Hi Mark,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Deluxe:

Your Head Start On Next Year:

When you come back next year, taxes will be so easy! We'll have all your information saved and ready to transfer in to your new return. We'll ask you questions about what changed since we last talked, and we'll be ready to get you the credits and deductions you deserve, no matter what life throws at you.

Here's the final wrap up for your 2011 taxes:

Your federal refund is: $ 2,896.00

Your Guarantee of Accuracy:

Breathe easy. The calculations on your return are backed with our 100% Accuracy Guarantee.

- We double checked your return for errors along the way.
- We helped with step-by-step guidance to get your answers on the right IRS forms.
- We made sure you didn't miss a deduction even if something in your life changed, like a new job, new house - or more kids!

Also included:

- We e-filed your federal returns for free, so you could get your refund in as few as 7 days.
- We provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.

Electronic Filing Instructions for your 2011 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.

Mark T Hazel
214 whittier Rd
rochester, NY 14624-0000

Balance Due/ Refund	Your federal tax return (Form 1040EZ) shows a refund due to you in the amount of $2,896.00. Your tax refund should be direct deposited into your account within 7 to 14 days after your return is accepted. The account information you entered - Account Number: 0024018617 Routing Transit Number: 222371863.
Where's My Refund?	Before you call the Internal Revenue Service with questions about your refund, give them 7 to 14 days processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the Internal Revenue Service directly at 1-800-829-4477. You can also check www.irs.gov and select the "Where's my refund?" link.
No Signature Document Needed	No signature form is required since you signed your return electronically.
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return

2011 Federal Tax Return Summary

Adjusted Gross Income	$	56,749.00
Taxable Income	$	47,249.00
Total Tax	$	7,931.00
Total Payments/Credits	$	10,827.00
Amount to be Refunded	$	2,896.00
Effective Tax Rate		13.98%

2011 Federal Tax Return Summary

Important: Your taxes are not finished until all required steps are completed.

TurboTax

Mark T Hazel
214 whittier Rd
rochester, NY 14624-0000

Balance Due/ Refund	Your federal tax return (Form 1040EZ) shows a refund due to you in the amount of $2,896.00. Your tax refund should be direct deposited into your account within 7 to 14 days after your return is accepted. The account information you entered - Account Number: 0024018617 Routing Transit Number: 222371863.
2011 Federal Tax Return Summary	Adjusted Gross Income $ 56,749.00 Taxable Income $ 47,249.00 Total Tax $ 7,931.00 Total Payments/Credits $ 10,827.00 Amount to be Refunded $ 2,896.00 Effective Tax Rate 13.98%
Forms Included	U.S. Individual Income Tax Return

Form **1040EZ**

Department of the Treasury—Internal Revenue Service

Income Tax Return for Single and Joint Filers With No Dependents (99) 2011

OMB No. 1545-0074

Your first name and initial	Last name	Your social security number
Mark T	Hazel	039-42-0131
If a joint return, spouse's first name and initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.	▲ Make sure the SSN(s) above are correct.
214 whittier Rd		

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

rochester NY 14624-0000

Foreign country name	Foreign province/county	Foreign postal code

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Income

Attach Form(s) W-2 here.

Enclose, but do not attach, any payment.

1	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	1	56,749.
2	Taxable interest. If the total is over $1,500, you cannot use Form 1040EZ.	2	
3	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	3	
4	Add lines 1, 2, and 3. This is your **adjusted gross income.**	4	56,749.
5	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. ☐ **You** ☐ **Spouse** If no one can claim you (or your spouse if a joint return), enter $9,500 if **single;** $19,000 if **married filing jointly.** See back for explanation.	5	9,500.
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your **taxable income.** ▶	6	47,249.

Payments, Credits, and Tax

7	Federal income tax withheld from Form(s) W-2 and 1099.	7	10,827.
8a	**Earned income credit (EIC)** (see instructions).	8a	
b	Nontaxable combat pay election. 8b		
9	Add lines 7 and 8a. These are your **total payments and credits.** ▶	9	10,827.
10	**Tax.** Use the amount on **line 6 above** to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	10	7,931.

Refund

Have it directly deposited! See instructions and fill in 11b, 11c, and 11d or Form 8888.

11a	If line 9 is larger than line 10, subtract line 10 from line 9. This is your **refund.** If Form 8888 is attached, check here ▶ ☐	11a	2,896.

▶ b Routing number 2 2 2 3 7 1 8 6 3 ▶ c Type: ☐ Checking ☒ Savings

▶ d Account number 0 0 2 4 0 1 8 6 1 7

Amount You Owe

12	If line 10 is larger than line 9, subtract line 9 from line 10. This is the **amount you owe.** For details on how to pay, see instructions. ▶	12	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Joint return? See instructions.

Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		IT support	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶ SELF PREPARED		Firm's EIN ▶		
Firm's address ▶		Phone no.		

Federal Information Worksheet 2011

► Keep for your records

Part I – Personal Information

Information in Part I is **completely calculated** from entries on Personal Information Worksheets.

Taxpayer:

First name . . . . Mark
Middle initial . . . . . . T Suffix . . . . . .
Last name . . . . Hazel
Social security no. . . 039-42-0131
Occupation . . . . . . IT support
Date of birth . . . . . . 03/20/1958 (mm/dd/yyyy)
or age as of 1-1-2012 53
Daytime phone . . . . (585)269-5377 Ext
Legally blind . . . . . . ☐
Date of death . . . . .

Dependent of Someone Else:
Can taxpayer be claimed as dependent of another person (such as parent)? . . ☐ Yes ☒ No
If yes, **was** taxpayer claimed as dependent on that person's return? . . . . ☐ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):
Is the taxpayer retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:
Does the taxpayer want $3 to go to the Presidential Election Campaign Fund? . . ☐ Yes ☒ No

Spouse:

First name . . . .
Middle initial . . . . . . Suffix . . . . .
Last name . . . .
Social security no. . . .
Occupation . . . .
Date of birth . . . . . . (mm/dd/yyyy)
or age as of 1-1-2012 .
Daytime phone . . . . . Ext
Legally blind . . . . . ☐
Date of death . . . . . .

Dependent of Someone Else:
Can spouse be claimed as dependent of another person (such as parent)? . . ☐ Yes ☐ No
If yes, **was** spouse claimed as dependent on that person's return? . . . . ☐ Yes ☐ No

Credit for the Elderly or Disabled (Schedule R):
Is the spouse retired on total and permanent disability? . . ☐ Yes ☐ No

Presidential Election Campaign Fund:
Does the spouse want $3 to go to the Presidential Election Campaign Fund? . . ☐ Yes ☐ No

Part II – Address and Federal Filing Status (enter information in this section)

Address . . . . . . 214 whittier Rd Apt no. . .
City. . . . . rochester State . . . . NY ZIP code . . 14624-0000
Foreign province/county Foreign postal code
Foreign code . . . Foreign country . . .

APO/FPO/DPO address, check if appropriate . . . . APO ☐ FPO ☐ DPO ☐

Home phone . . .
Check to print phone number on Form 1040 . . . . ☐ Home ☐ Taxpayer daytime ☐ Spouse daytime
Check if you were affected by a natural disaster in 2011 . . . . ☐

Federal filing status:

☒ **1** Single
☐ **2** Married filing jointly
☐ **3** Married filing separately
Check this box if you **did not** live with your spouse at any time during the year . . . . ► ☐
Check this box if you are eligible to claim your spouse's exemption (see Help) . . . . ► ☐
☐ **4** Head of household
If the 'qualifying person' is your child but **not** your dependent:
Child's name Child's social security number
☐ **5** Qualifying widow(er)
Check the appropriate box for the year your spouse died . . . . 2009 ► ☐
2010 ► ☐

Part III – Dependent/Earned Income Credit/Child and Dependent Care Credit Information

Information in Part III is completely calculated from entries on Dependent/Nondependent Info Worksheets.

