New York State Department of Taxation and Finance

Cradit for City of New York Unincornerated Duciness Tax

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		Print	Mailing address (number and street	t or rural	route)		Apartment n	umber			
			City, village or post office		Sta	ite	ZIP cod	e			
	No	te: F	Form IT-219 must be attack	hed to	your r	eturn, For	m IT-201, For	m IT-203,	or Form	n IT-205	
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		15.	
16	Enter the smaller amount from line 11 or 15 here and transfer the amount to Form IT-201-ATT, line 63	16.	l

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

	Worksheet A
1.	
2.	Individuals: Enter the amount from Form IT-360.1, Part I, line 6, column B (see instructions) 2.
	Trusts: Enter the amount from Form IT-205-A, Schedule 4, line 16, column C
3.	Individuals: Enter the amount from Form IT-360.1, line 6, column A (see instructions)
	Trusts: Enter the amount from Form IT-205-A, Schedule 4, line 16, column A 3.
4.	Divide line 2 by line 3 and carry the result to four decimal places
5.	Multiply line 1 by line 4. This is the part-year resident tax imposed on the unincorporated business. Estates and trusts:
	Include this amount in Worksheet C, line 6, column D total. All others: Transfer this amount to line 6 on the front page 5

	Worksheet B				
	Noncoloci D				
1.	Base percentage 65%			1	.650
2.	Enter your taxable income from front page, line 9	2.			
3.	Base amount	3.	\$42,000		
	Subtract line 3 from line 2				
5.	Divide line 4 by 200 and round to next highest whole number (for example, 464.2 = 465)	5.			
6.	Multiply line 5 by .001			6	
7.	Subtract line 6 from line 1. Transfer this decimal to the front page, line 10			7	•

— Worksheet C (for estates and trusts only) —

Nan	A ne and address of beneficiary	Beneficiary's i	B dentifying number	C Allocation percentage	D Beneficiary's eligible unincorporated business taxe
2					
\$					
•					
	5 Fiduciary				

