UR Postdoctoral Fellowship Tax Information Session February 26, 2024 Detailed Example

2023 Tax Return Example – Leslie Postdoc - Single filer, postdoctoral fellow has income from fellowship and no W-2 income.

2023 Tax Forms Received:

- 1. UR postdoctoral fellowship letter \$50,000 fellowship and University contribution of \$10,000 for benefits for 2023 calendar year.
- 2. No other tax forms received.

Other Assumptions:

- 1. Filing status is single.
- 2. Fellow has no dependents.
- 3. Fellow cannot be claimed as a dependent on someone else's tax return.
- 4. Fellow is a NY resident and not a resident of any other state for tax purposes.
- 5. Not eligible for any other credit for IRS or NY state tax purposes.
- 6. Fellow made estimated tax payments for 2023 as follows:
 - a. Estimated tax paid to IRS for 2023 tax year: \$5,000
 - b. Estimated tax paid to NYS for 2023 tax year: \$2,000

City, town, or post office. If you have a forsign address, also complete spaces below. State ZIP code Check here if you, or your Foreign country name Foreign province/state/county Foreign postal code your tax or refurd. Filing Status Single Head of household (HOH) Vor Spouse Filing Status Married filing jointly (even if only one had income) Qualifying surviving spouse (QSS) Vor Spouse Original At any time during 2023, did you; (a) receive (as a reward, award, or payment for property or services); or (b) sell, Scale instructions) Ves No Standard Spouse itemizes on a separate return or you were a dual-status alien Spouse itemizes on a separate return or you were a dual-status alien Age/Bindness Ves No Age/Bindness Vou: Ves born before January 2, 1959 Are blind Oresk the boil figuing information interest in a digital asset/? (See instructions) Is blind Dependents (see instructions): (P) check the boil for annuary 2, 1959 Is blind Ves there. In a transme (P) Social accurity (P) Aresk the boil for annuary 2, 1959 Is blind Dependents In a transme (P) Social accurity (P) Aresk the boil for annuary 2, 1959 Is blind	E 1040		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		turn	202	3	OMB No. 1545	-0074	IRS Use Or	nly—Do not	write or stapl	le in this space.		
Lable Post doc First mum, spouse 5 first name and middle initial Last name Spouse 5 social security number Home address (number and street). If you have a P-0. box, see instructions. Apt. no. Predicinial Election Campaign Check here if you, or your City, town, or post office. If you have a threign address, also complete spaces below. State ZIP code Spouse 16 filing jointy, wint S3 Foreign country name Foreign province/state/country Foreign/state/state <	For the year Jan	. 1–Dec	2. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See s	See separate instructions.			
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Chick Mury Married filing separately (MFS) Qualifying surviving spouse (QSS) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: Digital At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). Yes No Standard Someone can claim: You as a dependent: Your spouse as a dependent Yes No Standard Someone can claim: You as a dependent: (B) Polationship (P) Check the box for qualifies for (see instructions); If more (i) First name Last name (ii) First name (iii) First name (iiii) First name (iii) First name (iii) First name (iii) First name (iiii) First name (iiiii) First name (iiiiiiiiiii) First	Filing Status	X	Single					Head of h	ouseho	old (HOH)					
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Form 1040 (2023)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	5,466
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	5,466
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	0
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	5,466
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	
	24	Add lines 22 and 23. This is	your total tax					24	5,466
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a			
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	0
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return			26	5,000
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	0
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	5,000
Refund	34	If line 33 is more than line 24	1, subtract line 24	4 from line 33.	This is the amou	nt you overpaid		34	0
	35a	Amount of line 34 you want	-				🗆	35a	
Direct deposit?	b	Routing number							
See instructions.	d Account number								
	36	Amount of line 34 you want a	applied to your :	2024 estimate	dtax	36			
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe.					
You Owe		For details on how to pay, g	o to <i>www.ir</i> s.gov	//Payments or	see instructions			37	466
	38	Estimated tax penalty (see in	nstructions) .			38	()	
Third Party		you want to allow another	•					I I	
Designee		tructions					•		
	nar	signee's ne		Phone no.			sonal iden 1ber (PIN)	lification	
Sign	Un	der penalties of perjury, I declare tl	nat I have examined	d this return and	accompanying sche	edules and statemer	nts, and to	the best	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration of	of preparer (othe	r than taxpayer) is b	ased on all informat	ion of whic	ch prepar	er has any knowledge.
nere	You	ur signature		Date	Your occupation				nt you an Identity
								tection P e inst.)	IN, enter it here
Joint return? See instructions.		ouse's signature. If a joint return, I	ooth must sign	Date	Spouse's occupat	tion	`	,	nt your spouse an
Keep a copy for	Opt	ouse s signature. It a joint return, i	Jour must sign.	Dale	opouse s occupa				ection PIN, enter it here
your records.							(see	e inst.)	
	Pho	one no.		Email address					
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Preparer									Self-employed
Use Only	Firr	Firm's name Pho						one no.	
	Firr	n's address					Firr	n's EIN	Form 1040 (2023)