First name / Last name	MI / Suff	Social security number / Relationship	Date of birth (mm/dd/yyyy) / Age	Code	**Not** qual for child tax cr	Qualified child/dep care exps incurred and paid 2011	EIC	Lived with taxpyr in U.S.	Educ Tuitn and Fees	* Dep

* "Yes" - qualifies as dependent, "No" - does not qualify as dependent

Part IV — Earned Income Credit Information (you must answer these questions to calculate EIC)

Is the taxpayer or spouse a qualifying child for EIC for another person? . . . . ► ☐ Yes ☐ No

Was the taxpayer's (and spouse's if married filing jointly) home in the United States for more than half of 2011? . . . . . ► ☐ Yes ☐ No

If the SSN of the taxpayer, or spouse if married filing jointly, was obtained to get a federally funded benefit, such as Medicaid, and the Social Security card contains the legend **Not Valid for Employment**, check this box (see Help) . . . . . . ► ☐

Check if you are filing head of household **and** your spouse is a nonresident alien **and** you lived with your spouse during the last six months of 2011 . . . . ► ☐

Was EIC disallowed or reduced in a previous year and are you required to file Form 8862 this year? . . . . . ► ☐ Yes ☐ No

Check if you were notified by the IRS that EIC cannot be claimed in 2011 . . . . ► ☐

Part V — Direct Deposit or Direct Debit Information (not applicable for Form 9465)

Do you want to elect **direct deposit** of any federal tax refund? . . . . ► X Yes ☐ No

Do you want to elect **direct debit** of federal balance due (Electronic filing only)? . . . ► ☐ Yes X No

If you selected either of the options above, fill out the information below:

Name of Financial Institution (optional) . . . . . . ► ESL Federal Credit Union

Check the appropriate box . . . . ► Checking ☐ Savings X

Routing number . . . . . . ► 222371863 Account number . . . . . ► 0024018617

Enter the following information only if you are requesting direct debit of balance due:

Enter the payment date to withdraw from the account above . . . . ► ______

Balance-due amount from this return . . . . ► ______

Part VI — Additional Information for Your Federal Return

Standard Deduction/Itemized Deductions:

Check this box if you are itemizing for state tax or other purposes even though your itemized deductions are less than your standard deduction . . . . . ► ☐

Check this box if you are married filing separately and your spouse itemized deductions . . . . ► ☐

Check this box to take the standard deduction even if less than itemized deductions . . . . ► ☐

Main Form Selection:

Check this box to calculate Form 1040 even if you qualify to use Form 1040A or 1040EZ. . . . . ► ☐

Real Estate Professionals:

Do you or your spouse qualify for the special passive activity rules for taxpayers in real property business? (see Help) . . . . . ► ☐ Yes ☐ No

Credit for Qualified Retirement Savings Contributions (Form 8880):

Is the taxpayer a full-time student? . . . . . ► ☐ Yes ☐ No

Is the spouse a full-time student? . . . . . ► ☐ Yes ☐ No

Foreign Tax Credit (Form 1116):

Check this box to file Form 1116 even if you're not required to file Form 1116 . . . . ► ☐

Resident country . . . . . ► USA

Excludable Income from Am. Samoa, Guam, Commonwealth of the N. Mariana Islands, or Puerto Rico:

Excludable income of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands . . . . . ______

Excludable income from Puerto Rico . . . . . ______

Dual Status Alien Return:

Check this box if you are a dual-status alien . . . . . ► ☐

Third Party Designee:

Caution: Review transferred information for accuracy.

Do you want to allow another person to discuss this return with the IRS? . . . . ► ☐ Yes ☐ No

If Yes, complete the following:

Third party designee name . . . . ► ______

Third party designee phone number . . ► ______

Personal Identification number (enter any 5 numbers) . . ► ______

If you are entitled to a filing extension or other disaster relief provision as declared by the IRS, enter the appropriate information (see Help) . . . . ► ______

Part VII — State Filing Information

Taxpayer:

Enter the taxpayer's state of residence as of December 31, 2011 . . . . ► NY

Check the appropriate box:

Taxpayer is a resident of the state above for the entire year . . . . ► X

Taxpayer is a resident of the state above for only part of year . . . . ►

Date the taxpayer established residence in state above . . . . ►

In which state (or foreign country) did the taxpayer reside before this change? . . . . ►

Spouse:

Enter the spouse's state of residence as of December 31, 2011 . . . . ►

Check the appropriate box:

Spouse is a resident of the state above for the entire year . . . . ►

Spouse is a resident of the state above for only part of year . . . . ►

Date the spouse established residence in state above . . . . ►

In which state (or foreign country) did the spouse reside before this change? . . . . ►

Nonresident states:

Nonresident State(s)	Taxpayer/Spouse/Joint

Check this box if you are in a Registered Domestic Partnership, a civil union, or same-sex marriage . . . ►

If you checked the box on the line above, also check the appropriate box below:

Check if this is your individual federal return you are filing with the IRS . . . . ►

Check if this is the joint return created to file joint state tax return (see Help) . . . . ►

Personal Information Worksheet 2011
For the Taxpayer

► Keep for your records

QuickZoom to another copy of Personal Information Worksheet . . . . ►
QuickZoom to Federal Information Worksheet . . . . ►

Part I — Taxpayer's Personal Information

First name . . . Mark Middle initial . T Last name . . Hazel
Suffix . . . . .
Social security no. . . 039-42-0131 Member of U.S. Armed Forces in 2011? . . [ ] Yes [ ] No

Date of birth . . . . . . 03/20/1958 (mm/dd/yyyy) age as of 1-1-2012 53

Occupation . . . . IT support Daytime phone . . . . (585)269-5377 Ext

Marital status . . . Single
If widowed, check the appropriate box for the year your spouse died:
After 2011 ► [ ] 2011 ► [ ] 2010 ► [ ] 2009 ► [ ] Before 2009 ► [ ]

Are you retired on total and permanent disability? (for Schedule R, see Help). . . . . . ► [ ] Yes [ ] No
Check if this person is legally blind . . . . ► [ ]
If deceased, enter the date of death . . . . ► (mm/dd/yyyy)

Were you under the age of 16 as of 1-1-2012 and this is the first year you are filing a tax return? . . . . ► [ ] Yes [ ] No

Do you want $3 to go to Presidential Election Campaign Fund? . . . . ► [ ] Yes [X] No

Part II — Questions for Individuals Who Could Be Or Are Dependents of Another Taxpayer

1 **Can** someone (such as your parent) claim you as a dependent? . . . . ► [ ] Yes [X] No
2 If you answered 'Yes' to question 1, are you actually claimed as a dependent on that person's tax return?. . . . . ► [ ] Yes [ ] No
Questions 3 through 5 are only required for individuals who claim the American Opportunity Credit.
3 Were you a full-time student during any part of five months during 2011? . . . . . ► [ ] Yes [ ] No
4 Did your earned income exceed one-half of your support? . . . . ► [ ] Yes [ ] No
5 Was at least one of your parents alive on December 31, 2011?. . . . . ► [ ] Yes [ ] No

Part III — Taxpayer's State Residency Information

Enter this person's state of residence as of December 31, 2011 . . . . NY
Check the appropriate box:
This person is a resident of the state above for the entire year . . . . [X]
This person is a resident of the state above for only part of year . . . . [ ]
Date this person established residence in state above . . . . ►
In which state (or foreign country) did this person reside before this change? . . . . ►

Part IV — Dependent Care Expenses

Qualified dependent care expenses incurred and paid for this person in 2011 . . . .

Form **W-2** | **Wage and Tax Statement** | **2011**

► Keep for your records

Name: Mark T Hazel

Social Security Number: 039-42-0131

☐ **Spouse's W-2**
☐ **Do not transfer this W-2 to next year**

Military: Complete **Part VI** on Page 2 below

a Employee's social security No . 039-42-0131
b Employer's ID number 02-0728173
c Employer's name, address, and ZIP code
ITT SPACE SYSTEMS LLC
PO Box 60488
Street 1919 W. COOK ROAD
City FORT WAYNE
State IN ZIP Code 46818
Foreign Country

d Control number . 0000000040VVP

[X] **Transfer employee information from the Federal Information Worksheet**

e Employee's name
First Mark M.I. T
Last Hazel Suff.
f Employee's address and ZIP code
Street 214 whittier Rd
City rochester
State NY ZIP Code 14624-0000
Foreign Country

1 Wages, tips, other compensation: 56,748.58
2 Federal income tax withheld: 10,827.17
3 Social security wages: 56,748.58
4 Social security tax withheld: 2,383.44
5 Medicare wages and tips: 56,748.58
6 Medicare tax withheld: 822.85
7 Social security tips
8 Allocated tips
9
10 Dependent care benefits
11 Nonqualified plans
Distributions from sect. 457 and nonqualified plans *(Important, see Help)*
12 Enter box 12 below
13 ☐ Statutory employee
[X] Retirement plan
☐ Third-party sick pay
14 Enter box 14 below **after** entering boxes 18, 19, and 20.
NOTE: Enter box 15 **before** entering box 14.

Box 12 Code	**Box 12** Amount
C	18.74

If Box 12 code is:
A: Enter amount attributable to RRTA Tier 2 tax
M: Enter amount attributable to RRTA Tier 2 tax
P: Double click to link to Form 3903, line 4. . .
R: Enter MSA contribution for Taxpayer . . . / Spouse . . . .
W: Enter HSA contribution for Taxpayer . . . / Spouse . . . .
G: ☐ Employer is **not** a state or local government

Box 15 State	Employer's state I.D. no.	**Box 16** State wages, tips, etc.	**Box 17** State income tax
NY	020728173 9	56,748.58	4,050.88

Box 20 Locality name	**Box 18** Local wages, tips, etc.	**Box 19** Local income tax	Associated State

Box 14 Description or Code on Actual Form W-2	Amount	TurboTax Identification of Description or Code (Identify this item by selecting the identification from the drop down list. If not on the list, select Other).

