

Identifying number as shown on return



Names as shown on return

## **New York State Resident Credit**

Tax Law - Section 620

(subtract line 17 from line 16) .....

**19** New York State adjustments (see instructions).....

**20** New York State adjusted gross income (see instructions)

21 Capital gain portion of lump-sum distributions (see instr.)

22 Add lines 20 and 21 .....

Complete this form if you want to claim a resident credit for taxes paid to another state, local government, or the District of Columbia.

Submit this form with Form IT-201, IT-203, or IT-205.	-		1		
Part 1 – Income and adjustments (see instructions)		A Amount reported on New York State return		B Amount sourced to and taxed by other taxing authority	
		Whole dollars only		Whole dollars only	
1 Wages, salaries, tips, etc.		.00	1	.00	
2 Taxable interest income		.00	2	.00	
3 Ordinary dividends	3	.00	3	.00	
4 Taxable refunds, credits, or offsets of state and local					
income taxes	4	.00	4	.00	
5 Alimony received	5	.00	5	.00	
6 Business income or loss		.00	6	-0	
7 Capital gain or loss		.00	7	.00	
8 Other gains or losses		.00	8	.00	
9 Taxable amount of IRA distributions	9	.00	9	-0	
10 Taxable amount of pensions and annuities	10	.00	10	.00	
11 Rental real estate, royalties, partnerships,					
S corporations, trusts, etc	11	.00	11	.00	
12 Farm income or loss	12	.00	12	.00	
13 Unemployment compensation	13	.00	13	.00	
14 Taxable amount of Social Security benefits	14	.00	14	-0	
15 Other income	15	.00	15	.0	
16 Add lines 1 through 15	16	.00	16	.0	
17 Total federal adjustments to income	17	.00	17	.0.	
18 Federal adjusted gross income		-			
, ,					

18

19

20

21

(continued on back)

.00

.00

.00

18

19

20

21

22

.00

.00

.00

.00



Par	rt 2 – Calculating your resident credit for taxes paid to another state, local	government, or the Distric	ct of Columbia
23	Enter the two-letter abbreviation of the other state, including the District of Columbia		
	where tax was paid (see instructions)	23	
	Also enter the locality name, if applicable Locality name:		
24	Enter the amount of income tax imposed on this year's return for the other state or		
	local government that was paid by the:		
24a	Taxpayer, including amounts paid on a group (composite)		
	return for the taxpayer (see instructions)	.00	
	If the taxes were paid on a group (composite) return, then mark an <b>X</b> in the box		
	Enter the group's EIN		
24h	Entity on behalf of the taxpayer that were substantially		
	similar to New York State's pass-through entity tax		
	(see instructions)	.00	
24	Total income tax imposed (add lines 24a and 24b)		00
24	Total income tax imposed (add lines 24a and 24b)	24	.00
25	New York Otata tax mayable (as instructions)	25	00
25	New York State tax payable (see instructions)	25	.00
26	Divide line 22, column B, by line 22, column A (round to the fourth decimal place; see inst	tructions) 26	
27	Multiply line 25 by line 26	27	.00
28	Enter amount from line 24 or line 27, whichever is less (see instructions)	28	.00
29	Total line 28 amounts from additional Forms IT-112-R and line 44 amounts from		
	Forms IT-112-C, if any (see instructions)	29	.00
30	Add lines 28 and 29	30	.00
Par	rt 3 – Application of Credit		
31	Tax due before credits (see instructions)	31	.00
	Other credits that you applied before this credit (see instructions)		.00
	Subtract line 32 from line 31		.00
	Enter the amount from line 30 or line 33, whichever is less (see instructions)		
34	Effet the amount from line 30 of line 33, whichever is less (see instructions)	34	.00
 Par	rt 4 – Information from your return filed with the other state, local govern	ment, or the District of Co	olumbia
	are not <b>required</b> to submit a copy of the return you filed with the other state or local	•	
	T-205. Submitting a copy of the other return is <b>optional</b> . However, you may be required to the other return as the other return well must expect this		ier return at a
iale	er date. Whether or not you submit a copy of the other return, you <b>must</b> complete this	section.	
35	Enter the total amount of tax withheld for and/or amount of estimated tax payments	made	
	to the other state, local government, or the District of Columbia (see instructions)		.00
36	Enter the amount of overpayment, if any, shown on the return you filed with the other		.00
	state, local government, or the District of Columbia (see instructions)		.00
37	Enter the balance due, if any, shown on the return you filed with the other state,		100
51	local government, or the District of Columbia (see instructions)	37	.00
	iodai governinent, or the District or Columbia (see instructions)		<b>.</b> 00