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2023 Attachment Sequence No. 01

Your social security number

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Leslie Postdoc

Department of the Treasury

Internal Revenue Service

Par	t Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	
6	Farm income or (loss). Attach Schedule F.		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	_	
k	Stock options	8k	_	
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	_	
m	Olympic and Paralympic medals and USOC prize money (see			
		<u>8m</u>	_	
	Section 951(a) inclusion (see instructions)	8n	_	
0	Section 951A(a) inclusion (see instructions)	80	_	
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r 60,000		
S	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	80 (
		8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t		
	Wages earned while incarcerated	8u	-	
u z	Other income. List type and amount:	ou	-	
2		8z		
9	Total other income. Add lines 8a through 8z		9	60,000
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	60,000
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedu	lle 1 (Form 1040) 2023

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov	ernment		
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions) 24a		-	
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit		-	
С	Nontaxable amount of the value of Olympic and Paralympic medals			
ام	and USOC prize money reported on line 8m		-	
d			-	
е	Repayment of supplemental unemployment benefits under the TradeAct of 1974Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans		-	
g	Contributions by certain chaplains to section 403(b) plans		-	
•	Attorney fees and court costs for actions involving certain unlawful		-	
	discrimination claims (see instructions)			
i	Attorney fees and court costs you paid in connection with an award		-	
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
i	Housing deduction from Form 2555		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		-	
	1041)			
z	Other adjustments. List type and amount:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here	e and on		
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
			Schedule 1 (Forr	n 1040) 2023



Department of Taxation and Finance

Resident Income Tax Return

New York State ● New York City ● Yonkers ● MCTMT

For the full year January 1, 2023, through December 31, 2023, or fiscal year beginning \dots

IT-201

23

Fo	r help completing yo	ur re	turn, see the instru	ctions, I	Form IT-20)1 - I.			a	and endir	ng		
	ur first name	MI	Your last name (for a joint				e below)	Yo	ur date of birth (mmddyyyy)	Your Soci	ial Secu	irity number	
LI	ESLIE		POSTDOC								000	000000	
Sp	ouse's first name	MI	Spouse's last name					Sp	ouse's date of birth (mmddyyyy)	Spouse's	Social	Security num	nber
Ma	Mailing address (see instructions) (number and street or PO Box)								Apartment number	New York	State of	county of res	idence
Cit	y, village, or post office		State	ZIP code)	Cou	ntry			School di	strict na	ame	
Та	xpayer's permanent home	addro	ss (see instructions) (pum	hor and stre	ot or rural rout	5		Ana	rtmont numbor				
10	xpayer s permanent nome	auure	ss (see instructions) (num	ber and sire	el or fural foul	e)		Αра	Irtment number	School di			
Cit	y, village, or post office		State	ZIP code)			Tax	payer's date of death (mmddyy	code num yy) Spo		te of death (n	nmddyyyy)
			NY				edent mation						
_						- 1	Didvo	u b	ave a financial account lo				
Α	Filing ① X S	Single					in a fo	reig	n country?			Yes	No
			d filing joint return pouse's Social Security n	umber abov		D2	q	uart	ou or your spouse mainta ers in Yonkers for any pa			Yes	No
			d filing separate return pouse's Social Security n	umber abov	/e)			Yes umb	: per of months you lived in	n Yonkers	s in 202	23	
	4 H	Head of	of household (with qualit	ying persor	n)		(3) N	umb	er of months your spou s	se lived in	n Yonke	ers in 2023	
							lf	No:					
Qualifying surviving spouse Did you itemize your deductions on						(4) Did you or your spouse work in Yonkers while not living in Yonkers for any part of 2023 Yes							No
B	your 2023 federal incor	ne tax	return? Yes	Nc		E (1) Did you or your spouse maintain living quarters in NYC (this includes the Bronx, Brooklyn, Manhattan							
С	Can you be claimed a on another taxpayer's f			No			Queens, and Staten Island) during 2023?						No
						(2) Enter the number of days spent in NYC in 2023 (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 2023							
							(2) N	umb	er of months your spous	e lived in	NYC ir	ח 2023	
н	Dependent informat	ion				G			r 2-character special co applicable				
	First name	М	Last name		Relati	onsh	ip		Social Security numb	er	Date	of birth (m	nddyyyy)
								-					
								-					
								_					

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



For office use only

Your Social Security number	
000000000	

(Federal income and adjustments)