Earned Income Worksheet 2011

► Keep for your records

Name(s) Shown on Return	Social Security Number
Mark T Hazel	039-42-0131

Part I — Earned Income Credit Wks Computation	Taxpayer	Spouse	Total
1 If filing Schedule SE:			
a Net self-employment income			
b Optional Method and Church Employee income			
c Add lines 1a and 1b			
d One-half of self-employment tax			
e Subtract line 1d from line 1c			
2 If not required to file Schedule SE:			
a Net farm profit or (loss)			
b Net nonfarm profit or (loss)			
c Add lines 2a and 2b			
3 **If filing Schedule C or C-EZ as a statutory employee,** enter the amount from line 1 of that Schedule C or C-EZ			
4 Add lines 1e, 2c and 3. To EIC Wks, line 5			

Part II — Form 2441 and Standard Deduction Worksheet Computations

	Taxpayer	Spouse	Total
5 Net self-employment earnings (line 4 above)			
6 Wages, salaries, and tips less distributions from nonqualified or section 457 plans, etc	56,749.		56,749.
7 Taxable employer-provided adoption benefits			
8 Add lines 5 through 7. To Form 2441, lines 19 and 20	56,749.		56,749.
9 a Taxable dependent care benefits			
b Nontaxable combat pay			
10 Add lines 8, 9a and 9b . To Form 2441, lines 4 and 5	56,749.		56,749.
11 Scholarship or fellowship income not on W-2			
12 SE exempt earnings less nontaxable income			
13 Distributions from nonqualified/Sec. 457 plans			
14 Add lines 8, 9a and 11 through 13. To Standard Deduction Worksheet	56,749.		56,749.

Part III — IRA Deduction Worksheet Computation

	Taxpayer	Spouse	Total
15 Net self-employment income or (loss)			
16 Wages, salaries, tips, etc	56,749.		56,749.
17 Net self-employment loss			
18 Alimony received			
19 Nontaxable combat pay			
20 Foreign earned income exclusion			
21 Keogh, SEP or SIMPLE deduction			
22 Combine lines 15 through 21. To IRA Wks, ln 2	56,749.		56,749.

Part IV — Form 8812 and Child Tax Credit Line 11 Worksheet Computations

	Taxpayer	Spouse	Total
23 Self-employed, church and statutory employees			
24 Wages, salaries, tips, etc	56,749.		56,749.
25 Nontaxable combat pay			
26 Foreign earned income exclusion			
27 Combine lines 23 through 26. To Form 8812, line 4a & Line 11 Wks, line 2	56,749.		56,749.

Tax Payments Worksheet

2011

► Keep for your records

Name(s) Shown on Return	Social Security Number
Mark T Hazel	039-42-0131

Estimated Tax Payments for 2011 (If more than 4 payments for any state or locality, see Tax Help)

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/18/11		04/18/11			04/18/11		
2	06/15/11		06/15/11			06/15/11		
3	09/15/11		09/15/11			09/15/11		
4	01/17/12		01/17/12			01/17/12		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2011					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2011 extensions					

Taxes Withheld From:			Federal	State	Local
10 Forms W-2			10,827.	4,051.	
11 Forms W-2G					
12 Forms 1099-R					
13 Forms 1099-MISC and 1099-G					
14 Schedules K-1					
15 Forms 1099-INT, DIV and OID					
16 Social Security and Railroad Benefits					
17 Form 1099-B	St	Loc			
18 a Other withholding	St	Loc			
b Other withholding	St	Loc			
c Other withholding	St	Loc			
d Positive Adjustment . . .	St	Loc			
e Negative Adjustment . .	St	Loc			
19 **Total Withholding** Lines 10 through 18e			10,827.	4,051.	
20 **Total Tax Payments for 2011**			10,827.	4,051.	

Prior Year Taxes Paid In 2011 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2010 extensions				
22 2010 estimated tax paid after 12/31/10				
23 Balance due paid with 2010 return				
24 Other (amended returns, installment payments, etc) . .				

Schedule A
Lines 5 - 12

Tax and Interest Deduction Worksheet

► Keep for your records

2011

Name(s) Shown on Return: Mark T Hazel

Social Security Number: 039-42-0131

Tax Deductions

1 State and local taxes:

Optional Sales Tax Tables

a Available Income:

(1) Income from Form 1040, line 38	56,749.00
(2) Nontaxable income entered elsewhere on return	
(3) Available income: 2010 refundable credits in excess of tax	0.00
(4) **Enter** any additional nontaxable income	
(5) Total available income	56,749.00

b Sales Tax Per State of Residence:

Enter state in column (1), then enter total (combined) state and local sales tax rate in column (4).
Arizona, California, Colorado, New Jersey, New York or South Carolina only:
Double-click in column (4) to select your locality for each state entered.

(1) State	**(2)** Date Lived in State From	**(3)** Date Lived in State To	**(4)** **Enter** Total State & Local Rate (%)	**(5)** State Sales Tax Rate (%)	**(6)** Local Sales Tax Rate (%) (4) - (5)	**(7)** State Sales Tax Table Amount	**(8)** Local Sales Tax Amount	**(9)** Prorated or Total Amount

c Total general sales tax using tables

d Sales Tax Paid on Specific Items (see help):

(1) ST	**(2)** Total State & Local Rate	**(3)** Description	**(4)** Type	**(5)** Cost	**(6)** Rate if Different	**(7)** Actual Sales Tax Amount Paid	**(8)** Specific Item Deduction

e Total sales tax deduction on specific items	
f Total general sales tax per tables plus sales tax on specific items	
g **Actual State and Local General Sales Tax:** Actual sales taxes (enter the total sales taxes paid during the year on all items)	
h **State and Local Income Taxes:** State and Local Income taxes	4,051.00
i **State and Local Tax Deduction to Schedule A, line 5:** Greater of line 1f, line 1g, or line 1h (to Schedule A, line 5)	4,051.00

j Check a box to choose to use income taxes paid, sales taxes paid, or whichever provides the greater deduction:
Income Taxes [ ] Sales Taxes [ ] Greater amount [X]

2 Real estate taxes:

a Real estate taxes paid on principal residence **not** entered on Form 1098 b Real estate taxes paid on principal residence entered on Form 1098 . . . . ________

c Real estate taxes paid on additional homes or land . . . . ________

Personal portion of real estate taxes from Schedule E Worksheet for:

d Principal residence . . . . ________

e Vacation home . . . . ________

f Less real estate taxes deducted on Form 8829 . . . . ________

g Add lines 2a through 2f (to Schedule A, line 6) . . . . ________

3 **Personal property taxes:**

a Auto registration fees based on the value of the vehicle.

2010 Amount	Enter 2011 description:	
________	________	________
________	________	________
________	________	________
________	________	________

b Non-business portion of personal property taxes from Car & Truck Exp Wks . . . . . . ________

c Other personal property taxes . . . . ________

d Add lines 3a through 3c (to Schedule A, line 7) . . . . ________

4 **Other taxes:**

a Other taxes from Schedule(s) K-1 . . . . ________

b Foreign taxes from interest and dividends . . . . ________

c Foreign taxes from Schedule(s) K-1 . . . . ________

d Other foreign taxes (not used to claim a foreign tax credit). . . . . ________

e Other taxes.

