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			<b>Amende</b>	d Nonreside	ent a	nd	Part-Ye	ar Resid	de	ent	5	2002	1-2	.UJ	)- <b>/</b>
i			ncome Ta		York Sta	ate •	City of New	York • City o	f Yc	nkers					
į				For the year Januar			_		isc	al tax y					0 2
į				our first name first. Fo				me lines. spouse's name on l	ine b	elow)		ending r social security n			_
		a)				(	,,			,					
:		V	Spouse's first n	ame and middle initial	Spouse's la	ast nam	ne				▼ Spc	ouse's social secu	rity numbe	er	_
		or t													
i				(number and street or rural	route)			Apartment n	umb	er					_
		Print													
			City, village, or p	ost office		State		ZIP code							
(A)	1)	Si	ngle	L.		(B)	Can you be	claimed as a	do	nenden	nt on				
Fili	na - —		arried filing	* For filing status ② or		(5)	-	payer's federal		•		Yes	۱ .	vo [	7
	tus –		int return*	both spouses' social se numbers above, unless		(C)		an <b>amended</b> 1				103	_ '	•••	_
ma	rk ③	Ma	arried filing eparate return*	Form IT-203-C (see IT-2		( )	•	an why in Part				Yes	] ,	vo [	
an .	<b>X</b> (4)		ead of househo	ld		(D)		York part-yea		, ,	,				_
in c	one 4 L		ith qualifying pe			(-)	-	of months you						· r	
box	(: ⑤		ualifying widow th dependent c				` '	of months you				•			
		VVI	пп аерепаетт с	Tillu			. ,	ederal amour				New Yor			nt
<b>(E)</b>	Enter New York	adj	usted gross in	come as reported or	n line <b>30</b>	of		Dollars		Cents			ollars		Cents
	your original 2	200	2 Form IT-203	return (see IT-203 ins	structions	;)									•
				tion about instruction	ons.										
	rt I — Federal in the new amounts for iter			<b>justments</b> e original amounts for unchal	nged items.		Amende	ed federal an Dollars	nou	I <b>nt</b> Cents		Amended Ne	ew York ollars	State a	mount Cents
1	Wages, salaries, t	ips,	etc.		1	1					1.				•
2	Taxable interest in	con	ne			2					2.				•
3	Ordinary dividends	s	1			3					3.				•
4	Taxable refunds, credi	ts, o	r offsets of state ar	nd local income taxes (also	enter on line .	23) 4					4.				•
5	Alimony received					5			_ •		5.				•
6	Business income o	r lo	ss (attach copy of fe	ederal Schedule C or C-EZ, F	orm 1040)	6			_ •		6.				•
7	Capital gain or los	s (a	ttach copy of fede	eral Schedule D, Form 104	10)	7			_ •		7.				•
8	Other gains or loss	ses	(attach copy of fe	ederal Form 4797)		8			_ •		8.				•
9	Taxable amount of	f IR	A distributions			9			_ •		9.				•
10	Taxable amount of	f pe	ensions and ann	nuities		10	).		_ •		10.				•
11	Rental real estate, royaltie	s, pa	rtnerships, S corporati	ions, trusts, etc. (attach copy of feder	al Sch. E, Form 1	040) 11			_ •		11.				•
12	Farm income or los	SS (	attach copy of fed	deral Schedule F, Form 10	)40)	12			_ •		12.				•
							3.		_ •		13.				•
				nefits (also enter on line	25)		-		_ •		14.				•
	Other income (see					15					15.				•
					<u></u>				_ •		16.				•
	Total federal adjustment					17			•		17.				•
18			-	r amended federal adju	_		.								
N.		$\neg$			•••••	18	i.		•		18.				•
	w York additions		,	*	l !'t' \	40			T		40				
			,	but not those of NYS or its I	,				⊢•		19.				•
				ontributions		<del></del>			- •		20.				•
21	•					22			⊢.		21.		—	$\longrightarrow$	•
	ew York subtracti			l instructions)		22			•		22.				•[
				and local income taxes (from	m line 4 aba	ve) <b>2</b> 3	2				23.				
24				ments and the federal gove					$\dashv^{ullet}$		24.			$\overline{}$	
			_	nefits <i>(from line 14 abov</i>					_՝		25.				
			•	bonds		26			_՝		26.				

29 Add lines 23 through 28. This is the total of your New York subtractions ... 29. New York adjusted gross income

28 Other (see IT-203 instr.) | Identify:

30 Subtract line 29 from line 22. This is your New York adjusted gross income. Enter here and next to line 43 (If zero or less, see IT-203 instructions) ...

27 Pension and annuity income exclusion (see IT-203 instructions) ......

. 30 30.						
	 30.	•		30.	•	

27.

28.

28.

