



Resident Income Tax Return

IT-201

New York State • City of New York • City of Yonkers

For the year Jan. 1 — Dec. 31, 1993, or fiscal tax year beginning , 1993, ending , 19

For office use only

Attach label, or print or type	Last name		First name and middle initial (if joint return, enter both names)		Your social security number	
	Mailing address (number and street or rural route)				Apartment number	
	City, village or post office		State		ZIP code	
In the space below, print or type your permanent home address within New York State if it is not the same as your mailing address above (see instructions, page 21).					New York State county of residence	
Permanent home address (number and street or rural route)				Apartment number		School district name
City, village or post office		State		ZIP code		School district code number
		NY				
				If taxpayer is deceased, enter first name and date of death.		

- (A) Filing status —
- ① Single
 - ② Married filing joint return (enter spouse's social security number above)
 - ③ Married filing separate return (enter spouse's social security number above)
 - ④ Head of household (with qualifying person)
 - ⑤ Qualifying widow(er) with dependent child

(B) Did you itemize your deductions on your 1993 federal income tax return? . . . Yes No

(C) Can you be claimed as a dependent on another taxpayer's federal return? . . . Yes No

(D) If you do not need forms mailed to you next year, check box (see instructions) . . .

(E) Enter the number of exemptions claimed from your federal return, line 6e . . .

Clip check or money order here.

Enter your income items and total adjustments exactly as they appear on your federal return (see instructions, page 11).

Federal Income and Adjustments	1	Wages, salaries, tips, etc.	1		
	2	Taxable interest income	2		
	3	Dividend income	3		
	4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 24 below)	4		
	5	Alimony received	5		
	6	Business income or (loss) (attach copy of federal Schedule C or C-EZ, Form 1040)	6		
	7	Capital gain or (loss) (attach copy of federal Schedule D, Form 1040)	7		
	8	Capital gain distributions not reported on line 7	8		
	9	Other gains or (losses) (attach copy of federal Form 4797)	9		
	10	Taxable amount of IRA distributions	10		
	11	Taxable amount of pensions and annuities	11		
	12	Rents, royalties, partnerships, estates, trusts, etc. (attach copy of federal Schedule E, Form 1040)	12		
	13	Farm income or (loss) (attach copy of federal Schedule F, Form 1040)	13		
	14	Unemployment compensation	14		
	15	Taxable amount of social security benefits (also enter on line 25 below)	15		
	16	Other income (see instructions, page 11) Identify:	16		
	17	Add lines 1 through 16	17		
	18	Total federal adjustments to income (see instructions, page 11) Identify:	18		
19	Subtract line 18 from line 17. This is your federal adjusted gross income	19			
New York Adjusted Gross Income	New York Additions: (see instructions, page 12)				
	20	Interest income on state and local bonds (but not those of New York State and local governments within the state)	20		
	21	Public employee 414(h) retirement contributions from your wage and tax statements (see instructions, page 12)	21		
	22	Other (see instructions, page 12) Identify:	22		
	23	Add lines 19 through 22	23		
	New York Subtractions: (see instructions, page 13)				
	24	Taxable refunds, credits, or offsets of state and local income taxes (from line 4 above)	24		
	25	Taxable amount of social security benefits (from line 15 above)	25		
	26	Interest income on US government bonds	26		
	27	Pension and annuity income exclusion	27		
	28	Other (see instructions, page 14) Identify:	28		
29	Add lines 24 through 28	29			
30	Subtract line 29 from line 23. This is your New York adjusted gross income (If you claimed the standard deduction on your federal return, skip lines 31 through 45 and enter the line 30 amount on line 46 on the back page.)	30			

