

New York Information (Page 1 of 2)

| General Information: | | |
|--|--------------------|------------------|
| Resident county | | |
| School district name | | |
| School district code number | | |
| | Taxpayer | Spouse |
| Driver's license document ID (if issued by NY) | | |
| Did you make out of state, Internet or catalog purchases on which no sales tax was paid? | Yes | No |
| If Yes, enter the number of months the taxpayer maintained a permanent place of abode in NY | | 1 140 |
| Did you receive a property tax freeze credit? | Yes | No |
| If Yes, enter the amount Have you (or an entity of which you are an owner) been convicted of Bribery Involving Public Servants and | | |
| Related Offenses, Corrupting the Government, or Defrauding the Government? | Yes | No |
| Permanent Home Address if Different from Mailing Address: | | |
| Street | | |
| Apartment number | | |
| City ZIP code | | |
| Foreign country | | |
| Residency Information: | From (Mo/Da/Yr) | To (Mo/Da/Yr) |
| If you did not live in New York state for all of 2023, enter the dates you did live in New York | | |
| If you were not a resident of New York state for any of 2023, enter the number of days spent in the state | | |
| Were you a part-year resident and received New York State income during nonresidency period? | Yes | No |
| If only one spouse had New York income, indicate which spouse - Taxpayer or Spouse | | |
| | | |
| Do you still maintain these living quarters in New York? | Yes | No |
| Were New York State living quarters maintained for the entire year? | Yes | No |
| Were you a New York City resident for only part of the taxable year? | Yes | No |
| | From (Mo/Da/Yr) | To (Mo/Da/Yr) |
| If Yes, enter the dates you did live in New York City | | |
| Were you a Yonkers resident for only part of the taxable year? | Yes | No |
| | From (Mo/Da/Yr) | To (Mo/Da/Yr) |
| If Yes, enter the dates you did live in Yonkers | | |
| | | ī |
| Did you live in a nursing home during 2023? Did you reside in public housing or other residence completely exempted from real property taxes in 2023? | Yes Yes | No No |
| Did you reside in public housing or other residence completely exempted from real property taxes in 2025? | 165 | 1 140 |





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| Name of Designa | атео вепетісіагу | Social Security Number | Account Number | Contributed |
|--|--------------------------------|---|---|-------------|
| uld you like to allocate some or al | | | | |
| uld you like to allocate some or al | | | | |
| uld you like to allocate some or al | | | | |
| | I of your refund to a New York | : 529 College Savings Pro | gram? | |
| n code: | | No. O. de | A Normala | 2023 Amount |
| - College Savings Program Direct Plan | Routing Number | Plan Code | Account Number | Contribute |
| - Advisor Guided College | | | | |
| Savings Program | | | | |
| Alzheimer's Fund Olympic Fund (\$2 or \$4 if filing jo Prostate Cancer 9/11 Memorial Volunteer Firefighting Teen Health Education Veterans Remembrance Homeless Veterans | pintly) | Home Del Life Pass Gift to the ALS Rese School-Ba Gifts to Fo | nd ivered Meals for Seniors It On Fund Arts Fund arch and Education ased Health Centers and Banks Fund Lymphoma, and Myeloma Fund | |
| Mental Illness Anti-Stigma | | | State Campaign Finance Fund | |
| Women's Cancers Fund | | | olence Research Fund | |
| William B. Hoyt Memorial Childre | , | | nd Rescued Thoroughbred | |
| Trust Fund | | | Horse Aftercare | |
| Substance Use Disorder Educati | | | nd Rescued Standardbred | |
| Recovery Fund | I | | Horse Aftercare | |
| | | l l | | |
| veteraris fromes | | | | |
| Autism Fund | I | Gifts for th | ne State Library System ne and Tick-Borne Diseases on, Research, and Preventation | |



Wages and Salaries Earned in New York State or Yonkers:

If you worked in and out of New York State or Yonkers, please complete the following information for each job worked while a nonresident.

| | Job #1 | Job #2 |
|---|--------|--------|
| | T/S | T/S |
| Wagan anyand | | |
| Wages earned | | |
| Total days employed if less than full year | | |
| Saturdays and Sundays (not worked) | | |
| Holidays (not worked) | | |
| Sick leave | | |
| Vacation | | |
| Other nonworking days | | |
| Days worked outside state/city | | |
| Days worked at home | | |
| Select state/city: NY, Yonkers or NY/Yonkers | | |
| | Job #3 | Job #4 |
| | | |
| | T/S | T/S |
| | | 1/3 |
| | | 1/3 |
| Wages earned | | 1/3 |
| Total days employed if less than full year | | |
| 0 | | |
| Total days employed if less than full year | | |
| Total days employed if less than full year Saturdays and Sundays (not worked) | | |
| Total days employed if less than full year Saturdays and Sundays (not worked) Holidays (not worked) | | |
| Total days employed if less than full year Saturdays and Sundays (not worked) Holidays (not worked) Sick leave | | |
| Total days employed if less than full year Saturdays and Sundays (not worked) Holidays (not worked) Sick leave Vacation | | |
| Total days employed if less than full year Saturdays and Sundays (not worked) Holidays (not worked) Sick leave Vacation Other nonworking days | | |