

Department of Taxation and Finance

Resident Income Tax Return

IT-201

19

New York State • New York City • Yonkers • MCTMT

or halp complet	ing vour r	oturn can the instructions	Form IT 201 I	i	and ending					
Your first name	Ing your re	eturn, see the instructions, Your last name (for a joint return, ent		/) Your date of birth (mmddyyyy)	Your Social Sec	curity number				
- Car morname		Tour last name (for a joint rotally, one	<u> </u>	, roun date of birth (mindayyyy)	1541 555141 555					
Spouse's first name	MI	Spouse's last name		Spouse's date of birth (mmddyyyy)	Spouse's Socia	I Security number				
Mailing address <i>(see ir</i>	nstructions, pa	age 14) (number and street or PO box)		Apartment number	New York State	county of residence				
City, village, or post off	ice	State ZIP cod	de Country (if	not United States)	School district r	name				
Taxpayer's permaner	nt home addr	ess (see instructions, page 14) (num	ber and street or rural route)	Apartment number	School district					
City village or post off	ico	State ZIP co	do	Taxpayer's date of death (mmddy)	code number	l late of death <i>(mmddyyy</i>)				
City, village, or post off	ice	NY NY	Decedent information) Opouse s	ate of death (minodyyy)				
A Filing () Single	9		ou have a financial account l gn country? (see page 15)		Yes No				
status (mark an 👩		ed filing joint return		ers residents and Yonkers		dents only:				
X in one box):	Marri	spouse's Social Security number ab	(1)	Did you receive a property tax see page 15)		Yes No				
_	. \Box	spouse's Social Security number ab	(2) E	Enter the amount	.00					
(4		of household (with qualifying pers	D3 Were	you required to report, any nor red compensation, as required						
<u> </u>		fying widow(er)	on yo	ur 2019 federal return? (see pa	ge 15)	Yes No No				
B Did you itemize your deductions on your 2019 federal income tax return?				E (1) Did you or your spouse maintain living quarters in NYC during 2019? (see page 15) Yes No						
Can you be claimed as a dependent on another taxpayer's federal return? Yes No				(2) Enter the number of days spent in NYC in 2019 (any part of a day spent in NYC is considered a day)						
				esidents and NYC part-year nts only (see page 15):						
			(1) 1	Number of months you lived i	n NYC in 2019					
			` '	Number of months your spous		in 2019				
d Dependent in	formation	(see page 16)	_	your 2-character special c (s) if applicable (see page 15						
First name	Ņ	/II Last name	Relationship	Social Security numb	per Dat	e of birth (mmddyyyy)				
f more than 7 dep	endents, m	nark an X in the box.								
2010011930	J 34	Fo	or office use only							

Fe	deral income and adjustments (see page 16)		Whole dollars only
1	Wages, salaries, tips, etc.	1	.00
2	Taxable interest income	2	.00
3	Ordinary dividends	3	.00
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)	4	.00
5	Alimony received	5	.00
6	Business income or loss (submit a copy of federal Schedule C, Form 1040)	6	.00
7	Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)	7	.00
8	Other gains or losses (submit a copy of federal Form 4797)	8	.00
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an X in the box	9	.00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box	10	.00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)	11	.00.
12	Rental real estate included in line 11		
13	Farm income or loss (submit a copy of federal Schedule F, Form 1040)	13	.00
14	1 7 1	14	.00
15	Taxable amount of Social Security benefits (also enter on line 27)	15	.00
16	Other income (see page 16) Identify:	16	.00
17	Add lines 1 through 11 and 13 through 16	17	.00
	Total federal adjustments to income (see page 16) Identify:	18	.00
	Federal adjusted gross income (subtract line 18 from line 17)	19	.00
21 22 23	Interest income on state and local bonds and obligations (but not those of NYS or its local governments) Public employee 414(h) retirement contributions from your wage and tax statements (see page 17) New York's 529 college savings program distributions (see page 17) Other (Form IT-225, line 9) Add lines 19 through 23	20 21 22 23 24	.00 .00 .00 .00
_	w York subtractions (see page 18)		
25	Taxable refunds, credits, or offsets of state and local income taxes (from line 4) 25 .00		
26	Pensions of NYS and local governments and the federal government (see page 18) 26 .00		
	Taxable amount of Social Security benefits (from line 15) 27		
	Interest income on U.S. government bonds		
	Pension and annuity income exclusion (see page 19) 29	-	
30	New York's 529 college savings program deduction/earnings 30 .00		
31	Other (Form IT-225, line 18)	32	00
	•		.00
33	New York adjusted gross income (subtract line 32 from line 24)	33	.00.
St	andard deduction or itemized deduction (see page 21)		
34	Enter your standard deduction (table on page 21) or your itemized deduction (from Form IT-196) Mark an X in the appropriate box: Standard - or - Itemized	34	.00
35	Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)	35	.00
	Dependent exemptions (enter the number of dependents listed in item H; see page 21)	36	000.00
37	Taxable income (subtract line 36 from line 35)	37	.00