2010 Amount	Enter 2011 description:	
________	________	________
________	________	________
________	________	________
________	________	________

f Add lines 4a through 4e (to Schedule A, line 8) . . . . ________

Interest Deductions

5 **Home mortgage interest and points reported on Form 1098:**

a Mortgage interest and points from the Home Mortgage Interest Worksheet . . . . ________

b Qualified mortgage interest from Schedule E Worksheet . . . . ________

c Less home mortgage interest/points deducted on Form 8829 . . . . ________

d Less home mortgage interest from Form 8396, line 3 . . . . ________

e Add lines 5a through 5d (to Sch A, line 10) or line A2 from above . . . . ________

6 **Home mortgage interest not reported on Form 1098:**

a Mortgage interest from the Home Mortgage Interest Worksheet. . . . . ________

b Less home mortgage interest deducted on Form 8829 . . . . ________

c Add lines 6a and 6b (to Sch A, line 11) or line B2 from above . . . . ________

7 **Points not reported on Form 1098:**

a Amortizable points from the Home Mortgage Interest Worksheet . . . . ________

b Other points not on Form 1098 from the Home Mortgage Interest Worksheet . . . . . . ________

c Less points deducted on Form 8829 . . . . ________

d Add lines 7a through 7c (to Schedule A, line 12) or line C2 from above . . . . ________

Schedule A
Lines 21, 23, 28

Miscellaneous Itemized Deductions Worksheeet

2011

► Keep for your records

Name(s) Shown on Return	Social Security Number
Mark T Hazel	039-42-0131

Employee Business Expenses — Subject to 2% Limitation

1	Deductible expenses from Form 2106, line 10 less deductions for performing artists and armed forces reservists claimed elsewhere	**1**	
2 a	Qualified Educator Expenses (from Educator Expenses Worksheet)	**2a**	
b	Educator Expense Deduction (from 1040, line 23)	**2b**	
c	Excess Educator Expenses (line 2a less line 2b)	**2c**	
3	Union and professional dues	**3**	
4	Professional subscriptions	**4**	
5	Uniforms and protective clothing	**5**	
6	Job search costs	**6**	
7	Other:	**7**	
8	Combine lines 1 through 7 (to Schedule A, line 21)	**8**	

Miscellaneous Expenses — Subject to 2% Limitation

Check the box in investment column if an investment expense

		Investment expense		
9	Depreciation and amortization deductions	X	**9**	
10	Casualty/theft losses of property used in services as an employee		**10**	
11	REMIC expenses, from Schedule E	X	**11**	
12	Investment expenses related to interest and dividend income	X	**12**	
13	Expenses related to portfolio income, from Schedule(s) K-1	X	**13**	
14	Miscellaneous deductions, from Schedule(s) K-1		**14**	
15	Excess deductions on termination, from Schedule(s) K-1		**15**	
16	Investment counsel and advisory fees	X	**16**	
17	Certain attorney and accounting fees	X	**17**	
18	Safe deposit box rental fees	X	**18**	
19	IRA custodial fees	X	**19**	
20	Loss incurred from total distribution of all traditional IRAs		**20**	
21	Loss incurred from total distribution of all Roth IRAs		**21**	
22	Hobby expense (limited to hobby income)		**22**	
23	Other:		**23**	
24	Combine lines 9 through 23 (to Schedule A, line 23)		**24**	

Other Miscellaneous Deductions — Not Subject to 2% Limitation

25	Expenses related to portfolio income, from Schedule(s) K-1	X	**25**	
26	Federal estate tax paid on decedent's income reported on this return		**26**	
27	Impairment-related expenses of a handicapped employee, from Form 2106		**27**	
28	Amortizable bond premiums on bonds acquired before 10/23/86		**28**	
29	Gambling losses		**29**	
30	Deduction for repayment of amounts under claim of right if over $3,000		**30**	
31	Casualty/theft losses of income-producing property		**31**	
32	Unrecovered investment in annuity		**32**	
33	Other:		**33**	
34	Combine lines 25 through 33 (to Schedule A, line 28)		**34**	

Form 1040

Forms W-2 & W-2G Summary

► Keep for your records

2011

Name(s) Shown on Return	Social Security Number
Mark T Hazel	039-42-0131

Form W-2 Summary

Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
	Non-statutory & statutory wages not on Sch C	56,749.		56,749.
	Statutory wages reported on Schedule C			
	Foreign wages included in total wages			
	Unreported tips			
2	Total federal tax withheld	10,827.		10,827.
3 & 7	Total social security wages/tips	56,749.		56,749.
4	Total social security tax withheld	2,383.		2,383.
5	Total Medicare wages and tips	56,749.		56,749.
6	Total Medicare tax withheld	823.		823.
8	Total allocated tips			
9	Not used			
10	Total dependent care benefits			
11	Total distributions from nonqualified plans			
12 a	Total from Box 12	19.		19.
b	Elective deferrals to qualified plans			
c	Roth contributions to 401(k) & 403(b) plans			
d	Deferrals to government 457 plans			
e	Deferrals to non-government 457 plans			
f	Deferrals 409A nonqual deferred comp plan			
g	Income 409A nonqual deferred comp plan			
h	Uncollected Medicare tax			
i	Uncollected social security and RRTA tier 1			
j	Uncollected RRTA tier 2			
k	Income from nonstatutory stock options			
l	Non-taxable combat pay			
m	Total other items from box 12	19.		19.
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	This line does not apply to TurboTax			
d	Total RR Tier 1 wages			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RRTA tips			
h	Total other items from box 14			
16	Total state wages and tips	56,749.		56,749.
17	Total state tax withheld	4,051.		4,051.
19	Total local tax withheld			

Federal Carryover Worksheet 2011

► Keep for your records

Name(s) Shown on Return	Social Security Number
Mark T Hazel	039-42-0131

2010 State and Local Income Tax Information (See Tax Help)

	(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With-held/Pmts	(e) Paid With Return	(f) Total Over-payment	(g) Applied Amount
	NY			4,128.		1,098.	
Totals . .				4,128.		1,098.	

Other Tax and Income Information		**2010**	**2011**
1 Filing status	**1**	1 Single	1 Single
2 Number of exemptions for blind or over 65 (0 - 4)	**2**		
3 Itemized deductions	**3**	4,128.	4,051.
4 Check box if required to itemize deductions	**4**	☐	☐
5 Adjusted gross income	**5**	57,540.	56,749.
6 Tax liability for Form 2210 or Form 2210-F	**6**	7,825.	7,931.
7 Alternative minimum tax	**7**		
8 Federal overpayment applied to next year estimated tax	**8**		

QuickZoom to the IRA Information Worksheet for IRA information . . . . ►

Excess Contributions		**2010**	**2011**
9 a Taxpayer's excess Archer MSA contributions as of 12/31	**9 a**		
b Spouse's excess Archer MSA contributions as of 12/31	**b**		
10 a Taxpayer's excess Coverdell ESA contributions as of 12/31	**10 a**		
b Spouse's excess Coverdell ESA contributions as of 12/31	**b**		
11 a Taxpayer's excess HSA contributions as of 12/31	**11 a**		
b Spouse's excess HSA contributions as of 12/31	**b**		

Loss and Expense Carryovers Note: Enter all entries as a positive amount		**2010**	**2011**
12 a Short-term capital loss	**12 a**		
b AMT Short-term capital loss	**b**		
13 a Long-term capital loss	**13 a**		
b AMT Long-term capital loss	**b**		
14 a Net operating loss available to carry forward	**14 a**		
b AMT Net operating loss available to carry forward	**b**		
15 a Investment interest expense disallowed	**15 a**		
b AMT Investment interest expense disallowed	**b**		
16 Nonrecaptured net Section 1231 losses from: **a** 2011	**16 a**		
b 2010	**b**		
c 2009	**c**		
d 2008	**d**		
e 2007	**e**		
f 2006	**f**		

Mark T Hazel 039-42-0131

Loss and Expense Carryovers (cont'd)		2010	2011
17 AMT Nonrecap'd net Sec 1231 losses from: a 2011	17 a		
b 2010	b		
c 2009	c		
d 2008	d		
e 2007	e		
f 2006	f		

Credit Carryovers		2010	2011
18 General business credit	18		
19 Mortgage interest credit from: a 2011	19 a		
b 2010	b		
c 2009	c		
d 2008	d		
20 Credit for prior year minimum tax	20		
21 District of Columbia first-time homebuyer credit	21		
22 Residential energy efficient property credit	22		

Other Carryovers		2010	2011
23 Section 179 expense deduction disallowed	23		
24 Excess foreign housing deduction: a Taxpayer (Form 2555, line 46)	24 a		
b Taxpayer (Form 2555, line 48)	b		
c Spouse (Form 2555, line 46)	c		
d Spouse (Form 2555, line 48)	d		

Charitable Contribution Carryovers

25 **2010** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2010				
b 2009				
c 2008				
d 2007				
e 2006				

26 **2011** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2011				
b 2010				
c 2009				
d 2008				
e 2007				

27 Amount overpaid less earned income credit	2,849.

2010 State Capital Loss Carryovers (For users **not** transferring from the prior year)

State ID	Short-term Capital Loss for State	AMT Short-term Capital Loss for State	Long-term Capital Loss for State	AMT Long-term Capital Loss for State	Capital Loss (combined) for State	AMT Capital Loss (combined) for State

