



Department of Taxation and Finance

# Resident Income Tax Return

New York State • New York City • Yonkers • MCTMT

# IT-201

For the full year January 1, 2024, through December 31, 2024, or fiscal year beginning ... 24

For help completing your return, see the instructions, Form IT-201-I.

and ending ...

Your first name		MI	Your last name (for a joint return, enter spouse's name on line below)		Your date of birth (mmddyyyy)	Your Social Security number	
Spouse's first name		MI	Spouse's last name		Spouse's date of birth (mmddyyyy)	Spouse's Social Security number	
Mailing address (see instructions) (number and street or PO Box)					Apartment number	New York State county of residence	
City, village, or post office			State	ZIP code	Country	School district name	
Taxpayer's permanent home address (see instructions) (number and street or rural route)					Apartment number	School district code number	
City, village, or post office			State	ZIP code	Decedent information	Taxpayer's date of death (mmddyyyy)	Spouse's date of death (mmddyyyy)
			<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 surviving spouse

**B Did you itemize** your deductions on your 2024 federal income tax return? Yes  No

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

**D1** Did you have a financial account located in a foreign country? Yes  No

**D2** (1) Did you or your spouse **maintain living quarters in Yonkers** for any part of 2024? ... Yes  No   
If Yes:

(2) Number of months **you** lived in Yonkers in 2024 .....

(3) Number of months **your spouse** lived in Yonkers in 2024 .....

If No:

(4) Did you or your spouse work in Yonkers while not living in Yonkers for any part of 2024 ..... Yes  No

**E** (1) Did you or your spouse **maintain living quarters in NYC** (this includes the Bronx, Brooklyn, Manhattan, Queens, and Staten Island) during 2024? ..... Yes  No

(2) Enter the number of days spent in NYC in 2024 (any part of a day spent in NYC is considered a day) .....

**F NYC residents and NYC part-year residents only:**  
(1) Number of months **you** lived in NYC in 2024 .....

(2) Number of months **your spouse** lived in NYC in 2024 .....

**G** Enter your **2-character special condition code(s)** if applicable .....

### H Dependent information

First name	MI	Last name	Relationship	Social Security number	Date of birth (mmddyyyy)

If more than 7 dependents, mark an **X** in the box.



For office use only

Your Social Security number

**Federal income and adjustments**

Whole dollars only

1	Wages, salaries, tips, etc. ....	1	.00
2	Taxable interest income .....	2	.00
3	Ordinary dividends .....	3	.00
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25) .....	4	.00
5	Alimony received .....	5	.00
6	Business income or loss (submit a copy of federal Schedule C, Form 1040) .....	6	.00
7	Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040) .....	7	.00
8	Other gains or losses (submit a copy of federal Form 4797) .....	8	.00
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an <b>X</b> in the box .. <input type="checkbox"/>	9	.00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an <b>X</b> in the box <input type="checkbox"/>	10	.00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)	11	.00
12	Rental real estate included in line 11 .....	12	.00
13	Farm income or loss (submit a copy of federal Schedule F, Form 1040) .....	13	.00
14	Unemployment compensation .....	14	.00
15	Taxable amount of Social Security benefits (also enter on line 27) .....	15	.00
16	Other income Identify: .....	16	.00
17	Add lines 1 through 11 and 13 through 16 .....	17	.00
18	Total federal adjustments to income Identify: .....	18	.00
19	Federal adjusted gross income (subtract line 18 from line 17) .....	19	.00

**New York additions**

20	Interest income on state and local bonds and obligations (but not those of NYS or its local governments)	20	.00
21	Public employee 414(h) retirement contributions from your wage and tax statements .....	21	.00
22	<b>New York's</b> 529 college savings program distributions .....	22	.00
23	Other (Form IT-225, line 9) .....	23	.00
24	Add lines 19 through 23 .....	24	.00

**New York subtractions**

25	Taxable refunds, credits, or offsets of state and local income taxes (from line 4)	25	.00
26	Pensions of NYS and local governments and the federal government	26	.00
27	Taxable amount of Social Security benefits (from line 15) ...	27	.00
28	Interest income on U.S. government bonds .....	28	.00
29	Pension and annuity income exclusion .....	29	.00
30	<b>New York's</b> 529 college savings program deduction/earnings	30	.00
31	Other (Form IT-225, line 18) .....	31	.00
32	Add lines 25 through 31 .....	32	.00
33	<b>New York adjusted gross income</b> (subtract line 32 from line 24) .....	33	.00

