

Change of City Resident Status City of New York • City of Yonkers Attach this form

Attach this form to Form IT-201 or Form IT-203

Name(s) as shown on return					Your s	ocial security nur	mber
						1 1	
Change of resident status — If you are married and filing separa	te N	w York State ret	urns	vou must each	Comr	Nete a	
separate Form IT-360.1 (see Instruction	ons in	IT-360.1-I, page 1).		•	Comp	nete a	
Check only one box: (A) U City of New York change of reside		•		•			
(B) City of Yonkers change of residen		•					
(C) City of New York and city of Yonk	ers C		nce -	 Complete the 	e entire	e form.	
		Column A		Column B		Column C	
•	Federal Income and		Amount of Column A for City of New York		Amount of Column A for		
Part I — New York Adjusted Gross Income		Adjustments			City of Yonkers		
(see instructions in IT-360.1-I, page 2)		(all sources)		Resident Period		Resident Period	
1 Wages, salaries, tips, etc	1						
2 Taxable interest income							
3 Dividend income					4		
4 Taxable refunds, credits, or offsets of state and local income taxes							
5 Alimony received	5						
6 Business income or (loss) (attach copy of federal Schedule C or C-EZ)					\bot	ļ <u>.</u>	
7 Capital gain or (loss) (attach copy of federal Schedule D)					+	<u> </u>	_
8 Capital gain distributions not reported on line 7						ļ <u></u>	1
9 Other gains or (losses) (attach copy of federal Form 4797)						1	
10 Taxable amount of IRA distributions					_	ļ	
11 Taxable amount of pensions and annuities	11				<u> </u>		
12 Rents, royalties, partnerships, estates, trusts, etc. (attach copy of federal Schedule E)							
13 Farm income or (loss) (attach copy of federal Schedule F)	13					ļ	<u> </u>
14 Unemployment compensation	14				-		
15 Taxable amount of social security benefits	15				+	<u> </u>	
16 Other income Identify:	16					ļ	-
17 Total (add lines 1 through 16)	17						-
18 Total federal adjustments to income Identify:						:	
40 Outhorst line 40 form line 47. This is your feelest attended and a transfer	18				+	ļ	+
19 Subtract line 18 from line 17. This is your federal adjusted gross income					+		
20 New York adjustments (see instructions in IT-360.1-I, page 2, and attach schedule)	20						
21 Line 19 and add or subtract line 20; transfer the amount from	24				1		
Column B to line 45. This is your New York adjusted gross income	21			Column		Column	D .
Part II — Itemized Deductions for the City of New York (se	e ins	tructions in IT-360).1-I.	Itemized Dedu	-	Amount of Col	lumn A
page 2). If you are claiming the standard deduction, do	not	complete Part II.	,	(see instructi		for City of New Resident Pe	
22 Medical and dental expenses			22		T	1100.001111	1
23 Taxes you paid			23		 		
24 Interest you paid			24		1	<u> </u>	1
25 Gifts to charity							
26 Casualty and theft losses			26		1	1	1
27 Moving expenses			27				1
28 Job expenses and most other miscellaneous deductions			28				
29 Other miscellaneous deductions			29		1		\top
30 Add lines 22 through 29			30			1	
31 Reduction for federal itemized deduction limitation							
(from federal Form 1040 instructions, itemized deductions worksheet, lin	e 9) .		31			L	
32 Total itemized deductions (subtract line 31 from line 30)			32				
33 State, local and foreign income taxes and other subtraction adjustmen							
34 Subtract line 33 from line 32		•	34				
35 Addition adjustments (see instructions and attach schedule)			35				
36 Add lines 34 and 35	. 		36				I
37 Itemized deduction adjustment (if line 21, Column B, is more than \$100	<i>0,000</i> ,			_			
see instructions, page 3; all others enter "0" on line 37)					37		
26 Subtract line 27 from line 26 Column By transfer this amount to li	46	This is your item	.:	ala aluakia a		1	1

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Part II	II — Dependent Exemptions (see instructions in IT-360.1-I, page 3)				
	er the period you were a city of New York resident during 1992		 ,		
Fron	m: month day To: month				
0 Ente	er the county where you resided while a nonresident of the city of New York				
1 Ente	er the number of full months in the city of New York resident period			. 41	
2 Ente	er the prorated value of one dependent exemption (use the Proration Chart in IT-360	D.1-Ι, μ	page 2)	. 42	
3 Ente	er the number of dependent exemptions you claimed on Form IT-201, line 49 or Form	176			
4 Mult	tiply the amount on line 42 by the number of dependent exemptions claimed	m 11-2	:03, line 49	. 43	
	on line 43 (transfer this amount to line 48)			1	
				. 44	<u> </u>
art IV	- Part-Year City of New York Resident Tax (see instructions in IT-360.1-I,	page	3)		
5 New	York adjusted gross income (from line 21, Column B)				
6 Resi	dent period standard deduction (see instructions in IT-360 1-1, page 2) or				
1	resident period itemized deduction (from line 38)			46	
Oubi	ract line 40 from time 45			47	
, Dobe	machi exemption amount (irom line 44)			40	
Jubi	ract line 46 from line 47. This is your city of New York taxable income				
City	of New York credits (see instructions)			50	
2 Subti	of New York credits (see instructions)	• • • • •	• • • • • • • • • • • • • • • • • • •	51	
ti	ract line 51 from line 50 and enter tax on line 17 of Form IT-201-ATT or Form IT-203- han line 50, enter "0"). This is your part-year city of New York resident tax	ATT (if line 51 is larger		
			• • • • • • • • • • • • • • • • • • • •	52	<u>. </u>
art V	- Part-Year City of Yonkers Resident Income Tax Surcharge (see ins	truotia	ano in ITACO 4 I		4)
•	tax curonalge (see ins	i ucik	Full-Year	page	4) Part-Year
Takali	New York On a second	$\overline{}$	NYS Resident		NYS Resident
Total I Real I	New York State taxes (from Form IT-201, line 58)	53			
Subtra	property tax credit (from Form IT-214, line 17)	54			
Base	act line 54 from line 53 (if line 54 is larger than line 53, enter "0" on Form IT-201, lino 66).	55			
Other	tax (amount from Form IT-203, line 55) New York State credits (from Form IT-203, 4TT (56			
Subtra	New York State credits (from Form IT-203-ATT, front page, line 7)	57			
Other	Act line 57 from line 56 (if line 57 is larger than line 56, enter "0") New York State taxes (from Form IT-203-ATT, line 16)	58			
Add lii	nes 58 and 59	59			
Incom	e percentage (see worksheet in IT-360.1-I, page 4)				
Multip	ly line 55 by line 61. This is the net state tax for full-year state residents	61 62			
Multip	ly line 60 by line 61. This is the net state tax for part-year state residents	63			
	Yonkers resident tax rate			.15	
Part-ve	ar city of Yonkers resident income tay curebana (and the control of the control o	64		. 13	·
amount o	ar city of Yonkers resident income tax surcharge (multiply line 62 by line 64 and also enter this on Form IT-201, line 66; or multiply line 63 by line 64, and also enter this amount on Form IT-203, line 65).	e			
	. (and also enter this amount on Form 11-203, line 65)	65			

- See Form NYC-203, City of New York Nonresident Earnings Tax Return, and instructions, NYC-203-I, if
 you received wages or net earnings from self-employment from city of New York sources during your city
 nonresident period.
- See Form Y-203, City of Yonkers Nonresident Earnings Tax Return, and instructions, Y-203-I, if you
 received wages or net earnings from self-employment from city of Yonkers sources during your city
 nonresident period.