Nar	ne(s) as shown on page 1		Your Social Security number		IT-201 (2019) Page 3 of 4
Tax	x computation, credits, and other taxes				
_	Taxable income (from line 37 on page 2)			38	.00.
39	NYS tax on line 38 amount (see page 22)			39	.00
	NYS household credit (page 22, table 1, 2, or 3)		.00		100
	Resident credit (see page 23)		.00	┪	
	Other NYS nonrefundable credits (Form IT-201-ATT, line 7)		.00	_	
	Add lines 40, 41, and 42			_	.00
	Subtract line 43 from line 39 (if line 43 is more than line 39, lea		*		.00
45	Net other NYS taxes (Form IT-201-ATT, line 30)			45	.00
46	Total New York State taxes (add lines 44 and 45)			46	.0
					-
Ne	w York City and Yonkers taxes, credits, and surcharges,	and	мстмт		
47	NYC taxable income (see instructions)	47	.00.		
	NYC resident tax on line 47 amount (see page 23)	47a	.00.	_	See instructions on
	NYC household credit (page 23)	48	.00.	_	pages 23 through 26 to
	Subtract line 48 from line 47a (if line 48 is more than			_	compute New York City and Yonkers taxes, credits, and
	line 47a, leave blank)	49	.00.		surcharges, and MCTMT.
50	Part-year NYC resident tax (Form IT-360.1)	50	.00	_	3.1,1
	Other NYC taxes (Form IT-201-ATT, line 34)	51	.00.	┪	
	Add lines 49, 50, and 51	52	.00	-	
	NYC nonrefundable credits (Form IT-201-ATT, line 10)	53	.00	┪	
	Subtract line 53 from line 52 (if line 53 is more than		-		
	line 52, leave blank)	54	.00		
54a	MCTMT net			_	
	earnings base 54a .00				
54b	MCTMT	54b	.00		
55	Yonkers resident income tax surcharge (see page 26)	55	.00)	
56	Yonkers nonresident earnings tax (Form Y-203)	56	.00)	
57	Part-year Yonkers resident income tax surcharge (Form IT-360.1)	57	.00)	
58	Total New York City and Yonkers taxes / surcharges and Mo	СТМТ	(add lines 54 and 54b through 57)	58	.0
59	Sales or use tax (see page 27; do not leave line 59 blank)			59	.0
60	Voluntary contributions (Form IT-227, Part 2, line 1)			60	.0
61	Total New York State, New York City, Yonkers, and sale voluntary contributions (add lines 46, 58, 59, and 60)			61	.0

