

Amended Resident Income Tax Return (short form)

New York State • New York City • Yonkers



IT-150-X

Print or type	Important: You must enter your social security number(s) in the boxes to the right.					
	Your first name and middle initial		Your last name <i>(for a joint return, enter spouse's name on line below)</i>			▼ Your social security number
	Spouse's first name and middle initial		Spouse's last name			▼ Spouse's social security number
	Mailing address <i>(number and street or rural route)</i>				Apartment number	New York State county of residence
	City, village, or post office		State	ZIP code	Country <i>(if not United States)</i>	
Permanent home address <i>(number and street or rural route)</i>						
				Apartment number	School district code number.....	
City, village, or post office		State	ZIP code	Country		School district name
				Decedent information	Taxpayer's date of death	Spouse's date of death
				NY		

- (A) Filing status — mark an X in one box:**
- ① Single
 - ② Married filing joint return *(enter spouse's social security number above)*
 - ③ Married filing separate return *(enter spouse's social security number above)*
 - ④ Head of household *(with qualifying person)*
 - ⑤ Qualifying widow(er) with dependent child

(C) Were you a **New York City** resident for all of 2010? *(Part-year residents must file Form IT-201-X.)* Yes No

(D) Can you be claimed as a dependent on another taxpayer's federal return? Yes No

(E) Enter your **2-character special condition code if applicable** *(see instructions)*
If applicable, also enter your second 2-character special condition code

(B) Did you file an amended federal return? *(see instructions)* Yes No

See the instructions, Form IT-150-X-I, for help completing your amended return.

		Dollars	Cents
1 Wages, salaries, tips, etc.	1.		
2 Taxable interest income	2.		
3 Ordinary dividends	3.		
4 Capital gain distributions	4.		
5 Taxable amount of IRA distributions. If received as a beneficiary, mark an X in the box <input type="checkbox"/>	5.		
6 Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box <input type="checkbox"/>	6.		
7 Unemployment compensation	7.		
8 Taxable amount of social security benefits <i>(also enter on line 17 below)</i>	8.		
9 Add lines 1 through 8	9.		
10 Total federal adjustments to income <i>Identify:</i> <input type="text"/>	10.		
11 Federal adjusted gross income <i>(subtract line 10 from line 9)</i>	11.		
12 Interest income on state and local bonds and obligations <i>(but not those of NYS or its local governments)</i>	12.		
13 Public employee 414(h) retirement contributions from your wage and tax statements	13.		
14 Other <i>Identify:</i> <input type="text"/>	14.		
15 Add lines 11 through 14	15.		
16 Pensions of NYS and local governments and federal government	16.		
17 Taxable amount of social security benefits <i>(from line 8 above)</i>	17.		
18 Pension and annuity income exclusion	18.		
19 Other <i>Identify:</i> <input type="text"/>	19.		
20 Add lines 16 through 19	20.		
21 New York adjusted gross income <i>(subtract line 20 from line 15)</i>	21.		
22 New York standard deduction	22.	0 0	0 0
23 Dependent exemptions	23.	0 0 0	0 0 0
24 Add lines 22 and 23	24.	0 0	0 0 0
25 Taxable income <i>(subtract line 24 from line 21)</i>	25.		

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You must file all three pages of this original scannable amended return with the Tax Department.

State Income Tax Return Forms

You can prepare and efile this tax form on efile.com as part of your current Federal and/or State Tax Return on from:

Early January until mid October

[You can start, prepare, and efile your tax return now](#)

You will just need to answer a few tax questions and the efile.com tax preparation software will select the correct tax forms for you.



Attention

If you missed the mid October efile deadline for the current tax year you have the following options to prepare and file your tax return:

1. You can download the State Tax form here:

<http://www.efile.com/support-state-tax-agency-list/>

2. Work online on your tax return with an efile Tax Professional

[Start working with a LIVE TaxPRO](#)

3. Download Federal tax forms by tax year, complete and mail to the IRS

[Download Federal Tax Forms](#)

Free Tax Tools, Calculators and Educators

Head of Household Educator:

<http://www.efile.com/claim-head-of-household-single-qualifying-person-requirement-tax-tool/>

Qualifying Child Dependent Educator:

<http://www.efile.com/qualifying-child-test-qualified-dependent-tax-tool/>

Qualifying Relative Educator:

<http://www.efile.com/qualifying-relative-test-dependent-requirement-tax-tool/>

Earned Income Tax Credit Educator:

<http://www.efile.com/what-is-the-earned-income-tax-credit-eitc-eic-eligibility-schedule-calculator/>

Child Tax Credit Educator:

<http://www.efile.com/how-to-qualify-for-child-tax-credit-deduction-requirements-tool/>

Got Tax Questions? [Contact efile.com!](#)

▼ Enter your social security number

[Social Security Number Input Box]