Fe	derai 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 X in the box	9	.00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box	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 1	12	.00		
13	Farm income or loss (submit a copy of federal Schedule F, Form	n 10	40)	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: POSTDOCTORAL FELLOWSHIP			16	60000 <u>.</u> 00
	Add lines 1 through 11 and 13 through 16				60000.00
18	Total federal adjustments to income Identify:			18	.00
19	Federal adjusted gross income (subtract line 18 from line 17) .			19	60000.00

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	New York's 529 college savings program distributions	22	.00
23	Other (Form IT-225, line 9)	23	.00
24	Add lines 19 through 23	24	60000.00

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	New York's 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	New York adjusted gross income (subtract line 32 from line	ə 24)		33	60000.00

Standard deduction or itemized deduction

34	Enter your standard deduction or your itemized deduction (from Form IT-196)		
	Mark an X in the appropriate box: X Standard - or - Itemized	34	8000.00
	Subtract line 34 from line 33 (<i>if line 34 is more than line 33, leave blank</i>) Dependent exemptions (<i>enter the number of dependents listed in item H</i>)	35 36	52000.00 000.00
37	Taxable income (subtract line 36 from line 35)	37	52000.00



Nan	ne(s) as shown on page 1		Your Social Security number		IT-201 (2023) Page 3 of 4
LES	SLIE POSTDOC		00000000		
_					
(Tax	c computation, credits, and other taxes)				
38	Taxable income (from line 37 on page 2)			38	52000.00
39	NYS tax on line 38 amount			39	2697.00
	NYS household credit		-00		
-	Resident credit	-	.00	1	
	Other NYS nonrefundable credits (Form IT-201-ATT, line 7)		.00	1	
	Add lines 40, 41, and 42			43	.00
	Subtract line 42 from line 20 // line 42 is more than line 20 la				2607.00
	Subtract line 43 from line 39 (if line 43 is more than line 39, lea		,	44 45	2697.00
45	Net other NYS taxes (Form IT-201-ATT, line 30)			45	
46	Total New York State taxes (add lines 44 and 45)			46	2697.00
Ne	w York City and Yonkers taxes, credits, and surcharges,	and	мстмт		
				1	
	NYC taxable income		.00	-	See instructions to
	NYC resident tax on line 47 amount		.00		compute New York City and
-	NYC household credit	48	.00		Yonkers taxes, credits, and
49	Subtract line 48 from line 47a (if line 48 is more than				surcharges.
	line 47a, leave blank)	49	.00		
	Part-year NYC resident tax (Form IT-360.1)	50	.00	-	
	Other NYC taxes (Form IT-201-ATT, line 34)	51	.00		
	Add lines 49, 50, and 51	52	.00		
	NYC nonrefundable credits (Form IT-201-ATT, line 10)	53	.00]	
54	Subtract line 53 from line 52 (if line 53 is more than			1	
	line 52, leave blank)	54	.00	ļ	
54a	MCTMT net earnings				
	base for Zone 1 54a .00				
54b	MCTMT net earnings				
	base for Zone 2 54b .00			1	
		54c	.00	-	
	MCTMT for Zone 2		.00		See instructions to compute
	Total MCTMT (add lines 54c and 54d)		.00	-	the MCTMT for each zone.
	Yonkers resident income tax surcharge	55	.00		
	Yonkers nonresident earnings tax (Form Y-203)	56	.00		
	Part-year Yonkers resident income tax surcharge (Form IT-360.1)		.00		
58	Total New York City and Yonkers taxes / surcharges and M	СТМТ	(add lines 54 and 54e through 57)	58	.00
59	Sales or use tax (do not leave blank)			59	0.00
60	Voluntary contributions (Form IT-227, Part 2, line 1)			60	.00
61	Total New York State, New York City, Yonkers, and sale voluntary contributions (add lines 46, 58, 59, and 60)			61	2697.00
	,				



