New York State Department of Taxation and Finance

Resident Income Tax Return New York State • City of New York • City of Yonkers



For a	office use only			or the full year J						-	· ·		0 4
1010	onice use only	type	Important: You mus						-		l ending r social security number		
_		or t	Your first name and mid	dale initial	Your last	name (for a joint r	return , enter	r spouse's na	ame on line below)	100	1 Social Security Humber		٦
Ξ		print	0		0	I t				▼ Snd	ouse's social security numb	201	
_		ğ	Spouse's first name ar	ia midale miliai	Spouse s	last name				У Зро	buse's social security flurit)CI	٦
		o, or	Mailing address (number	or and atract or rura	l routo)			Apartm	ent number	Now Yor	k State county of reside	2000	
=		ape	walling address (number	er and street or rura	(Toule)			Apartin	entnumber	•	k State County of Testu	EIICE	
Ξ		등	City, village, or post offi	00		State		ZIP code		School	district name		
Ξ		Attach label,	Oity, village, or post offi	00		Olale		Zii code		•	district riame		
=			Lent home address (se	e nage 49) (number :	and street o	or rural route)		Apartme	nt number	School c	liatriat		_
Ξ				o pago roj (nambor (0 001	or rural realey		, .pao			number		
		City, vil	lage, or post office		State		ZIP code		If taxpayer is d		enter first name and c	late of deat	th.
		,	3 / 1		NY								
	(A) I	Filing	① Single				(=)				I		
	` ,	rıllığ status	•				(B)	Can yo	ou be claimed nother taxpay	das a de er's fede	ependent eral return?. Yes	□ IN	
Stanle			an ② 🔲 Marrie	d filing joint re	turn		(C)						о
money here.	order	X in	(enter	spouse's social s	ecurity n	umber above)	(C)		need an inco u next year <i>(see</i>			□ IN	
		one bo	Marrie	d filing separa	te retur	n	(D)	-			ed any living quarte		
	· ·	one be	(enter	spouse's social s	ecurity n	umber above)	(5)	,	, ,		an X in the box <i>(see pa</i>		
	_		4 Head of	of household (with qua	lifvina person)	(E)		New York re			40)	
				(, 51,					ents only: <i>(see page</i> New York City in 2004		
			☐ ⑤ ☐ Qualify	ing widow(er)	with de	ependent chi	`	•	-		ed in New York City in 200		
Fee	deral incon	ne and	l adjustments				`				Dollars		Cents
1	Wages, sala	aries, ti	ps, etc	Only full-year	NY Stat	te residents m	ay file th	nis form.	For	1.			
2	Taxable inte	erest in	come	adjustments	in 18 bei as thev a	low, enter you appear on you	ır income ır federal	e items a I return (ina totai 'see	2.			
3	Ordinary div	vidends	3	page 20). Als	o see pa	ige 20 instruct	tions for	showing	a loss	3.			
4	Taxable refu	unds, ci	redits, or offsets of	state and loca	al incom	ne taxes (also	o enter o	n line 24	1 below)	4.			
5	Alimony red	eived .								5.			
6	Business in	come c	or loss <i>(attach a cop</i> y	y of federal Sch	edule C	or C-EZ, Form	n 1040)						
7			S (if required, attach o										
8			ses (attach copy of fe										
9			IRA distributions. I							_			
10			pensions and annu			•				10.			
11		-	alties, partnerships, S	•									
12			ss (attach copy of fed										
13			mpensation										
14			social security ber	netits (also ente	er on line	e 26 below)				14.			
15 16			<i>page 20)</i>							16.			-
16 17			tments to income (17.			
18			rom line 16. This is				come						
			(see page 21)	your icuciai	aujusti	ca gross iii				10.	l		
19			state and local bonds	s and oblination	IS (hut na	ot those of NY	State or i	ts local o	overnments)	19.			
20			14(h) retirement co	-				_					
21	-	-	ion savings distribu		-	-				21.			
22	Other (see p									22.			
23			gh 22							23.			
Nev	w York sub	tractio	ns (see page 24	·)									
24	Taxable refunds,	credits, or	r offsets of state and local i	ncome taxes (from li	ne 4 above) 24.							\neg
25	Pensions of NYS	S and loca	al governments and the fed	leral government (s	ee page 2	<i>4</i>) 25.							
26	Taxable am	ount of	social security ber	nefits (from line	14 abov	e) 26.				_			
27			U.S. government b							L			┙
28			ty income exclusio							_	2004		
29	29 College choice tuition savings deduction / earnings distributions 29.												
30	Other (see p					30.					Г		
31			gh 30							31.			
32	Subtract lin	ne 31 fi	rom line 23. This is	s your New Yo	rk adju	sted gross	ıncome			32.		.	

