

# Resident Income Tax Return

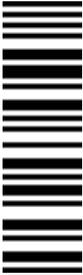
New York State • City of New York • City of Yonkers



# IT-201

For the full year January 1, 2000, through December 31, 2000, or fiscal year beginning ..... **0 0**

For office use only



Attach label, or print or type	<b>Important:</b> You must enter your social security number(s) in the boxes to the right.			and ending ..... <b>0 0</b>
	Your first name and middle initial	Your last name <i>(for a joint return, enter spouse's name on line below)</i>		▼ Your social security number
	Spouse's first name and middle initial	Spouse's last name		▼ Spouse's social security number
	Mailing address <i>(number and street or rural route)</i>	Apartment number	New York State county of residence	
City, village or post office	State	ZIP code	School district name	
Permanent home address <i>(see page 34) (number and street or rural route)</i>			Apartment number	School district code number .....
City, village or post office	State	ZIP code	If taxpayer is deceased, enter <b>first name</b> and <b>date of death</b> .	
<b>NY</b>				

- (A) Filing status — mark an "X" in one box:**
- 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 2000 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 15) .....**

**(E) City of New York residents only: (see page 15)**

(1) Were **you** 65 or older on 1/1/2001? ..... Yes  No

(2) Was your **spouse** 65 or older on 1/1/2001? Yes  No

Staple check or money order here.

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### Federal income and adjustments

**Only full-year New York State residents may file this form. For lines 1 through 18 below, enter your income items and total adjustments as they appear on your federal return (see page 16). Also, see instructions on page 16 for showing a loss.**

	Dollars	Cents
1 Wages, salaries, tips, etc. ....	1.	
2 Taxable interest income .....	2.	
3 Ordinary dividends .....	3.	
4 Taxable refunds, credits, or offsets of state and local income taxes <i>(also enter on line 23 below)</i> .....	4.	
5 Alimony received .....	5.	
6 Business income or loss <i>(attach a copy of federal Schedule C or C-EZ, Form 1040)</i> .....	6.	
7 Capital gain or loss <i>(if required, attach copy of federal Schedule D, Form 1040)</i> .....	7.	
8 Other gains or losses <i>(attach copy of federal Form 4797)</i> .....	8.	
9 Taxable amount of IRA distributions .....	9.	
10 Taxable amount of pensions and annuities .....	10.	
11 Rental real estate, royalties, partnerships, S corporations, trusts, etc. <i>(attach copy of federal Schedule E, Form 1040)</i> .....	11.	
12 Farm income or loss <i>(attach copy of federal Schedule F, Form 1040)</i> .....	12.	
13 Unemployment compensation .....	13.	
14 Taxable amount of social security benefits <i>(also enter on line 25 below)</i> .....	14.	
15 Other income <i>(see page 17)</i> Identify: .....	15.	
16 Add lines 1 through 15 .....	16.	
17 Total federal adjustments to income <i>(see page 17)</i> Identify: .....	17.	
18 Subtract line 17 from line 16. This is your federal adjusted gross income .....	18.	

### New York additions (see page 18)

19 Interest income on state and local bonds and obligations (but not those of NY State or its local governments) ..	19.	
20 Public employee 414(h) retirement contributions from your wage and tax statements <i>(see page 18)</i> ..	20.	
21 Other <i>(see page 18)</i> Identify: .....	21.	
22 Add lines 18 through 21 .....	22.	

### New York subtractions (see page 21)

23 Taxable refunds, credits, or offsets of state and local income taxes <i>(from line 4 above)</i> ...	23.	
24 Pensions of NYS and local governments and the federal government <i>(see page 21)</i> ....	24.	
25 Taxable amount of social security benefits <i>(from line 14 above)</i> ...	25.	
26 Interest income on U.S. government bonds .....	26.	
27 Pension and annuity income exclusion .....	27.	
28 Other <i>(see page 21)</i> Identify: .....	28.	
29 Add lines 23 through 28 .....	29.	
30 Subtract line 29 from line 22. This is your New York adjusted gross income <i>(enter the line 30 amount on line 31 on the back page)</i> .....	30.	

**Tax computation** (see page 25)

IT-201 (2000) (back)

Dollars Cents

31	Enter the amount from <b>line 30</b> on the front page ( <i>this is your New York adjusted gross income</i> ) .....	31.		.	
32	Enter the <b>larger</b> of your <b>standard deduction</b> ( <i>from page 25</i> ) or your <b>itemized deduction</b> ( <i>from Form IT-201-ATT, Part I, line 14; attach form</i> ). Mark an "X" in the appropriate box: <input type="checkbox"/> Standard <input checked="" type="checkbox"/> Itemized	32.		.	
33	Subtract line 32 from line 31 .....	33.		.	
34	Exemptions <b>for dependents only</b> (not the same as total federal exemptions; <i>see page 25</i> ) .....	34.	000	.	00
35	<b>Subtract line 34 from line 33. This is your taxable income</b> .....	35.		.	
36	NY State tax on line 35 amount ( <i>use red NY State Tax Table on page 57; if line 31 is more than \$100,000, see page 25</i> ) .....	36.		.	

