

Nonresident and Part-Year Resident Income Tax Return

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



IT-203

For the year January 1, 1999, through December 31, 1999, or fiscal tax year beginning

9 9

For office use only



Attach label if available. If not, print or type.

Please enter your first name first. For a joint return, use both name lines.

Your first name and middle initial	Your last name (for a joint return, enter spouse's name on line below)	and ending
		▼ Your social security number
Spouse's first name and middle initial	Spouse's last name	▼ Your spouse's social security number
Mailing address (number and street or rural route)	Apartment number	New York State county of residence
City, village or post office	State	ZIP code
Permanent home address (see page 31) (number and street or rural route)		New York State school district name
		New York State school district code number
City, village or post office	State	ZIP code
If taxpayer is deceased, enter first name and date of death.		

- (A) Filing status – mark an "X" in one box:**
- ① Single
 - ② Married filing joint return*
 - ③ Married filing separate return *
 - ④ Head of household (with qualifying person)
 - ⑤ Qualifying widow(er) with dependent child
- * For filing status 2 or 3, enter both spouses' social security numbers above, unless filing Form IT-203-C (see instructions).*

- (B) Did you itemize your deductions on your 1999 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, mark an "X" in the box (see page 13)**
- (E) Part-year city of New York residents only: (see page 13)**
- (1) Were you 65 or older on 1/1/2000?
 - (2) Was your spouse 65 or older on 1/1/2000?

Enter federal amounts in the left-hand column and New York State amounts in the right-hand column. See instructions, page 13. Part-year residents - complete page 14 worksheet first.

	Federal amount		New York State amount	
	Dollars	Cents	Dollars	Cents
1 Wages, salaries, tips, etc.	1.		1.	
2 Taxable interest income	2.		2.	
3 Ordinary dividends	3.		3.	
4 Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 23) ...	4.		4.	
5 Alimony received	5.		5.	
6 Business income or loss (attach copy of federal Schedule C or C-EZ, Form 1040) .	6.		6.	
7 Capital gain or loss (attach copy of federal Schedule D, Form 1040)	7.		7.	
8 Other gains or losses (attach copy of federal Form 4797)	8.		8.	
9 Taxable amount of IRA distributions	9.		9.	
10 Taxable amount of pensions and annuities	10.		10.	
11 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (attach copy of federal Schedule E, Form 1040)	11.		11.	
12 Farm income or loss (attach copy of federal Schedule F, Form 1040)	12.		12.	
13 Unemployment compensation	13.		13.	
14 Taxable amount of social security benefits (also enter on line 25)	14.		14.	
15 Other income (see page 17) Identify:	15.		15.	
16 Add lines 1 through 15	16.		16.	
17 Total federal adjustments to income (see page 17) Identify:	17.		17.	
18 Subtract line 17 from line 16. This is your federal adjusted gross income ...	18.		18.	
New York additions (see instructions, pages 18 - 21)				
19 Interest income on state and local bonds (but not those of NYS or its localities) .	19.		19.	
20 Public employee 414(h) retirement contributions	20.		20.	
21 Other (see page 19) Identify:	21.		21.	
22 Add lines 18 through 21	22.		22.	
New York subtractions (see instructions, pages 21 - 25)				
23 Taxable refunds, credits, or offsets of state and local income taxes (from line 4 above)	23.		23.	
24 Pensions of New York State and local governments and the federal government	24.		24.	
25 Taxable amount of social security benefits (from line 14 above)	25.		25.	
26 Interest income on U.S. government bonds	26.		26.	
27 Pension and annuity income exclusion (see page 22)	27.		27.	
28 Other (see page 22) Identify:	28.		28.	
29 Add lines 23 through 28	29.		29.	
30 Subtract line 29 from line 22. This is your New York adjusted gross income.	30.		30.	

Enter here and next to line 43, Income percentage. (If zero or less, see instructions, page 25.)

Tax Computation

31 Enter the amount from line 30, **Federal amount column** on the front page (your New York adjusted gross income) 31. _____

32 Enter the **larger** of your **standard deduction** (from page 25) or your **itemized deduction** (from Form IT-203-ATT, Part I, line 14; attach form). Mark an "X" in the appropriate box: Standard Itemized 32. _____

33 Subtract line 32 from line 31 (if line 32 is more than line 31, enter "0") 33. _____

34 Exemptions for dependents only (not the same as total federal exemptions; see page 25) 34. 000.00

35 Subtract line 34 from line 33. **This is your taxable income** 35. _____

36 New York State tax on line 35 amount (if line 31 is \$100,000 or less, use the NY State Tax Table on tan pages 41 through 48. If line 31 is more than \$100,000, you must complete Tax computation worksheet 1 or 2 on page 26 of the instructions to figure your tax.) 36. _____