21	New York adjusted gross income from line 20. Amended federal		Increase or decrease		Amended amount
31	New York adjusted gross income from line 30, Amended federal amount column on the front page	31.	Dollars Cents	31.	Dollars Cents
32	Check one: Standard deduction or Itemized deduction Amount =	32.		32.	•
	Subtract line 32 from line 31 (if line 32 is more than line 31, enter "0")	33.	•	33.	•
34	Exemptions for dependents only (not the same as federal; see IT-203-X-1, page 2)	34.	0 0 0 . 0 0	34.	0 0 0 0 0
	Subtract line 34 from line 33. This is your taxable income	35.	0 0 0   •   0 0	35.	0 0 0 0
36	New York State tax on line 35 amount (see IT-203-X-I, page 2)	36.		36.	•
37	New York State household credit (see page 27 of IT-203 instructions)	37.	•	37.	•
38	Subtract line 37 from line 36 (if line 37 is more than line 36, enter "0")	38.	•	38.	
39	New York State child and dependent care credit (from Form IT-216; attach form)	39.		39.	
40	Subtract line 39 from line 38 (if line 39 is more than line 38, enter "0")	40.	•	40.	
41	New York State earned income credit (from Form IT-215; attach form)	41.		41.	
42	Subtract line 41 from line 40 (if line 41 is more than line 40, enter "0")	42.		42.	
	Income percentage (see page 27 of IT-203 instructions)				
	Amount from line 30, New York State amount  Amount from line 30, Federal amount				
	• = =	43.	_	43.	
44	Multiply line 42 by the <b>decimal</b> on line 43. This is your allocated New York State tax.	44.	·	44.	
	New York State nonrefundable credits (see IT-203-X-I, page 3)	45.		45.	
46	Subtract line 45 from line 44 (if line 45 is more than line 44, enter "0")	46.	101	46.	
	Net other New York State taxes (see IT-203-X-I, page 3)	47.		47.	
	Add lines 46 and 47. This is the total of your New York State taxes	48.	151	48.	
	Other city of New York taxes (from Form IT-203-B, line 27)	49.		49.	
	City of Yonkers nonresident earnings tax (attach Form Y-203)	50.		50.	
	Part-year Yonkers resident income tax surcharge (attach Form IT-360.1)	51.		51.	
52	Gifts/Contributions from original return (cannot be amended)	52.	' '	52.	. 0 0
53	Add lines <b>48</b> through <b>52</b> . This is the total of your taxes and gifts.				
	Also enter this amount on line 64	53.		53.	
54	Part-year city of New York school tax credit (see IT-203-X-1, page 3)	54.	•	54.	•
55	Other refundable credits (see IT-203-X-I, page 3)	55.	•	55.	•
56	Total NY State tax withheld (see IT-203-X-I, page 3)	56.	•	56.	•
57	Total city of New York tax withheld (see IT-203-X-I, page 3)	57.	•	57.	•
58	Total city of Yonkers tax withheld (see IT-203-X-I, page 3)	58.	•	58.	•
59	Total estimated tax payments and amount paid with extension Form IT-370 $\dots$	59.	•	59.	•
60	Amount paid with original return (see IT-203-X-I, page 3)			60.	•
61	Add lines 54 through 60, $\it Amended\ amount\ column\ .$ This is the total of	your <sub> </sub>	payments	61.	•
62	Overpayment, if any, as shown on original return (or previously adjusted by	y New	York State) (see IT-203-X-I, page 3)	62.	•
63	Subtract line 62 from line 61 (see IT-203-X-I, page 3, if line 62 is more than line	ne 61)		63.	•
	Enter amount from line 53, Amended amount column			64.	•
	If line 64 is <b>less</b> than line 63, enter the difference here; this is your <b>refu</b>			65.	•
66	If line 64 is <b>more</b> than line 63, enter the difference here; this is the <b>amo</b>	-		66.	•
	(Make check or money order payable to NY State Income Tax; write your SS# a	and <b>20</b>	02 Income Tax on it.)		
Cor	mplete all questions and parts below and on page 3 that ap	oply:	to your amended return		
(	F) Is this return the result of federal audit changes? Yes No		(G) 1. Original return file	_	
	If Yes, complete items 1-3 below and Part III on page 3:		Nonresident or L	Par	t-year resident or L Resident
	Enter the date of the final federal determination			مادما:	
	2. Do you concede the federal audit changes?		2. Amended return f		
	(If No, explain why in Part III on page 3) Yes No		Nonresident or	Par	t-year resident
	3. Do the changes involve a partnership or				
	S corporation? (If Yes, complete Part II below) Yes No	Ш			
	Part II - Partnership or S corporation — If us				
	or S corporation income, gain, loss, or deduc	ction	, provide the following inform	ation	
	Name of partnership or S corporation Identify	ing n	umber Principal bu	sines	activity
	Address of partnership or S corporation		,		
	<b>=</b>				