Two-Year Comparison 2011

Name(s) Shown on Return: Mark T Hazel

Social Security Number: 039-42-0131

Income	2010	2011	Difference	%
Wages, salaries, tips, etc	57,540.	56,749.	-791.	-1.37
Interest and dividend income				
State tax refund	0.	0.	0.	
Business income (loss)				
Capital and other gains (losses)				
IRA distributions				
Pensions and annuities				
Rents and royalties				
Partnerships, S Corps, etc				
Farm income (loss)				
Social security benefits				
Income other than the above				
Total Income	57,540.	56,749.	-791.	-1.37
Adjustments to Income				
Adjusted Gross Income	57,540.	56,749.	-791.	-1.37
Itemized Deductions				
Medical and dental				
Income or sales tax	4,128.	4,051.	-77.	-1.87
Real estate taxes				
Personal property and other taxes				
Interest paid				
Gifts to charity				
Casualty and theft losses				
Miscellaneous				
Total Itemized Deductions	4,128.	4,051.	-77.	-1.87
Standard or Itemized Deduction	5,700.	5,800.	100.	1.75
Exemption Amount	3,650.	3,700.	50.	1.37
Taxable Income	48,190.	47,249.	-941.	-1.95
Income tax	8,225.	7,931.	-294.	-3.57
Additional income taxes				
Alternative minimum tax				
Total Income Taxes	8,225.	7,931.	-294.	-3.57
Nonbusiness credits				
Business credits				
Total Credits				
Self-employment tax				
Other taxes				
Total Tax After Credits	8,225.	7,931.	-294.	-3.57
Withholding	10,674.	10,827.	153.	1.43
Estimated and extension payments				
Earned income credit				
Additional child tax credit				
Other payments	400.		-400.	-100.00
Total Payments	11,074.	10,827.	-247.	-2.23
Form 2210 penalty				
Applied to next year's estimated tax				
Refund	2,849.	2,896.	47.	1.65
Balance Due				

Current year effective tax rate . . . 13.98 %

Tax History Report 2011

► Keep for your records

Name(s) Shown on Return
Mark T Hazel

	Five Year Tax History:				
	2007	2008	2009	2010	2011
Filing status	Single	Single	Single	Single	Single
Total income	55,214.	53,009.	57,819.	57,540.	56,749.
Adjustments to income					
Adjusted gross income	55,214.	53,009.	57,819.	57,540.	56,749.
Tax expense	3,944.	3,795.	4,158.	4,128.	4,051.
Interest expense					
Contributions					
Miscellaneous deductions					
Other Itemized Deductions					
Total itemized/ standard deduction	5,350.	5,450.	5,700.	5,700.	5,800.
Exemption amount	3,400.	3,500.	3,650.	3,650.	3,700.
Taxable income	46,464.	44,059.	48,469.	48,190.	47,249.
Tax	8,043.	7,363.	8,306.	8,225.	7,931.
Alternative min tax					
Total credits					
Other taxes					
Payments	10,727.	10,116.	10,925.	11,074.	10,827.
Form 2210 penalty					
Amount owed					
Applied to next year's estimated tax					
Refund	2,684.	2,753.	2,619.	2,849.	2,896.
Effective tax rate %	14.57	13.89	14.11	13.60	13.98
**Tax bracket %	25	25	25	25	25

**Tax bracket % is based on Taxable income.

Tax Summary **2011**

► Keep for your records

Name (s)	SSN
Mark T Hazel	039-42-0131

Total income	56,749.
Adjustments to income	
Adjusted gross income	56,749.
Itemized/standard deduction	5,800.
Exemption amount	3,700.
Taxable income	47,249.
Tentative tax	7,931.
Additional taxes	
Alternative minimum tax	
Total credits	
Other taxes	
Total tax	7,931.
Total payments	10,827.
Estimated tax penalty	
Amount Overpaid	2,896.
Refund	2,896.
Amount Applied to Estimate	
Balance due	0.

Which Form 1040 to file?

You have elected to file Form 1040EZ.

Compare to U. S. Averages 2011

► Keep for your records

Name(s) Shown on Return	Social Security No
Mark T Hazel	039-42-0131

Your 2011 adjusted gross income (AGI) . . . . 56,749.

National adjusted gross income range used below . . . . from 50,000. to 99,999.

Note: National average amounts have been adjusted for inflation. See Help for details.

Selected Income, Deductions, and Credits	Actual Per Return	National Average
Salaries and wages	56,749.	65,930.
Taxable interest		1,869.
Tax-exempt interest		8,178.
Dividends		3,000.
Business net income		17,016.
Business net loss		6,668.
Net capital gain		7,453.
Net capital loss		2,402.
Taxable IRA		15,112.
Taxable pensions and annuities		25,796.
Rent and royalty net income		9,372.
Rent and royalty net loss		9,867.
Partnership and S corporation net income		21,909.
Partnership and S corporation net loss		12,372.
Taxable social security benefits		16,067.
Medical and dental expenses deduction		7,626.
Taxes paid deduction	4,051.	6,554.
Interest paid deduction		10,631.
Charitable contributions deduction		2,911.
Total itemized deductions	4,051.	21,349.
Child care credit		547.
Education tax credits		1,296.
Child tax credit		1,708.
Retirement savings contributions credit		172.
Earned income credit		0.

Other Information	Actual Per Return	National Average
Adjusted gross income	56,749.	74,445.
Taxable income	47,249.	48,679.
Income tax	7,931.	6,047.
Alternative minimum tax		1,267.
Total tax liability	7,931.	6,372.

TurboTax

Audit Defense Order Confirmation

Thank you for choosing Audit Defense for your 2011 tax return. This service is provided by TaxResources, Inc. (TRI) an independent tax firm.

Name:	Mark T Hazel
Confirmation Number:	TTWGS6A114310602
Amount Paid:	39.95

When TRI defends your tax return during an IRS audit, you will have professional representation throughout the entire process.

TRI:

- Defends your 2011 tax return in an audit through the highest level of appeals
- Schedules and attends all audit appointments
- Reviews your tax return for additional problem areas
- Reviews your source documentation before the IRS sees it
- Handles all audit correspondence and makes all audit phone calls
- Prepares requests for appeals conferences and U.S. Tax Court Petition, if necessary
- Minimizes the financial impact of an audit

If you paid for Audit Defense by credit card:

1. You'll receive an email from TaxResources in two to five days notifying you that your membership has been processed
2. View and print your certificate at *http://intuit.taxaudit.com*
3. To ensure you receive your confirmation email, please add *AuditDefenseCertificates@taxaudit.com* to your email address book

If you choose to pay for Audit Defense with your tax refund (e-filed returns only):

1. You'll need notice that the IRS has accepted your efiled return and your refund has been processed
2. Two to five days after this, you'll receive an email from TaxResources notifying you that your membership has been processed
3. View and print your certificate at *http://intuit.taxaudit.com*
4. To ensure you receive your confirmation email, please add *AuditDefenseCertificates@taxaudit.com* to your email address book

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IMPORTANT: If you're **filing by mail** and **did not pay** for Audit Defense with a credit card, your order will not go through. We recommend going back and either efiling your return or paying by credit card.

If you receive an audit or tax notice from the IRS or state taxing agency, contact TRI immediately at 877-829-9695. TRI's customer service office hours are 9 to 5 p.m. PST, Monday through Friday. TRI must be your only contact with the IRS (please read the Audit Defense Membership Agreement).

For more information or to purchase Audit Defense for other tax returns, visit TRI's website at *http://intuit.taxaudit.com.*

TAXRESOURCES
INCORPORATED

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

Taxpayer: Mark T Hazel
Primary SSN: 039-42-0131

Federal Return Submitted: January 24, 2012 07:29 AM PST
Federal Return Acceptance Date: ___________

Your return was electronically transmitted on 01/24/2012

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.
The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:
For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 17, 2012. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on April 17, 2012, your Intuit electronic postmark will indicate April 17, 2012, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 17, 2012, and a corrected return is submitted and accepted before April 22, 2012. If your return is submitted after April 22, 2012, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2012. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2012, and the corrected return is submitted and accepted by October 20, 2012.

2. THE ACCEPTANCE DATE.
Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

Smart Worksheets from your 2011 Federal Tax Return

SMART WORKSHEET FOR: Form 1040EZ: Individual Tax Return

Earned Income Credit Smart Worksheet

A	Date of birth (mm/dd/yyyy) . . . . Taxpayer . 03/20/1958 Spouse . .	
B	Is the taxpayer or spouse a qualifying child for EIC for another person? . . . ►	Yes [ ] No [ ]
C	Was the taxpayer's (and spouse's if married filing jointly) home in the United States for more than half of 2011? . . . . ►	Yes [ ] No [ ]
D	If the SSN of the taxpayer, or spouse if married filing jointly, was obtained to get a federally funded benefit, such as Medicaid, and the Social Security card contains the legend **Not Valid for Employment**, check this box . . . . ►	[ ]
E	Check if EIC was disallowed or reduced in a previous year and taxpayer is required to file Form 8862 this year . . . . ►	[ ]
F	Check if notified by the IRS that EIC cannot be claimed in 2011. . . . . ►	[ ]

SMART WORKSHEET FOR: Misc Itemized Deductions Wks

Depreciation Smart Worksheet

A	Enter Section 179 carryover from prior year	
B	**QuickZoom** to the Asset Entry Worksheet . . . . ►	
C	**QuickZoom** to the Depreciation/Amortization Reports . . . . ►	
D	**QuickZoom** to Form 4562 for Schedule A. . . . . ►	
E	Treat all MACRS assets for activity as qualified Indian reservation property? . . .	[ ] Yes [X] No
F	Treat all assets acquired after Aug. 27, 2005 as qualified GO Zone property?	[ ] Regular [ ] Extension [X] No
G	Treat all assets acquired after May 4, 2007 as qualified Kansas Disaster Zone property?	[ ] Yes [X] No
H	Was this property located in a Qualified Disaster Area?	[ ] Yes [X] No

Electronic Filing Instructions for your 2011 New York Tax Return

Important: Your taxes are not finished until all required steps are completed.