37 New York State household credit (from table I, II or III, page 26 of instructions) 37. _____

38 Subtract line 37 from line 36 (if line 37 is more than line 36, enter "0") 38. _____

Credits

39 New York State child and dependent care credit (from line 14 of Form IT-216; attach form; see page 27) 39. _____

40 Subtract line 39 from line 38 (if line 39 is more than line 38, enter "0") 40. _____

41 New York State earned income credit (from Form IT-215; attach form; see page 27) 41. _____

42 Subtract line 41 from line 40 (if line 41 is more than line 40, enter "0"). This is your **base tax** 42. _____

43 Income percentage $\frac{\text{New York State amount from line 30}}{\text{Federal amount from line 30}}$ = Carry results to 4 decimal places 43. _____

44 Multiply line 42 by the **decimal** on line 43. This is your allocated New York State tax 44. _____

45 New York State nonrefundable credits (from Form IT-203-ATT, line 55) 45. _____

46 Subtract line 45 from line 44 (if line 45 is more than line 44; enter "0") 46. _____

47 Net other New York State taxes (from Form IT-203-ATT, line 37) 47. _____

48 Add lines 46 and 47. This is the total of your New York State taxes 48. _____

Cities

49 City of New York **nonresident** earnings tax (attach Form NYC-203) 49. _____

50 Other city of New York taxes (from Form IT-203-ATT, line 40) 50. _____

51 City of Yonkers nonresident earnings tax (attach Form Y-203) .. 51. _____

52 Part-year Yonkers resident income tax surcharge (attach Form IT-360.1) . 52. _____

53 **Add lines 49 through 52; this is the total of your New York City and Yonkers taxes** 53. _____

See instructions on page 27 for figuring city of New York and city of Yonkers taxes and surcharges.

Voluntary gifts/contributions (whole dollar amounts only; see page 27)

54 Return a Gift to Wildlife w _____ Missing/Exploited Children Fund c _____
 Breast Cancer Research Fund b _____ Olympic Fund o **Total gifts/contributions =** 54. _____ 00

55 Add lines 48, 53, and 54. This is the total of your state and city taxes and gifts 55. _____

Payments

56 Part-year city of New York school tax credit (also complete item E on front) 56. _____

57 Other refundable credits (from Form IT-203-ATT, line 69) 57. _____

58 **Total New York State tax withheld** (see page 28) 58. _____

59 Total city of New York tax withheld (see page 28) 59. _____

60 Total city of Yonkers tax withheld (see page 28) 60. _____

61 Total of estimated tax payments, and amount paid with extension Form IT-370 61. _____

62 Add lines 56 through 61. This is the total of your payments. (If line 55 is more than line 62, skip to line 66.) 62. _____

63 **Amount overpaid - if line 62 is more than line 55, subtract line 55 from line 62 (also see lines 64 and 65) 63. _____**

Refund

64 Amount of line 63 that you want **refunded to you** **Refund** 64. _____

a Routing number _____ b Type: Checking Savings

c Account number _____

65 **Estimated tax:** Amount of line 63 that you want applied to your 2000 estimated tax (subtract line 64 from line 63) 65. _____

Owe

66 Amount you owe - If line 62 is less than line 55, subtract line 62 from line 55 (do not send cash: make check or money order payable to NY State Income Tax; write your social security number and 1999 Income Tax on it) **Owe** 66. _____

67 Penalty for underpayment of tax (will reduce line 63 or increase line 66 - see page 30) ... 67. _____

Staple payment to front of return.

Staple your wage and tax statements at the top of the back of this return. See Step 7, page 31 for further instructions on assembling your return.

You can choose to have your refund sent directly to your bank account. See the instructions and fill in lines 64a, 64b, and 64c.

See Instructions. **Part-year residents** must complete item F. **Nonresidents** must complete item G.

(F) Part-year residents: If you were a New York State resident for only part of the year, enter the date and check the box (1, 2, or 3) which describes your situation on the last day of the tax year: (1) moved into New York State (2) moved out of New York State and received income from New York State sources during your nonresident period (3) moved out of New York State and received no income from New York State sources during your nonresident period

(G) Nonresidents: Did you or your spouse maintain living quarters in New York State in 1999? (If Yes, complete Schedule B of Form IT-203-ATT; attach form) Yes No **Sign your return below.**

Paid preparer's use only

Preparer's signature _____ Date _____ Mark an "X" if self-employed

Firm's name (or yours, if self-employed) _____ Preparer's SSN or PTIN _____

Address _____ Employer identification number _____

Sign your return here

This is a scannable form; please file this original return.

Your signature _____

Spouse's signature (if joint return) _____

Date _____ Daytime phone number (optional) _____