	e 4 of 4 IT-201 (2023)	Your Social Se	curity number		
62	Enter amount from line 61	00	0000000		62 2697.00
(Payments and refundable credits)					
63	Empire State child credit		63	.00	
	NYS/NYC child and dependent care credit		64	.00	
65	NYS earned income credit (EIC)		65	.00	
66	NYS noncustodial parent EIC		66	.00	
	Real property tax credit		67	.00	
	College tuition credit		68	.00	
	NYC school tax credit (fixed amount) (also complete			.00	
	NYC school tax credit (rate reduction amount)		69a	.00	
	NYC earned income credit		70	.00	
	This line intentionally left blank		70a		If applicable, complete Form(s) IT-2
	Other refundable credits (Form IT-201-ATT, line 1 Total New York State tax withheld	· ·	71	and	and/or IT-1099-R and submit them
	Total New York City tax withheld		72	.00	with your return.
74	Total Yonkers tax withheld		74	.00	Do not send federal Form W-2
75	Total estimated tax payments and amount paid with			2000.00	with your return.
					76 2000.00
70	Total payments (add lines 63 through 75)				76 2000.00
Your refund, amount you owe, and account information					
	Amount overpaid (if line 76 is more than line 62			,	.00
78	Amount of line 77 available for refund (subtrac TIP: Use this amount to check your refund s				78 .00
78a	Amount of line 78 that you want to deposit into a NYS	529 account	(Form IT-195, line	4) (also submit Form IT-195)	78a 00
78b	Total refund after NYS 529 account deposit (su	ıbtract line 78	Ba from line 78)		78b .00
		t deposit to	checking or	- or - paper	Refund? Direct deposit is the
70		•	(fill in line 83)	- or - Check	easiest, fastest way to get your
19	Amount of line 77 that you want applied to you estimated tax (see instructions)		79	.00	refund.
80	Amount you owe (if line 76 is less than line 62, so				See instructions for payment options.
	funds withdrawal, mark an X in the box				
	or money order you must complete Form IT				
81	or money eracity ou made complete r erm m	-201-V and	mail it with yo		80 697.00
	Estimated tax penalty (include this amount in line		mail it with yo		80 697.00
		80 or	81		See instructions for the proper
82	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest	80 or	81 82	ur return.	
82	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electro	80 or onic funds v	81 82 withdrawal.	ur return	See instructions for the proper assembly of your return.
82 83	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electrr If the funds for your payment (or refund) would	80 or onic funds v I come from	81 82 withdrawal. (or go to) an	ur return	See instructions for the proper assembly of your return.
82 83	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electro	80 or onic funds v I come from	81 82 withdrawal.	ur return	See instructions for the proper assembly of your return.
82 83	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electrr If the funds for your payment (or refund) would	80 or onic funds v I come from - Pers	81 82 withdrawal. (or go to) an	ur return	See instructions for the proper assembly of your return.
82 83	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or -	80 or onic funds v I come from - Pers	81 82 withdrawal. (or go to) an sonal savings	ur return	See instructions for the proper assembly of your return.
82 83	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electron If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number	80 or onic funds v I come from - Pers	81 82 withdrawal. (or go to) an sonal savings 3c Account num	ur return	See instructions for the proper assembly of your return.
82 83 84	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal	80 or onic funds v I come from - Pers	81 82 withdrawal. (or go to) an sonal savings 3c Account num	ur return	See instructions for the proper assembly of your return.
82 83 84	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electrin If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.)	80 or onic funds v I come from - Pers	81 82 withdrawal. (or go to) an sonal savings 3c Account num	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electro If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) No Print designee's name Email: Preparer s NYTPR	80 or onic funds v I come from - Pers - 8: Date	81 82 withdrawal. (or go to) an sonal savings 3c Account number of the same of	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) No Print designee's name Email:	80 or onic funds v come from - Pers	81 82 withdrawal. (or go to) an sonal savings 3c Account number of the second se	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) Demail: Taid preparer must complete V Preparer's NYTPR See instructions	80 or onic funds v come from - Pers	81 82 withdrawal. i (or go to) an sonal savings 3c Account num //TPRIN rcl. code	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) is No Print designee's name Email: Preparer's NYTPR arer's signature Preparer's prints s name (or yours, if self-employed)	80 or onic funds v come from - Pers - Pers - Date IN NY ted name Preparer's PT	81 82 withdrawal. i (or go to) an sonal savings 3c Account num //TPRIN rcl. code	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes Firm	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electric If the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) is No Print designee's name Email: Preparer's NYTPR arer's signature Preparer's prints s name (or yours, if self-employed)	80 or onic funds v come from - Pers - Pers - Date IN NY ted name Preparer's PT	81 82 withdrawal. (or go to) an sonal savings 3c Account number //TPRIN cl. code IN or SSN ntification number	ur return	See instructions for the proper assembly of your return.
82 83 84 des Yes Firm'	Estimated tax penalty (include this amount in line reduce the overpayment on line 77) Other penalties and interest Account information for direct deposit or electron if the funds for your payment (or refund) would 83a Account type: Personal checking - or 83b Routing number Electronic funds withdrawal Third-party ignee? (see instr.) Email: Yaid preparer must complete ▼ Preparer's NYTPR see instructions) arer's signature s name (or yours, if self-employed)	80 or onic funds v I come from - Pers - R: Date IN NY ex ted name Preparer's PT Employer iden	81 82 withdrawal. (or go to) an sonal savings 3c Account number //TPRIN cl. code IN or SSN ntification number	ur return	See instructions for the proper assembly of your return.

See instructions for where to mail your return.