Tax	comp	uta	tion, credits, and other tax	xes (see page 29)		IT-201 (200	04) (back)		Dollars	Cents
33	Enter tl	he a	mount from line 32 on the from	t page. This is your New	York adjusted	d gross inco	me	33.		
34	Deduc	tion	- mark an X in the appropriate box:	Standard (from page 29)	or : Iten	nized (attach Fo	rm IT-201-ATT)	34.		
35			ie 34 from line 33 (if line 34 is n				-	35.		
36	Exemp	tions	s for dependents only (not the	e same as total federal ex	emptions; <i>see pa</i>	age 29)		36.	0 0 0	. 0 0
37	Subtra	ct lin	e 36 from line 35 and enter th	e result on line 37. This	s is your taxab	le income.		37.		
38	New Yo	ork S	State tax on line 37 amount (se	ee Tax Computation on page	ages 30, 31, and	d 32)		38.		
39	New Yo	ork S	State household credit (from tab	ble I, II, or III on page 33)				39.		
40	Subtra	ct lin	ie 39 from line 38 (if line 39 is n	nore than line 38, leave bl	ank)			40.		•
41	New Yo	ork S	State nonrefundable credits (fro	om Form IT-201-ATT, Part	IV, line 64)			41.		•
42			e 41 from line 40 (if line 41 is n		,					•
43			lew York State taxes (from Forn							•
44			42 and 43. This is the total of		axes			44.		•
			ork and City of Yonkers ta					7		
45	-		York resident tax (see pages 3		45.					
46	-		York household credit (from tab							
47			e 46 from line 45 (if line 46 is more		47.			⊣	See instructions on	
48		-	of New York taxes (from Form IT-201-A						pages 34 through 37	
49			7 and 48		49.				figuring city of New	York
50	•		nonrefundable credits (from Form		50.				and city of Yonkers	
51			e 50 from line 49 (if line 50 is more		51.				taxes, credits, and ta	IX
52	-		kers resident income tax surch						surcharges.	
53	-		kers nonresident earnings tax							
54	Part-yea	r city	of Yonkers resident income tax surch	arge (attach Form IT-360.1)	54.					
55	Add lin	nes	51 through 54. This is the tota	al of your city of New Y	ork and city o	of Yonkers to	axes	55.		•
56_			se tax (see instructions starting					56.		•
57		rn a G	Gift to Wildlife ■ w.	•					Gifts/contributions: whole	
: ا	Breas	st Car	ncer Research Fund b.		cer Research Fun	d I p.			amounts only (see page 43)	
Ľ	Alzhe	eimer'	s Fund ■a.	Olympic Fund ■ o.	Total gift	s and contrib	utions =	57.		. 0 0
			55, 56, and 57. This is your total New		d Yonkers taxes, a	nd gifts/contrib	utions	58.		
ıPa۱	ımante	200								
			d refundable credits (see					7		
59	NY State	e chil	d and dependent care credit (from F	orm IT-216; attach form)	59.			Ма	il your completed retu	ırn to:
59 60	NY State	e chil ate e	d and dependent care credit (from F arned income credit (from Form IT	Form IT-216; attach form)	60.		•			
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