unit results in a loss...
B [] The transferor/seller is not required to recognize any gain or loss...

Brief summary of the transfer (include the section(s) of the IRC and facts supporting the claim that the recognition of the gain or loss is not required with respect to the sale or transfer):

Part 4 - Signature

I, the undersigned, certify that this form, including any certification and attachment(s), is to the best of my knowledge and belief, true, correct, and complete.

Signature of transferor/seller, Date, Signature of spouse (if applicable), Date

Worksheet for Part 2

Use this worksheet to compute your gain or loss on the sale or transfer of the cooperative unit. The gain or loss is computed in the same manner as for federal income tax purposes. For more information, see federal Publication 523, *Selling Your Home*;

Publication 544, *Sales and Other Dispositions of Assets*; and Publication 551, *Basis of Assets*. These publications are available on the Internal Revenue Service's Web site at www.irs.gov.

Computation of cost or other basis

| | | | | | | |
|----------------------------|--|-----|--|-----|--|--|
| 5 | Purchase price of stock shares..... | | | 5. | | |
| Increases to basis: | | | | | | |
| 6 | Improvements | 6. | | | | |
| 7 | Closing costs | 7. | | | | |
| 8 | Other (explain) <input type="text"/> | 8. | | | | |
| 9 | Add lines 6, 7, and 8 | | | 9. | | |
| 10 | Add lines 5 and 9 | | | 10. | | |
| Decreases to basis: | | | | | | |
| 11 | Depreciation (if applicable) | 11. | | | | |
| 12 | Other (explain) <input type="text"/> | 12. | | | | |
| 13 | Add lines 11 and 12 | | | 13. | | |
| 14 | Adjusted basis of stock shares (subtract line 13 from line 10) | | | 14. | | |

Gain or loss

| | | | | |
|----|---|-----|--|--|
| 15 | Sale price less selling expenses (enter here and on the front page, Part 2, line 1) | 15. | | |
| 16 | Cost or adjusted basis (from line 14 above) | 16. | | |
| 17 | Total gain or loss: Subtract line 16 from line 15. If the amount is a gain (greater than zero), enter here, on the front page, Part 2, line 2, and continue with line 18. If the amount is a loss (less than or equal to zero), enter 0 here, on line 20 below, and on the front page, line 2. Complete Part 2, Part 3, and Form IT-2664-V on page 3. | 17. | | |

Estimated tax due

| | | | | |
|----|--|-----|--|-------|
| 18 | Enter the gain from line 17 (if only a portion of the gain from line 17 is subject to tax, see instructions below) | 18. | | |
| 19 | New York State tax rate 8.97% (.0897) | 19. | | .0897 |
| 20 | Estimated tax due (Multiply line 18 by line 19, and round to the nearest whole dollar; enter here and on the front page, Part 2, line 3. Complete Form IT-2664-V, Nonresident Cooperative Unit Estimated Income Tax Payment Voucher, on page 3.) | 20. | | 00 |

Specific instructions for Worksheet for Part 2

Note: See Form IT-2664-I, *Instructions for Form IT-2664*, for complete instructions.

Lines 5 through 17 — Multiple transferors/sellers: Enter the total purchase price, adjustments to basis, and sale price to determine the total gain (or loss). See *Line 18* below for allocation of the gain.

Line 5 — Your purchase price of stock shares in a cooperative unit is usually the cost of stock in the cooperative housing corporation, which may include your share of a mortgage on the building owned by the cooperative housing corporation on the date of the purchase of stock interest, if such portion is properly allocable to your cooperative unit and must be paid as a condition of retaining your stock interest in the cooperative housing corporation. This amount must be computed in the same manner as for federal income tax purposes.

Line 18 — Enter the gain (or portion of the gain) from line 17 that will be reported on your federal income tax return for 2011.

- **If only a portion of the cooperative unit qualifies as your principal residence,** enter the gain allocated to the portion of the cooperative unit that did **not** qualify as your principal residence and will be reported on your federal income tax return for 2011. Attach a statement to Form IT-2664 showing how you computed the allocation.

- **If two or more persons transfer or sell the cooperative unit,** allocate the total gain on the cooperative unit among the transferors/sellers in the same manner as the gain is allocated for federal income tax purposes. Attach a statement to Form IT-2664 showing each transferor's/seller's name, SSN or EIN, address, and share of the gain.

- **If the gain is being reported as an installment sale,** enter the amount of gain that you (and your spouse, if applicable) will be reporting on your 2011 federal income tax return.
- **A nonresident estate or trust** must enter the amount of the gain, without regard to any distributions, from line 17.

Line 19 — When computing tax due on the gain from the transfer or sale of the cooperative unit, you must use the tax rate equal to the highest rate of tax for the tax year as set forth in the Tax Law, section 601. For tax year 2011 that rate is 8.97% (.0897).

Line 20 — This is the amount of your required estimated tax payment. Enter this amount on the front page, Part 2, line 3, and as your estimated tax payment on Form IT-2664-V on page 3. You must complete Form IT-2664-V, even if there is no payment of estimated personal income tax due.

Note: You must complete Form IT-2664-V (below), even if there is no payment of estimated personal income tax due.

Estimated income tax payment information

Print your name, SSN or EIN, and **2011 IT-2664-V** on your payment. You must remit the full payment of estimated income tax as shown on Form IT-2664, line 3 without regard to any prior credits or payments of estimated tax for the tax year. Make your check or money order payable to **NYS Income Tax**. Do not combine this payment with payment of any other tax or fee; it must be a separate check or money order. **Do not detach this voucher from the rest of the form.**

Mail your completed Form IT-2664 (with a check or money order for the full payment of any estimated income tax due) and your Form TP-584 (with a **separate** check or money order for the real estate transfer tax shown as due on Form TP-584) to the NYS Tax Department at the address below within 15 days of the delivery of the instrument effecting the disposition.

**NYS TAX DEPARTMENT
RETT RETURN PROCESSING
PO BOX 5045
ALBANY NY 12205-5045**

Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, *Designated Private Delivery Services*. See *Need help?* in the instructions, *Form IT-2664-I*, for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, send the forms covered by these instructions to: NYS Tax Department, Deposit Resolution Unit, W A Harriman Campus, Albany NY 12227.

◀ Attach check or money order here.

You must attach a separate check or money order made payable to **NYS Income Tax** for the **full** amount of estimated personal income tax due as shown on Part 2, line 3, and Form IT-2664-V (below).

Do not detach



New York State Department of Taxation and Finance

Nonresident Cooperative Unit Estimated Income Tax Payment Voucher

For use on sale or transfer of a cooperative unit by a nonresident

IT-2664-V

Enter date of conveyance and total payment in the boxes to the right. Print your name, social security number or employer identification number, and **2011 IT-2664** on your payment. Make payable to **NYS Income Tax**.

| |
|-----------------------|
| Date fiscal year ends |
| Date of conveyance |

| | | |
|---|---|----------|
| Identification number (SSN or EIN of an estate or trust) | Mark an X in one box: <input type="checkbox"/> Individual <input type="checkbox"/> Estate/trust | |
| Individual taxpayer's full name or name of estate or trust | | |
| Spouse's name (if applicable) or name and title of fiduciary | Spouse's SSN | |
| Individual taxpayer's street address or address of fiduciary or representative (see instructions) | | |
| City, village, or post office | State | ZIP code |

Dollars Cents

Total payment . **00**

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