Pag	e 4 of 4 IT-201 (2019)	Your Social Se	curity	number					
_	Enter amount from line 61					62		.00	
Pay	yments and refundable credits (see pa	iges 28 through 31)							
63	Empire State child credit		63		.00				
64	NYS/NYC child and dependent care cre	dit <u></u>	64		.00				
	NYS earned income credit (EIC)		65		.00				
	NYS noncustodial parent EIC		66		.00	1			
	Real property tax credit		67		.00				
	College tuition credit		68		.00	1			
	NYC school tax credit (fixed amount) (also c				.00	1			
	NYC school tax credit (rate reduction ar		69a		.00	1			
	NYC earned income credit		70		.00	-			
	NYC enhanced real property tax credit		70a		.00	┪			
/1	Other refundable credits (Form IT-201-AT	I, line 18)	71		.00	ıı a		complete Form(s) IT-2	
72	Total New York State tax withheld		72		.00			19-R and submit them rn (see page 13).	
73	Total New York City tax withheld		73		.00		-		
	Total Yonkers tax withheld		74		.00	_	not sena h your ret	federal Form W-2	
75	Total estimated tax payments and amount pa	aid with Form IT-370	75		. 00		your rot	uiii.	
76	Total payments (add lines 63 through 75)					76		.00	
You	ur refund, amount you owe, and accoเ	int information	(see p	ages 32 throug	gh 34)				
77	Amount overpaid (if line 76 is more than	line 62, subtract line	e 62 fr	om line 76; see	e page 32)	77		.00	
78	Amount of line 77 available for refund	(subtract line 79 fror	n line	77)		78		.00	
78a	Amount of line 78 that you want to deposit into	a NYS 529 account	(Form	IT-195, line 4) (al	so submit Form IT-195)	78a		.00	
78b	Total refund after NYS 529 account dep	osit <i>(subtract line 78</i>	Ba froi	m line 78)		78b		.00	
		direct deposit to	che	cking or	paper				
	Mark one refund choice:		(fill in	line 83) - or -	check			ect deposit is the	
79	Amount of line 77 that you want applied						siest, rastes und.	st way to get your	
	estimated tax (see instructions)				.00				
80	Amount you owe (if line 76 is less than lin					Se	e page 33	for payment options.	
	funds withdrawal, mark an X in the bo							00	
	or money order you must complete F		maıı	it with your re	turn	80	<u> </u>	.00.	
81	Estimated tax penalty (include this amount reduce the overpayment on line 77; see page 19.1)		81	94			See page 36 for the proper		
82	Other penalties and interest (see page 33	- '	82		.00	⊣ ass	sembly of	your return.	
				rowol (ass na		J			
03	Account information for direct deposit of If the funds for your payment (or refund)					mar	kan Y in t	his hox (see na 34)	
				,					
	83a Account type: Personal checking	p - or - Per	sonal	savings - or -	Business c	neckir	ıg - or -	Business savings	
	83b Routing number	8:	3c A	ccount number					
0.4						. \Box		22	
84	Electronic funds withdrawal (see page 34	Date			Amoui	nt		.00	
des	Third-party signee? (see instr.) Print designee's name			Design	ee's phone number			Personal identification number (PIN)	
Yes					,				
	Paid preparer must complete ▼ Preparer's	NYTPRIN N	/TPRII	v I	_ T		->	land bears —	
((see instructions)	ex	cl. cod	e		iyer(s) must si	ign here ▼	
Preparer's signature Preparer's printed name Your signatu					Your signature				
Firm's name (or yours, if self-employed) Preparer's PTIN				SSN	Your occupation				
Address Employer ider			ntificati	on number	Spouse's signature and occupation (if joint return)				
		ate	——————————————————————————————————————	Date Daytime phone number					
Fma	sil·			———— 	Email:]()		

NEW YORK STATE

FORM IT-201 2019

FILING INSTRUCTIONS

After you print your return, make sure to:

- complete, print, and attach Form IT-2 if you received Form(s) W-2;
- complete, print, and attach Form IT-1099-R if you received federal Form(s)
 1099-R with New York State, New York City, or Yonkers tax withheld;
- complete, print, and attach Form IT-196 if you itemize your deductions;
- complete, print, and attach Form IT-227 if you have voluntary contributions;
- complete, print, and attach all necessary credit forms;
- sign the return; and
- mail your return to the appropriate PO Box below.

If you are enclosing a check or money order, you must include Form IT-201-V with your return and mail it to:

STATE PROCESSING CENTER PO BOX 15555 ALBANY NY 12212-5555

If not enclosing a check or money order, mail your return to:

STATE PROCESSING CENTER PO BOX 61000 ALBANY NY 12261-0001