**Standard deduction or itemized deduction**

34	Enter your <b>standard deduction</b> or your <b>itemized deduction</b> (from Form IT-196) Mark an <b>X</b> in the appropriate box: <input type="checkbox"/> <b>Standard</b> - or - <input type="checkbox"/> <b>Itemized</b>	34	.00
35	Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank) .....	35	.00
36	Dependent exemptions (enter the number of dependents listed in item H) .....	36	000.00
37	<b>Taxable income</b> (subtract line 36 from line 35) .....	37	.00



Name(s) as shown on page 1

Your Social Security number

Tax calculation, credits, and other taxes

Table with 3 columns: Line number, Description, and Amount. Rows include Taxable income (38), NYS tax on line 38 amount (39), NYS household credit (40), Resident credit (41), Other NYS nonrefundable credits (42), Add lines 40, 41, and 42 (43), Subtract line 43 from line 39 (44), Net other NYS taxes (45), and Total New York State taxes (46).

New York City and Yonkers taxes, credits, and surcharges, and MCTMT

Table with 3 columns: Line number, Description, and Amount. Rows include NYC taxable income (47), NYC resident tax on line 47 amount (47a), NYC household credit (48), Subtract line 48 from line 47a (49), Part-year NYC resident tax (50), Other NYC taxes (51), Add lines 49, 50, and 51 (52), NYC nonrefundable credits (53), Subtract line 53 from line 52 (54), MCTMT net earnings base for Zone 1 (54a), MCTMT net earnings base for Zone 2 (54b), MCTMT for Zone 1 (54c), MCTMT for Zone 2 (54d), Total MCTMT (54e), Yonkers resident income tax surcharge (55), Yonkers nonresident earnings tax (56), Part-year Yonkers resident income tax surcharge (57), Total New York City and Yonkers taxes / surcharges and MCTMT (58), Sales or use tax (59), Voluntary contributions (60), and Total New York State, New York City, Yonkers, and sales or use taxes, MCTMT, and voluntary contributions (61).

See instructions to calculate New York City and Yonkers taxes, credits, and surcharges.

See instructions to calculate the MCTMT for each zone.



Your Social Security number

62 Enter amount from line 61 ..... 62 .00

Payments and refundable credits

Table with 3 columns: Line number, Description, Amount. Includes lines 63-75 for various credits and taxes, and line 76 for total payments.

If applicable, complete Form(s) IT-2 and/or IT-1099-R and submit them with your return. Do not send federal Form W-2 with your return.

Your refund, amount you owe, and account information

Table with 3 columns: Line number, Description, Amount. Includes lines 77-82 for refund and penalty information.

Mark one refund choice: [ ] direct deposit to checking or savings account (fill in line 83) - or - [ ] paper check

Refund? Direct deposit is the easiest, fastest way to get your refund. See instructions for payment options.

Table with 3 columns: Line number, Description, Amount. Includes lines 79-82 for refund application and penalties.

See instructions for the proper assembly of your return.

83 Account information for direct deposit or electronic funds withdrawal. If the funds for your payment (or refund) would come from (or go to) an account outside the U.S., mark an X in this box..... [ ]

83a Account type: [ ] Personal checking - or - [ ] Personal savings - or - [ ] Business checking - or - [ ] Business savings
83b Routing number [ ] 83c Account number [ ]
84 Electronic funds withdrawal ..... Date [ ] Amount [ ] .00

Third-party designee? (see instr.) Yes [ ] No [ ]
Print designee's name [ ] Designee's phone number ( ) [ ] Personal identification number (PIN) [ ]
Email: [ ]

Preparer's signature [ ] Preparer's printed name [ ]
Firm's name (or yours, if self-employed) [ ] Preparer's PTIN or SSN [ ]
Address [ ] Employer identification number [ ]
Date [ ]
Email: [ ]

Taxpayer(s) must sign here
Your signature [ ]
Your occupation [ ]
Spouse's signature and occupation (if joint return) [ ]
Date [ ] Daytime phone number ( ) [ ]
Email: [ ]

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See instructions for where to mail your return.