MARK T HAZEL
214 WHITTIER RD
rochester, NY 14624-0000

Balance Due/ Refund	Your New York state tax return (Form IT-201) shows a refund due to you in the amount of $1,076.00. Your tax refund should be direct deposited into your account within 7 to 14 days after your return is accepted. The account information you entered - Account Number: 0024018617 Routing Transit Number: 222371863.
Where's My Refund?	Before you call the New York State Department of Taxation and Finance with questions about your refund, give them 7 to 14 days processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the New York State Department of Taxation and Finance directly at 1-518-457-5149. You can also visit the New York State Department of Taxation and Finance web site at http://www.nystax.gov/.
No Signature Document Needed	No signature form is required since you signed your return electronically.
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your state and federal returns
2011 New York Tax Return Summary	Taxable Income $ 49,249.00 Total Tax $ 2,975.00 Total Payments/Credits $ 4,051.00 Amount to be Refunded $ 1,076.00

2011 New York Tax Return Summary

Important: Your taxes are not finished until all required steps are completed.

MARK T HAZEL
214 WHITTIER RD
rochester, NY 14624-0000

Balance Due/ Refund	Your New York state tax return (Form IT-201) shows a refund due to you in the amount of $1,076.00. Your tax refund should be direct deposited into your account within 7 to 14 days after your return is accepted. The account information you entered - Account Number: 0024018617 Routing Transit Number: 222371863.

2011 New York Tax Return Summary	Taxable Income	$ 49,249.00
	Total Tax	$ 2,975.00
	Total Payments/Credits	$ 4,051.00
	Amount to be Refunded	$ 1,076.00

Forms Included	NY Resident Income Tax Return

New York State Department of Taxation and Finance

Resident Income Tax Return 2011 IT-201

New York State • New York City • Yonkers

For the full year January 1, 2011, through December 31, 2011, or fiscal year beginning

For help completing your return, see the instructions for Form IT-201. **and ending**

You must enter your date(s) of birth and social security number(s) below.

Your first name and middle initial	Your last name *(for a **joint return**, enter spouse's name on line below)*	Your date of birth *(MM-DD-YYYY)*	▼ Your social security number
MARK T	HAZEL	03-20-1958	039-42-0131
Spouse's first name and middle initial	Spouse's last name	Spouse's date of birth *(MM-DD-YYYY)*	▼ Spouse's social security number

Mailing address **(*see instructions, page 13*)** *(number and street or rural route)* — Apartment number — New York State county of residence

214 WHITTIER RD • MONR

City, village, or post office — State — ZIP code — Country *(if not United States)* — School district name

ROCHESTER NY 14624-0000 • SPENCERPORT

Permanent home address **(*see instructions, page 13*)** *(number and street or rural route)* — Apartment number — School district code number 614

City, village, or post office — State NY — ZIP code

Decedent information: Taxpayer's date of death • Spouse's date of death •

(A) Filing status — mark an *X* in one box:

① X 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

Staple check or money order here.

(B) Did you itemize your deductions on your 2011 federal income tax return? Yes No X

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

(D) E-file this return. Most taxpayers **must** now e-file *(see page 12)*

(E) (1) Did you or your spouse **maintain living quarters in NYC** during 2011 *(see page 14)*? Yes No X

(2) Enter the number of days spent in NYC in 2011 *(any part of a day spent in NYC is considered a day)*

(F) NYC residents and NYC part-year residents only *(see page 14)*:

(1) Number of months **you** lived in NYC in 2011 •

(2) Number of months **your spouse** lived in NYC in 2011 •

(G) Enter your **2-character special condition code if applicable** *(see page 14)*. •

If applicable, also enter your **second** 2-character special condition code. •

Federal income and adjustments

Only full-year New York State residents may file this form. For lines 1 through 18 below, enter your income items and total adjustments as they appear on your federal return (see page 15). Also see page 4 instructions for showing a loss.

			Dollars
1	Wages, salaries, tips, etc.	1.	56,749.
2	Taxable interest income	2.	
3	Ordinary dividends	3.	
4	Taxable refunds, credits, or offsets of state and local income taxes *(also enter on line 25)*	4.	
5	Alimony received	5.	
6	Business income or loss *(attach a copy of federal Schedule C or C-EZ, Form 1040)*	6.	
7	Capital gain or loss *(if required, attach a copy of federal Schedule D, Form 1040)*	7.	
8	Other gains or losses *(attach a copy of federal Form 4797)*	8.	
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an ***X*** in the box	9.	
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an ***X*** in the box	10.	
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. *(attach copy of federal Schedule E, Form 1040)*	11.	
12	Farm income or loss *(attach a copy of federal Schedule F, Form 1040)*	12.	
13	Unemployment compensation	13.	
14	Taxable amount of social security benefits *(also enter on line 27)*	14.	
15	Other income *(see page 15)* *Identify:*	15.	
16	Add lines 1 through 15	16.	56,749.
17	Total federal adjustments to income *(see page 15)* *Identify:*	17.	
18	**Federal adjusted gross income** *(subtract line 17 from line 16)*	18.	56,749.

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

▼ Enter your social security number

039-42-0131

				Dollars
19	**Federal adjusted gross income** *(from line 18 on the front page)*		19.	56,749.

New York additions *(see page 15)*

20	Interest income on state and local bonds and obligations (but not those of NY State or its local governments)		20.	
21	Public employee 414(h) retirement contributions from your wage and tax statements *(see page 16)*		21.	
22	**New York's** 529 college savings program distributions *(see page 16)*		22.	
23	Other *(see page 17)* *Identify:*		23.	
24	Add lines **19** through **23**		24.	56,749.

New York subtractions *(see page 20)*

25	Taxable refunds, credits, or offsets of state and local income taxes *(from line 4)*	25.		
26	Pensions of NYS and local governments and the federal government *(see page 20)*	26.		
27	Taxable amount of social security benefits *(from line 14)*	27.		
28	Interest income on U.S. government bonds	28.		
29	Pension and annuity income exclusion *(see page 20)*	29.		
30	**New York's** 529 college savings program deduction/earnings	30.		
31	Other *(see page 21)* *Identify:*	31.		
32	Add lines 25 through 31		32.	
33	**New York adjusted gross income** *(subtract line **32** from line **24**)*		33.	56,749.

Standard deduction or itemized deduction *(see page 25)*

34	Enter your **standard deduction** *(from table below)* **or** your **itemized deduction** *(from worksheet below)*. Mark an ***X*** in the appropriate box : ● X **Standard** **or** ● **Itemized**		34.	7,500.
35	Subtract line 34 from line 33 *(if line 34 is more than line 33, leave blank)*		35.	49,249.
36	Dependent exemptions *(not the same as total federal exemptions; see page 28)*		36.	
37	**Taxable income** *(subtract line 36 from line 35)*		37.	49,249.

New York State standard deduction table ◀ or ▶ New York State itemized deduction worksheet

Filing status *(from the front page)*	Standard deduction *(enter on line 34 above)*
① Single and you marked item C *Yes*	$ 3,000
① Single and you marked item C *No*	7,500
② Married filing joint return	15,000
③ Married filing separate return	7,500
④ Head of household (with qualifying person)	10,500
⑤ Qualifying widow(er) with dependent child	15,000

a	Medical and dental expenses *(federal Sch. A, line 4)*	a.
b	Taxes you paid *(federal Sch. A, line 9)*	b.
c	Interest you paid *(federal Sch. A, line 15)*	c.
d	Gifts to charity *(federal Sch. A, line 19)*	d.
e	Casualty and theft losses *(federal Sch. A, line 20)*	e.
f	Job expenses/misc. deductions *(federal Sch. A, line 27)*	f.
g	Other misc. deductions *(federal Sch. A, line 28)*	g.
h	Enter amount **from federal Schedule A, line 29**	h.
i	State, local, and foreign **income** taxes (or general sales tax, if applicable) and other subtraction adjustments *(see pg. 26)*	i.
j	Subtract line i from line h	j.
k	Addition adjustments *(see page 26)*	k.
l	Add lines j and k	l.
m	Itemized deduction adjustment *(see page 27)*	m.
n	Subtract line m from line l	n.
o	College tuition itemized deduction *(see Form IT-272)*	o.
p	**New York State itemized deduction** *(add lines n and o; enter on line 34 above)*	p.

