

Resident Income Tax Return

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



IT-200

For office use only



Attach label, or print or type	Important: You must enter your social security number(s) in the boxes to the right.		
	Your first name and middle initial	Your last name	
	Spouse's first name and middle initial	Spouse's last name	
	Mailing address (number and street or rural route)	Apartment number	
	City, village or post office	State	ZIP code
Permanent home address (see page 14) (number and street or rural route)			Apartment number
City, village or post office		State NY	ZIP code
If taxpayer is deceased, enter first name and date of death .			

▼ Your social security number	
▼ Spouse's social security number	
NY State county of residence	●
School district name	●
School district code number	

- (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)** Were you a **city of New York** resident for all of 2001? (part-year residents must file Form IT-201; see instructions) 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 instructions, page 8)

Staple check or money order here

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	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 (also enter on line 12 below)	4	
5 Unemployment compensation	5	
6 Add lines 1 through 5	6	
7 Individual retirement arrangement (IRA) deduction (see instructions, page 9)	7	
8 Subtract line 7 from line 6. This is your federal adjusted gross income (see instructions, page 9)	8	
9 Public employee contributions (see instr., page 9) Identify: <input style="width: 150px;" type="text"/>	9	
10 Flexible benefits program (IRC 125 amount) (see instr., page 9) Identify: <input style="width: 150px;" type="text"/>	10	
11 Add lines 8, 9, and 10	11	
12 Taxable refunds, credits, or offsets of state and local income taxes from line 4 above	12	
13 Interest income on U.S. government bonds (see instructions, page 9)	13	
14 New York standard deduction (see instructions, page 9)	14	0 0
15 Exemptions for dependents only (not the same as total federal exemptions; see instructions, page 10)	15	0 0 0 0 0
16 Add lines 12 through 15 (if line 16 is more than or equal to line 11, enter "0" on line 17 and skip to line 28)	16	
17 Subtract line 16 from line 11. This is your taxable income (if \$65,000 or more, stop; you must file Form IT-201)	17	

Reminder: Only full-year New York State residents who are not reporting income such as IRA distributions, pensions/annuities, social security benefits, or capital gains may file this form. All others, see page 5 of the instructions.

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18 Enter the amount from line 17 on the front page. This is your **taxable income** 18 .

19 New York State tax on line 18 amount (use the State Tax Table, violet pages 41 through 48 of the instructions) 19 .

20 New York State household credit (from table I, II, or III; see instructions, page 10) 20 .

21 Subtract line 20 from line 19 (if line 20 is more than line 19, leave blank). This is the total of your New York State taxes 21 .

22 City of New York resident tax on line 18 amount. (use City Tax Table, white pages 49 through 56 of the instructions) 22 .

23 City of New York household credit (see instructions, page 11) 23 .

24 Subtract line 23 from line 22 (if line 23 is more than line 22, leave blank) 24 .

25 City of Yonkers resident income tax surcharge (from Yonkers Worksheet, page 11 of the instructions) 25 .

26 City of Yonkers nonresident earnings tax (attach Form Y-203) 26 .

• This is a scannable form; please file this original return with the Tax Department.

27 Add lines 24 through 26. This is the total of your city of New York and city of Yonkers taxes 27 .

Voluntary gifts/contributions
(see instructions)

Return A Gift to Wildlife	28	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	0	0
Olympic Fund	29	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	0	0
Breast Cancer Research Fund	30	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	0	0
Missing/Exploited Children Fund	31	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	0	0
Alzheimer's Fund	32	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	0	0

33 Add lines 28 through 32. This is your total voluntary gifts/contributions 33 .

34 Add lines 21, 27, and 33 34 .

35 New York State child and dependent care credit (from Form IT-216; line 14; attach form) 35 .

36 New York State earned income credit (from Form IT-215; attach form) 36 .

37 Real property tax credit (from Form IT-214, line 17; attach form) 37 .

38 College tuition credit (from Form IT-272; attach form) 38 .

39 City of New York school tax credit (see instructions, page 12) 39 .

• Staple your wage and tax statements to the bottom front of this return. See Step 7, page 15 of the instructions, for the proper assembly of your return and attachments.

40 Total New York State tax withheld (staple wage and tax statements; see instr., page 12) 40 .

41 Total city of New York tax withheld (staple wage and tax statements; see instr., page 13) 41 .

42 Total city of Yonkers tax withheld (staple wage and tax statements; see instr., page 13) 42 .

43 Add lines 35 through 42 43 .

44 If line 43 is more than line 34, subtract line 34 from line 43. This is the amount to be refunded to you 44 .

If you choose to have your refund sent directly to your bank account, complete a, b, and c below

a Routing number : b Type: Checking Savings

c Account number :

45 If line 43 is less than line 34, subtract line 43 from line 34. This is the amount you owe (do not send cash; make your check or money order payable to New York State Income Tax; write your social security number and 2001 income tax on it) .. 45 .

46 I authorize the Tax Department to discuss this return with the paid preparer listed below. (Mark the Yes or No box; see page 14.) Yes No

Paid preparer's use only	Preparer's signature	▼ Preparer's SSN or PTIN	
	Firm's name (or yours, if self-employed)	• Employer identification number	
	Address	Date	Mark "X" if self-employed <input type="checkbox"/>

Sign your return here	Your signature
	Spouse's signature (if joint return)
	Date
	Daytime phone number (optional)