NOTICE OF AUTOMATIC EXTENSION OF TIME TO FILE TAX RETURN

New York State
Ethics Commission For
The Unified Court System
25 Beaver Street, Room 875
New York, New York 10004
(212) 428-2899
Internet: www.nycourts.gov/ip/ethics
Intranet: UCS home page: Topics A-Z
Email: ethicscomm@nycourts.gov

DO NOT USE THIS FORM TO REQUEST AN EXTENSION OF TIME TO FILE YOUR FEDERAL OR NEW YORK STATE TAX RETURNS.

1. NAME OF EMPLOYEE _____ JOB TITLE & CODE

2. HOME ADDRESS:_____
STREET CITY/STATE ZIP

3. WORK ADDRESS:_____
STREET CITY/STATE ZIP

4. WORK TELEPHONE #: (_____)_____
Area Code

5. Indicate the date that your automatic extension to file your taxes expires.
Date:_____

6. Identify, by question number(s), the information which you can not timely provide on your financial disclosure statement, describing the nature of the information:

_____

Annex hereto a copy of the application filed with the Internal Revenue Service for an automatic extension of time in which to file your income tax return for the immediately preceding calendar year.

A financial disclosure statement completed except for the questions listed above must be filed with this notice:

i)on or before **May 15**, if you were a UCS employee on January 1, or commenced UCS employment from January 2 through April 15, of this year; or

ii)**thirty days** from the date you commenced UCS employment if you commenced employment from April 16 through December 31 of this year.

A supplementary financial disclosure statement containing the information listed above must be filed on or before the seventh day after the expiration of the automatic extension to file your tax return. We will send you a supplementary form upon receipt of this application with partially completed financial disclosure statement.

_____ _____
SIGNATURE DATE