Dollars Cents

26	Taxable income (enter the amount from line 25 on the front page)	26.		.	
27	New York State tax on line 26 amount	27.		.	
28	New York State (NYS) household credit	28.		.	
29	Subtract line 28 from line 27 (if line 28 is more than line 27, leave blank)	29.		.	
30	New York City (NYC) resident tax	30.		.	
31	NYC household credit	31.		.	
32	Subtract line 31 from line 30 (if line 31 is more than line 30, leave blank)	32.		.	
33	Yonkers resident income tax surcharge	33.		.	
34	Yonkers nonresident earnings tax (attach Form Y-203)	34.		.	
35	Sales or use tax as reported on your original return (see instructions). Do not leave line 35 blank.	35.		.	
36	Voluntary contributions as reported on your original return (or as adjusted by the Tax Department; see instr.)				
	Fund a 36a.				
	Fund b 36b.				
	Fund c 36c.				
	Fund d 36d.				
	Fund e 36e.				
	Fund f 36f.				
	Fund g 36g.				
	Fund h 36h.				

Total (or as adjusted by the Tax Department) 36. [] . 0 0

37. [] . []

37	Add line 29 and lines 32 through 36	37.		.	
38	Empire State child credit (attach Form IT-213)	38.		.	
39	NYS/ NYC child and dependent care credit (attach Form IT-216)	39.		.	
40	NYS earned income credit (attach Form IT-215 or Form IT-209)	40.		.	
41	NYS noncustodial parent earned income credit (attach Form IT-209)	41.		.	
42	Real property tax credit (attach Form IT-214)	42.		.	
43	College tuition credit (attach Form IT-272)	43.		.	
44	NYC school tax credit	44.		.	
45	NYC earned income credit (attach Form IT-215 or Form IT-209)	45.		.	
46	Total New York State tax withheld	46.		.	
47	Total New York City tax withheld	47.		.	
48	Total Yonkers tax withheld	48.		.	
49	Total estimated tax payments / Amount paid with Form IT-370	49.		.	
50	Amount paid with original return, plus additional tax paid after original return was filed (see instructions)	50.		.	
51	Total payments (add lines 38 through 50)	51.		.	
52	Overpayment, if any, as shown on original return or previously adjusted by New York State (see instructions)	52.		.	
52a	Amount from original Form IT-150, line 53 (see instructions)	52a.		.	
53	Subtract line 52 from line 51	53.		.	

See Important information in the instructions.

54 If line 53 is more than line 37, subtract line 37 from line 53 and indicate how you want your refund (mark one):
 direct deposit (fill in line 56) or paper check refund 54. [] . []

55 Amount you owe (if line 53 is less than line 37, subtract line 53 from line 37; see instructions) 55. [] . []

56 Account information for direct deposit (see instructions)

Note: If the funds for your refund would go to an account outside the U.S., mark an X in this box (see instructions)

56a Routing number • []

56b Account number • []

56c Account type • Checking • Savings

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57 Reason(s) for amending your return (mark an X in all applicable boxes; see instructions)

- 57a. Federal audit change (complete lines 58 through 65 below) 57b. Workers' compensation 57c. Court ruling
 57d. Wages 57e. Military 57f. Credit claim
 57g. Other (Explain) _____



If you marked an X in box 57a above, you must complete lines 58 through 65 below. All others may skip lines 58 through 65 and go directly to the Third-party designee question. You must sign your amended return below.

58 Enter the date (mm-dd-yyyy) of the final federal determination (Explain) _____

59 Do you concede the federal audit changes? (If No, explain below.) Yes No

60 List federal changes

	Dollars	Cents
60a		
60b		
60c		
60d		
60e		

61 Net federal changes (increase or decrease) **61.**
 62 Federal taxable income (mark an X in one box) Per return Previously adjusted **62.**
 63 Corrected federal taxable income **63.**

64 Federal credits disallowed Earned income credit Amount disallowed
 Child care credit Amount disallowed

65 Federal penalties assessed
 65a. Fraud 65b. Negligence 65c. Other (explain below)

Third-party designee? (see instr.) Yes <input type="checkbox"/> No <input type="checkbox"/>	Print designee's name	Designee's phone number ()	Personal identification number (PIN)
	E-mail:		<input type="text"/>

▼ Paid preparer must complete (see instructions) ▼ Preparer's signature Firm's name (or yours, if self-employed) Address E-mail:	Date: ▶ Preparer's NYTPRIN ▼ Preparer's PTIN or SSN ● Employer identification number Mark an X if self-employed <input type="checkbox"/>
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▼ Taxpayer(s) must sign here ▼ Your signature Your occupation ● Spouse's signature and occupation (if joint return) Date E-mail:	▼ Daytime phone number <input type="text"/>
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See instructions for where to mail your return.