Nar	ne(s) as shown on page 1				Your social se	curity numbe	r		
Par	t III – Federal changes	- After co	ompleting Part I, explain b	elow the	changes, if any, i	made by the I	nternal Reve	enue Service (	IRS)
67	List federal adjustments					d gross income,			
а		67a.	•		icneck one —	income, or			
b		67b.	•	1	and enter) tax tabl		_		•
С		67c.	•	1	Corrected federa		_		•
d		67d.	•		Federal tax shown or		+		•
е		67e.	•	•	Increase (decrease) in fo			·	•
68	Net federal adjustment —	60		1	Penalties				•
	increase or (decrease)	68.	•	_	Interest		).		•
69	Previously adjusted gross income reported taxable income, or	<b>5</b> ,		76	Total federal amour (add lines 73-75)				
	federal (check one) tax table income	69.		]	(aud III les 75-75)	/ <u>/ (</u>	).		•
			•	<u> </u>					
If yo	ou did not concede the abo	ve changes	and checked the <i>No</i> box	in questic	on 2 at item <b>(F)</b> o	n page two, e	xplain why.		
Day	t IIV. Other shanges	Evalaia a	way abanasa nat abayya	in Dout I	TT				
rai	t IV – Other changes –	– Ехріаін а	any changes not snown	III Fait I	11.				
77	I authorize the Tax Departmen	t to discuss th	nis return with the paid prepare	r listed belo	ow. (Mark the <b>Yes</b> or	No box; see ins	structions pg. 4	.) Yes I	No 🔲
	Preparer's signature		▼ Preparer's SSN or PTIN		Olar:	Your signature			
	Paid parer's				Sign				
us	Firm's name (or yours, if	self-employed)	Employer identificatio	n number	your your		ature (if joint retui	m)	
			<u>                                      </u>	1 22	return here		1.5		
Add	ress			ark <i>X</i> if lf-employed		Date	Daytime pl	none number (optic	onal)

## Information on references to instructions made on this form

Form IT-203-X has its own instructions, Form IT-203-X-I, that should have been provided to you with Form IT-203-X. When you see a reference to *IT-203-X-I*, page 2, for example, you can find the information you need on page 2 of Form IT-203-X-I. This instruction is specific to the lines on the IT-203-X amended return that are not on Form IT-203, and to lines with special restrictions and computations.

You will also see many references to the instructions for Form IT-203. These instructions are printed in a booklet with form number *IT-203-I* and in a return and instructions packet with form number *IT-203-P*. Be sure that you have a copy of the 2002 IT-203 instructions before you begin to complete your 2002 IT-203-X amended return.

Instructions for both forms are available on the department's fax-on-demand system and Internet Web site. See *Need help?* below for complete information on how to get forms and assistance.

## Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to file your return and pay tax. However, if, at a later date, you need to establish the date you filed your return or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. If you have used a designated private delivery service and need to establish the date you filed your return, contact that private delivery service for instructions on how to obtain written proof of the date your return was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, address your return to: **State Processing Center, 101 Enterprise Drive, Kingston NY 12401.** 

The current designated private delivery services are:

- Airborne Express (Airborne):
  - Overnight Air Express Service Next Afternoon Service Second Day Service
- Federal Express (FedEx):
  - FedEx Priority Overnight
  - FedEx Standard Overnight
  - FedEx 2 Day
  - FedEx International Priority
  - FedEx International First

- 2. DHL Worldwide Express (DHL):
  - DHL Same Day Service
  - DHL USA Overnight
- 4. United Parcel Service (UPS):
  - **UPS Next Day Air**
  - **UPS Next Day Air Saver**
  - UPS 2nd Day Air
  - UPS 2nd Day Air A.M.
  - **UPS Worldwide Express**
  - **UPS Worldwide Express Plus**

## Need help?



**Telephone assistance** is available from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday.

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For tax information:	1 800 225-5829							
To order forms and publications:	1 800 462-8100							
Refund status: (electronically filed)	1 800 353-0708							
(direct deposit)	1 800 321-3213							
(all others)	1 800 443-3200							
(Automated service for refund status is available								
24 hours a day, 7 days a week.)								

From areas outside the U.S. and outside Canada:

(518) 485-6800



**Fax-on-demand forms:** Forms are available 24 hours a day,

7 days a week. 1 800 748-3676



Internet access: www.tax.state.ny.us (for forms, publications, your refund status, to check your estimated tax account, and other information)



## Hotline for the hearing and speech impaired:

1 800 634-2110 from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use.



Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, please call 1 800 225-5829.



If you need to write, address your letter to: NYS TAX DEPARTMENT TAXPAYER CONTACT CENTER W A HARRIMAN CAMPUS ALBANY NY 12227