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Name(s) as shown on page 1
MARK T HAZEL

▼ Enter your social security number
039-42-0131

Tax computation, credits, and other taxes *(see page 29)*

				Dollars
38	**Taxable income** *(from line 37 on page 2)*		38.	49,249.
39	New York State tax on line 38 amount *(see page 29 and* Tax Computation *on pages 60 and 61)*		39.	2,975.
40	New York State household credit *(from table 1, 2, or 3 on page 29)*	40.		
41	Resident credit *(attach Form IT-112-R or IT-112-C, or both; see page 30)*	41.		
42	Other New York State nonrefundable credits *(from Form IT-201-ATT, line 7; attach form)*	42.		
43	Add lines 40, 41, and 42		43.	
44	Subtract line 43 from line 39 *(if line 43 is more than line 39, leave blank)*		44.	2,975.
45	Net other New York State taxes *(from Form IT-201-ATT, line 30; attach form)*		45.	
46	**Total New York State taxes** *(add lines 44 and 45)*		46.	2,975.

New York City and Yonkers taxes, credits, and tax surcharges

47	New York City resident tax on line 38 *amount (see page 30)*	47.		
48	New York City household credit *(from table 4, 5, or 6 on page 30)*	48.		
49	Subtract line 48 from line 47 *(if line 48 is more than line 47, leave blank)*	49.		
50	Part-year New York City resident tax *(attach Form IT-360.1)*	50.		
51	Other New York City taxes *(from Form IT-201-ATT, line 34; attach form)*	51.		
52	Add lines 49, 50, and 51	52.		
53	NY City nonrefundable credits *(from Form IT-201-ATT, line 10; attach form)*	53.		
54	Subtract line 53 from line 52 *(if line 53 is more than line 52, leave blank)*	54.		
55	Yonkers resident income tax surcharge *(see page 32)*	55.		
56	Yonkers nonresident earnings tax *(attach Form Y-203)*	56.		
57	Part-year Yonkers resident income tax surcharge *(attach Form IT-360.1)*	57.		
58	**Total New York City and Yonkers taxes / surcharges** *(add lines 54 through 57)*		58.	
59	**Sales or use tax** *(See the instructions on page 33.* ***Do not leave line 59 blank.****)*		59.	0.

See instructions on pages 30, 31, and 32 to compute New York City and Yonkers taxes, credits, and tax surcharges.

Voluntary contributions *(whole dollar amounts only; see page 34)*

60a	Return a Gift to Wildlife	60a.		
60b	Missing/Exploited Children Fund	60b.		
60c	Breast Cancer Research Fund	60c.		
60d	Alzheimer's Fund	60d.		
60e	Olympic Fund *($2 or $4; see page 34)*	60e.		
60 f	Prostate Cancer Research Fund	60 f.		
60g	9/11 Memorial	60g.		
60h	Volunteer Firefighting & EMS Recruitment Fund	60h.		
60	**Total voluntary contributions** *(add lines 60a through 60h)*		60.	
61	**Total New York State, New York City, and Yonkers taxes, sales or use tax, and voluntary contributions** (*add lines* ***46***, ***58***, ***59***, *and* ***60***)		61.	2,975.

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

▼ Enter your social security number
039-42-0131

			Dollars
62	**Total New York State, New York City, and Yonkers taxes, sales or use tax, and voluntary contributions** (*from line 61 on page 3*)	62.	2,975.

Payments and refundable credits *(see page 35)*

63	**Empire State child credit** *(attach Form IT-213)*	63.	
64	NYS/NYC child and dependent care credit *(attach Form IT-216)*	64.	
65	NYS earned income credit (EIC) *(attach Form IT-215 or IT-209)*	65.	
66	NYS noncustodial parent EIC *(attach Form IT-209)*	66.	
67	Real property tax credit *(attach Form IT-214)*	67.	
68	College tuition credit *(attach Form IT-272)*	68.	
69	NYC school tax credit ***(also complete (F) on page 1;** see page 35)*	69.	
70	NYC earned income credit *(attach Form IT-215 or IT-209)*	70.	
71	Other refundable credits *(from Form IT-201-ATT, line 18; attach form)*	71.	
72	Total **New York State** tax withheld	72.	4,051.
73	Total **New York City** tax withheld	73.	
74	Total **Yonkers** tax withheld	74.	
75	Total estimated tax payments / Amount paid with Form IT-370	75.	
76	**Total payments** *(add lines 63 through 75)*	76.	4,051.

If applicable, complete Forms IT-2, IT-1099-R, and/or IT-1099-UI and attach them to your return *(see page 37)*.

Staple them (and any other applicable forms) to the top of this page 4.

See *Step 11* on page 41 for the proper assembly of your four-page return and all attachments.

Your refund / amount overpaid *(see page 37)*

77 **Amount overpaid** *(if line 76 is **more than** line 62, subtract line 62 from line 76)* 77. 1,076.

78 Amount of line 77 to be **refunded**

Mark one refund choice: X **direct deposit** *(fill in line 82)* **-or- debit card -or- paper check** 78. 1,076.

79 Amount of line 77 that you want applied to your **2012** estimated tax *(see instructions)* 79.

See page 71 for information about your three refund choices.

Amount you owe *(see page 38)*

80 Amount you **owe** *(if line 76 is **less than** line 62, subtract line 76 from line 62).*
To pay by electronic funds withdrawal, mark this box and fill in line 82 80.

81 Estimated tax penalty *(include this amount in line 80 or reduce the overpayment on line 77; see page 38)* 81.

Account information

82 Account information for direct deposit or electronic funds withdrawal *(see page 39)*.
If the funds for your payment (or refund) would come from (or go to) an account outside the U.S., mark an ***X*** in this box *(see pg. 39)* •

82a Routing number • 222371863 Electronic funds withdrawal effective date

82b Account number • 0024018617 **82c** Account type • Checking • X Savings

Third – party designee? *(see instr.)* Print designee's name Designee's phone number Personal identification number (PIN)
Yes No E-mail:

▼ **Paid preparer must complete** (see instructions) ▼

Preparer's signature ▶
Date
▶ Preparer's NYTPRIN
Firm's name *(or yours, if self-employed)*
SELF-PREPARED
▼ Preparer's PTIN or SSN
Address
● Employer identification number
Mark an ***X*** if self-employed
E-mail:

▼ **Taxpayer(s) must sign here** ▼

Your signature ▶
Your occupation • IT SUPPORT
Spouse's signature and occupation *(if joint return)*
Date
▼ Daytime phone number 585-269-5377
E-mail: MTHAZEL2151@YAHOO.COM

See instructions for where to mail your return.

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2014111555

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

New York State Department of Taxation and Finance

Summary of W-2 Statements

2011 **IT-2**

New York State • New York City • Yonkers

Do not detach or separate the W-2 Records below. File Form IT-2 as an entire page. See instructions on the back.

Taxpayer's first name and middle initial: MARK T
Taxpayer's last name: HAZEL
Your social security number: 039-42-0131
Spouse's first name and middle initial
Spouse's last name
Spouse's social security number

W-2 Record 1

Box c Employer's name and full address (including ZIP code)
ITT SPACE SYSTEMS LLC PO BOX 60488
1919 W. COOK ROAD FORT WAYNE IN 46818

Box b Employer identification number (EIN): 02-0728173

This W-2 record is for *(mark an **X** in one box)*: Taxpayer X Spouse

Box 1 Wages, tips, other compensation: 56,749.
Box 8 Allocated tips
Box 10 Dependent care benefits
Box 11 Nonqualified plans

Box 12a Amount: 19. Code: C
Box 12b Amount Code
Box 12c Amount Code
Box 12d Amount Code
Box 13 Statutory employee
Box 14 a Amount Description
Box 14 b Amount Description
Box 14 c Amount Description

Box 15 State: NY
Box 16 State wages, tips, etc. (for NYS): 56,749.
Box 17 New York State income tax withheld: 4,051.
Box 18 Local wages, tips, etc. *(see instr.)* Locality a Locality b
Box 19 Local income tax withheld Locality a Locality b
Box 20 Locality name Locality a Locality b

Corrected (W-2c)

Do not detach.