**New York State credits and other taxes** (see page 26)

37	New York State household credit ( <i>from table I, II, or III on page 26</i> ) .....	37.		.	
38	Subtract line 37 from line 36 ( <i>if line 37 is more than line 36, leave blank</i> ) .....	38.		.	
39	New York State nonrefundable credits ( <i>from Form IT-201-ATT, Part IV, line 55</i> ) .....	39.		.	
40	Subtract line 39 from line 38 ( <i>if line 39 is more than line 38, leave blank</i> ) .....	40.		.	
41	Net other New York State taxes ( <i>from Form IT-201-ATT, Part II, line 33; attach form</i> ) .....	41.		.	
42	<b>Add lines 40 and 41. This is the total of your New York State taxes</b> .....	42.		.	

**City of New York and City of Yonkers taxes and credits**

43	City of NY resident tax ( <i>use the City of NY Tax Table on white pages 65-72</i> ) ..	43.		.	
44	City of New York household credit ( <i>from table IV, V, or VI, page 27</i> ) ..	44.		.	
45	Subtract line 44 from line 43 ( <i>if line 44 is more than line 43, leave blank</i> ) ..	45.		.	
46	Other city of New York taxes ( <i>from Form IT-201-ATT, Part III, line 38; attach form</i> ) ..	46.		.	
47	Add lines 45 and 46 .....	47.		.	
48	City of NY nonrefundable credits ( <i>from Form IT-201-ATT, Part IV, line 58</i> ) ..	48.		.	
49	Subtract line 48 from line 47 ( <i>if line 48 is more than line 47, leave blank</i> ) ..	49.		.	
50	City of Yonkers resident income tax surcharge ( <i>see page 28</i> ) ....	50.		.	
51	City of Yonkers <b>nonresident</b> earnings tax ( <i>attach Form Y-203</i> ) ..	51.		.	
52	Part-year city of Yonkers resident income tax surcharge ( <i>attach Form IT-360.1</i> ) ...	52.		.	

See instructions on pages 26 through 30 for figuring city of New York and city of Yonkers taxes, credits, and tax surcharges.

53	<b>Add lines 49 through 52. This is the total of your city of New York and city of Yonkers taxes</b> .....	53.		.	
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**Voluntary gifts/contributions** (whole dollar amounts only; see page 29)

54	Return a Gift to Wildlife ..... <input type="checkbox"/> w <input type="checkbox"/> Missing/Exploited Children Fund .. <input type="checkbox"/> c <input type="checkbox"/> Breast Cancer Research Fund ... <input type="checkbox"/> b <input type="checkbox"/> Olympic Fund ..... <input type="checkbox"/> o <input type="checkbox"/> Alzheimer's Fund ..... <input type="checkbox"/> a <input type="checkbox"/>	Total of your line 54 gifts and contributions =		54.		.	00
55	<b>Add lines 42, 53, and 54. This is your total New York State, New York City and Yonkers taxes, and gifts/contributions</b> ...	55.		.			

**Payments and refundable credits** (see page 29)

56	NY State child and dependent care credit ( <i>from Form IT-216; attach form</i> ) ...	56.		.	
57	NY State earned income credit ( <i>from Form IT-215; attach form</i> ) .....	57.		.	
58	Real property tax credit ( <i>from Form IT-214, line 17; attach form</i> ) ....	58.		.	
59	City of NY school tax credit ( <i>also complete (E) on front; see page 29</i> ) ...	59.		.	
60	Other refundable credits ( <i>from Form IT-201-ATT, Part IV, line 72</i> ) ...	60.		.	
61	Total <b>New York State</b> tax withheld .....	61.		.	
62	Total <b>city of New York</b> tax withheld .....	62.		.	
63	Total <b>city of Yonkers</b> tax withheld .....	63.		.	
64	Total of estimated tax payments, and amount paid with extension Form IT-370 ..	64.		.	
65	<b>Add lines 56 through 64. This is the total of your payments</b> .....	65.		.	

Mail your completed return to:  
STATE PROCESSING CENTER  
PO BOX 61000  
ALBANY NY 12261-0001

Staple your wage and tax statements at the bottom of the front of this return.

**Refund — If line 65 is more than line 55, figure your refund.** (see page 32)

66	Subtract line 55 from line 65. This is the amount you <b>overpaid</b> .....	66.		.	
67	Amount of line 66 that you want <b>refunded to you</b> .....	67.		.	
a	Routing number : <input type="text"/>	b	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
c	Account number : <input type="text"/>				
68	<b>Estimated tax only</b> Amount of line 66 that you want applied to your 2001 estimated tax. (Do not include any amount that you claimed as a refund on line 67) ...	68.		.	

You can choose to have your refund sent directly to your bank account. See instructions and fill in lines 67a, b, and c.

See Step 7, page 35, for the proper assembly of your return and attachments.

**Amount you owe — If line 65 is less than line 55, figure the amount you owe.** (see page 33)

69	Subtract line 65 from line 55. This is the <b>amount you owe</b> . ( <i>Make check or money order payable to NY State Income Tax; write your social security number and 2000 Income Tax on it.</i> )	69.		.	
70	Estimated tax penalty ( <i>Include this amount in line 69 or reduce the overpayment on line 66. See page 33.</i> ) .....	70.		.	

Sign your return below.

71 I authorize the Tax Department to discuss this return with the paid preparer listed below. (Mark the Yes or No box; see pg. 33.) Yes  No

Paid preparer's use only	Preparer's signature	Date	Mark "X" if self-employed <input type="checkbox"/>	Sign your return here	Your signature
	Firm's name (or yours, if self-employed)	Preparer's SSN or PTIN			Spouse's signature (if joint return)
Address	Employer identification number	Date	Daytime phone number (optional)		( )