Tax Computation	31 Medical and dental expenses (from federal Schedule A, line 4)	31		
	32 Taxes you paid (from federal Schedule A, line 8)	32		
	33 Interest you paid (from federal Schedule A, line 12)	33		
	34 Gifts to charity (from federal Schedule A, line 16)	34		
	35 Casualty and theft losses (from federal Schedule A, line 17)	35		
	36 Moving expenses (from federal Schedule A, line 18)	36		
	37 Job expenses and most other miscellaneous deductions (from federal Schedule A, line 24)	37		
	38 Other miscellaneous deductions (from federal Schedule A, line 25)	38		
	39 Total itemized deductions (from federal Schedule A, line 26)	39		
	40 State, local and foreign income taxes and other subtraction adjustments (see inst., page 15)	40		
	41 Subtract line 40 from line 39	41		
	42 Addition adjustments (see instructions, page 16)	42		
	43 Add lines 41 and 42	43		
	44 Itemized deduction adjustment (if line 30 is more than \$100,000, see instructions, page 16; all others enter "0" on line 44)	44		
	45 Subtract line 44 from line 43. This is your itemized deduction	45		
46 Enter the amount from line 30 on the front page (this is your New York adjusted gross income)	46			
47 Check appropriate box and enter the larger of: <input type="checkbox"/> your standard deduction from instructions, page 16,	47			
OR <input type="checkbox"/> your itemized deduction from line 45				
48 Subtract line 47 from line 46	48			
49 Dependent exemptions (from line c of Dependent Exemption Worksheet, instructions page 16)	49		0000 00	
50 Subtract line 49 from line 48. This is your taxable income	50			
51 New York State tax on line 50 amount (if line 46 above is \$100,000 or less, use the NY State Tax Table on yellow pages 31 through 38. If line 46 is more than \$100,000, you must complete Tax Computation Worksheet 1 or 2 on page 17 of the instructions to figure your tax.)	51			
Credits/Other Taxes/Gift/Totals	52 NY State child and dependent care credit • number of qualifying persons <input type="text"/> cared for in 1993 • amount of federal credit for child and dependent care <input type="text"/> × 20% (.20) =	52		Mail your completed return to: NYS INCOME TAX W A HARRIMAN CAMPUS ALBANY NY 12227-0125
	53 New York State household credit (from Table I, II or III, instructions page 17)	53		
	54 Other New York State credits (from Form IT-201-ATT, line 7; attach form)	54		
	55 Add lines 52, 53, and 54	55		
	56 Subtract line 55 from line 51 (if line 55 is more than line 51, enter "0")	56		
	57 Other New York State taxes (from Form IT-201-ATT, line 16; attach form)	57		
	58 Add lines 56 and 57. This is the total of your New York State taxes	58		
	59 City of New York resident tax (use the City of NY Tax Table on white pages 39 — 46)	59		See instructions for figuring city of New York taxes and city of Yonkers taxes.
	60 City of NY household credit (from Table IV, V or VI, page 18)	60		
	61 Subtract line 60 from line 59 (if line 60 is more than line 59, enter "0")	61		
62 City of New York nonresident earnings tax (attach Form NYC-203)	62			
63 Other city of New York taxes (from Form IT-201-ATT, line 21; attach form)	63			
64 City of Yonkers resident income tax surcharge (from Yonkers worksheet, page 19)	64			
65 City of Yonkers nonresident earnings tax (attach Form Y-203)	65			
66 Part-year city of Yonkers resident income tax surcharge (attach Form IT-360.1)	66			
67 Add lines 61 through 66. This is the total of your city of New York and city of Yonkers taxes	67			
68 If you want to Return a Gift to Wildlife, enter amount: \$5, \$10, \$20, other (see instructions, page 19)	68		00	
69 Add lines 58, 67 and 68. This is the total of your New York State, city of New York and city of Yonkers taxes, and Gift to Wildlife	69			
Payments	70 Real property tax credit (from Form IT-214, line 17; attach form)	70		Staple your wage and tax statements at the top of the back of this return. See Step 7, page 22, for the proper assembly of your return and attachments.
	71 Total New York State tax withheld (staple wage and tax statements; see inst.)	71		
	72 Total city of New York tax withheld (staple wage and tax statements; see instructions)	72		
	73 Total city of Yonkers tax withheld (staple wage and tax statements; see instructions)	73		
	74 Estimated tax paid/Amount paid with Form IT-370	74		
75 Add lines 70 through 74. This is the total of your payments	75			
Refund/Owe	76 If line 75 is more than line 69, subtract line 69 from line 75 and enter the amount overpaid (also complete line 77 or 78, or both)	76		
	77 Amount of line 76 to be refunded to you	77		
	78 Amount of line 76 to be applied to your 1994 estimated tax	78		
	79 If line 75 is less than line 69, subtract line 75 from line 69 and enter the amount you owe (do not send cash; make check or money order payable to NY State Income Tax; write your social security number and 1993 income tax on it)	79		
	80 Estimated tax penalty (will reduce line 76 or increase line 79; see instructions, page 21)	80		

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Sign Your Return	Your signature	Date
	Firm's name (or yours, if self-employed)	Preparer's social security number			Spouse's signature (if joint return)	Date
Address		Employer identification number		48		