

LEGISLATIVE ETHICS COMMISSION  
Location: Alfred E. Smith Building, Suite 1431  
Mailing Address: Box 75, Legislative Office Building  
Albany New York 12247  
Telephone: (518)432-7837/7838

**ANNUAL STATEMENT OF FINANCIAL DISCLOSURE:  
REQUEST FOR DELAYED FILING OF INFORMATION EFFECTED BY AN  
I.R.S. INDIVIDUAL INCOME TAX RETURN EXTENSION**  
(See instructions on reverse side.)

1. Name \_\_\_\_\_
2. Legislative Office \_\_\_\_\_ Position \_\_\_\_\_
3. Preferred Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
4. Daytime Telephone (\_\_\_\_) \_\_\_\_\_
5. **You are required to attach your Annual Financial Disclosure Statement, reporting all information on the statement which is not affected by the extension of your federal income tax return.**
6. Attach a copy of your timely filed "Application for Automatic Extension of Time to File U.S. Individual Income Tax Return" (Form 4868).
7. Identify the questions on the Annual Financial Disclosure Statement which cannot be completed until your income tax return is filed, and describe the financial interest for which this request is made.

<u>QUESTION #</u>	<u>FINANCIAL INTEREST</u>	<u>HELD BY</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I realize that the filing of this form does **not** automatically extend the due date of the May 15 statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Instructions

Public Officers Law § 73-a (2) (a) (i) permits reporting individual to request an extension on the May 15 due date for a complete Annual Statement of Financial Disclosure for that information dependent on the filing of individual federal income tax return, provided the individual has timely applied to the I.R.S. For an automatic extension.

Name: Include your full name.

LEGISLATIVE OFFICE: Identify your position, title, and the name of the legislative office in which you serve. Candidates need to report the house (Senate or Assembly) and district number of the legislative office they are seeking to hold. Position: Identify your legislative title, or indicate that you are a candidate.

PREFERRED MAILING ADDRESS: Provide the complete mailing address for the location (home or office) at which you would like to receive correspondence on this matter.

DAYTIME PHONE: List a preferred telephone number at which you may be contacted during the day.

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In order for the Legislative Ethics Commission to determine whether you should be given this filing extension, you **must** provide the following information by the due date for the statement:

(1) Attach the completed Annual Statement of Financial Disclosure, representing all information not affected by your extension to file a federal income tax return.

(2) Attach a copy of the form you filed with the I.R.S. to request an extension on the due date of your income taxes.

(3) Identify the questions on the Annual Statement of Financial Disclosure which are affected by your tax extension, describe the information that you are requesting an extension on disclosing, and identify who ( you, your spouse, or your unemancipated child(ren) ) holds the financial interest in question.

You will be notified in writing of the Commission's action on this request. If you are granted an extension based on tax filing information, you must file a supplemental statement no later than **August 22** of the current filing year.

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