W-2 Record 2

Box c Employer's name and full address (including ZIP code)

Box b Employer identification number (EIN)

This W-2 record is for *(mark an **X** in one box)*: Taxpayer Spouse

Box 1 Wages, tips, other compensation
Box 8 Allocated tips
Box 10 Dependent care benefits
Box 11 Nonqualified plans

Box 12a Amount Code
Box 12b Amount Code
Box 12c Amount Code
Box 12d Amount Code
Box 13 Statutory employee
Box 14 a Amount Description
Box 14 b Amount Description
Box 14 c Amount Description

Box 15 State
Box 16 State wages, tips, etc. (for NYS)
Box 17 New York State income tax withheld
Box 18 Local wages, tips, etc. *(see instr.)* Locality a Locality b
Box 19 Local income tax withheld Locality a Locality b
Box 20 Locality name Locality a Locality b

Corrected (W-2c)

REV 10/04/11 TTO

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Please file this original scannable form with the Tax Department.

New York State Information Worksheet 2011

► Keep for your records

Part I — Personal Information

Taxpayer:

First Name . . . . . . MARK
Middle Initial . . . . . T Suffix . . . . ____
Last Name . . . . . . HAZEL
Social Security No. . 039-42-0131
Occupation . . . . . IT support
Date of Birth 03-20-1958
Age as of 1-1-2012 . 53
Date of Death . . . . ____
Email Address . . . . mthazel2151@yahoo.com
Daytime Phone . . . (585)269-5377
Extension . . . . . ____
Home Phone . . . . ____

Spouse:

First Name . . . . . ____
Middle Initial . . . . ____ Suffix . . . . ____
Last Name . . . . . ____
Social Security No. . ____
Occupation . . . . . ____
Date of Birth . . . . ____
Age as of 1-1-2012 . ____
Date of Death . . . . ____
Email Address . . . ____
Daytime Phone . . . ____
Extension . . . . ____

Check to print phone number on main form . . [ ] Home [X] Taxpayer daytime [ ] Spouse daytime

Mailing Address
Street Address . . . . . . .214 WHITTIER RD Apartment No. . . . ____
City . . . . .rochester State . . NY ZIP Code . . 14624-0000
Foreign province/county . . ____ Foreign province/county abbreviation . . . ____
Foreign Country . . . . ____ Foreign postal code . ____
Permanent Home Address (if different from mailing address above)
Street Address . . . ____ Apartment No. . . . . ____
City . . . . ____ State . . ____ ZIP Code . ____
Foreign Country (New York nonresidents only) . . ____
New York County and School District Information
County . . . . Monroe
School District . . . . Spencerport School District Code . . . 614

Part II — Main Form

[X] Full-year resident: Form IT-201, Resident Income Tax Return . . . . ►
[ ] Part-year resident: Form IT-203, Nonresident and Part-Year Resident Income Tax Return . . . . ►
[ ] Nonresident: Form IT-203, Nonresident and Part-Year Resident Income Tax Return . . . . . ►

Taxpayer [ ] **Spouse** [ ] If **only one spouse** has New York source income, check the box related to that spouse

New York City and City of Yonkers Residency Information:

	Taxpayer		Spouse	
	New York City	**Yonkers**	**New York City**	**Yonkers**
Residency Status:				
Full-year resident	[ ]	[ ]	[ ]	[ ]
Part-year resident	[ ]	[ ]	[ ]	[ ]
Nonresident	[X]	[X]	[ ]	[ ]
Part-year residents dates of residency:				
From:	____	____	____	____
To:	____	____	____	____
If a City of Yonkers nonresident: Did you receive income or withholding from Yonkers sources during your period of nonresidence?		Yes . . . [ ] No . . . [X]		Yes . . . [ ] No. . . . [ ]

New York City Residents:

Yes	**No**	
[ ]	[ ]	Did you or your spouse maintain living quarters in New York City during 2011?
[ ]	[X]	If married, did you or your spouse change New York City resident status at different times during the year? A 'Yes' response will generate separate Forms 360.1 for taxpayer and spouse.

Part III – Filing Status

- [X] Single
- [ ] Married, filing joint
- [ ] Married, filing separate
  - [ ] You **did not** live with your spouse at any time during the year
  - If both you and your spouse itemized deductions on your federal tax return:
  - [ ] Both you and your spouse will itemize deductions on your New York State tax returns
  - [ ] Both you and your spouse will take the New York standard deduction
- [ ] Head of household
- [ ] Qualifying widow(er)

Part IV – Credits

New York City Accumulation Distribution Credit:

Taxpayer. . . ______________ Spouse . . . . ______________

New York State and New York City Household Credit for Married Filing Separate Taxpayers:

Number of exemptions claimed on spouse's return . . . . ______________

Adjusted gross income (IT-201 or IT-203, line 18) from spouse's return . . . . ______________

Total Build America Bond (BAB) interest included on spouse's federal income tax return . . . . ______________

Part V – New York City Unincorporated Business Tax Return

		Taxpayer	Spouse
1 a	File NYC-202S	[ ]	[ ]
b	File NYC-202	[ ]	[ ]
c	Do not file NYC-202/NYC-202S	[ ]	[ ]
2	Gain (loss) from sale of business assets		
3	Net rent/royalty income from business property		
4	Other business income (loss)		
5	Income taxes/unincorporated business taxes paid and deducted on federal Schedule C or Schedule C-EZ		
6	Number of months in business in New York City during the year		
7 a	Use **direct deposit** for **NYC-202/NYC-202S tax refund**	Yes [ ] No [ ]	Yes [ ] No [ ]
b	Will the funds for this refund go to an account outside the U.S.?	Yes [ ] No [ ]	Yes [ ] No [ ]
c	Routing number		
d	Account number		
e	**1** Account Type: Checking	[ ]	[ ]
	2 Account Type: Savings	[ ]	[ ]

Part VI – Metropolitan Commuter Transportation Mobility Tax Return

		Taxpayer	Spouse
1	File MTA-6, MCTM Tax Return	[ ]	[ ]
2	Allow New York Department of Taxation and Finance to figure the interest and penalty on MTA-9, Underpayment of MTA Tax	[ ]	[ ]
3	Qualified for an automatic 90-day extension to file the first **2011** estimated tax voucher because the spouse died within 30 days before the due date of the voucher	[ ]	[ ]
4	Qualifies for an automatic 90-day extension to file the **2011** MTA tax return and first **2012** estimated tax voucher because the spouse died within 30 days before the due date of the tax return and the estimated tax voucher	[ ]	[ ]

Part VII — Sales or Use Tax and Voluntary Gifts or Contributions

Sales or Use Tax

1 a If you do not owe any sales or use tax with the return, check this box . . . . [X]

b To calculate tax due on nonbusiness-related items or services costing less than $1,000 each (excluding shipping and handling) using the sales and use tax chart, check this box . . . . [ ]

c If manually calculating the sales or use tax due with the return, check this box and enter the amount of sales or use tax due on line 4 below . . . . [ ]

2 If line 1b is checked and you maintained a permanent place of abode in New York State for sales and use tax purposes for only part of the year, enter the number of months you maintained a permanent place of abode in New York State . . . . ____

3 Sales tax due based on the sales and use tax chart . . . . ____

4 Sales tax due from ST-140, Individual Purchaser's Annual Report of Sales & Use Tax . . ____

5 Total sales or use tax due (line 2 plus line 3) . . . . 0.

Voluntary Gifts or Contributions

Return a Gift to Wildlife		Olympic Fund *($2 or $4)*	
Missing/Exploited Children Fund . .		Prostate Cancer Research Fund . .	
Breast Cancer Research Fund. . . .		9/11 Memorial	
Alzheimer's Fund		Volunteer Firefighting & EMS	

Part VIII — Additional Information for E-Filed returns

____ W-2 Verification Indicator given by NYS (*See Help*).

Part IX - Direct Deposit or Direct Debit Information

Yes	No	
X		Use **direct deposit** for **New York tax refund**?
		Use a **state issued debit card** for any **state tax refund**?
	X	Use electronic funds withdrawal of New York tax payment for the **tax return**?

Bank Information

For direct deposit or electronic funds withdrawal, fill out the information below :

Name of Financial Institution (optional) . . . . ESL Federal Credit Union

Account Type . . . . Checking [ ] Savings [X]

Personal or business account (E-Filing Only) . . . . Personal [X] Business [ ]

Routing number 222371863

Account number. 0024018617

Enter the following information only if you elect direct debit of your state tax payment:

Enter the payment date to withdraw from the account above . . . . . ____

State balance-due amount from this return . . . . ____

International ACH Transactions

Yes	No	
	X	Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Part X — Extension Status

New York State Income Tax Return (IT-201 or IT-203)

Yes	No	
	X	Tax return due date extended?

Extended due date . . . ____

New York City Unincorporated Business Tax Return (NYC-202 or NYC-202S)

Yes	No	
	X	Has NYC-EXT, "Application for Automatic Extension", been filed for the taxpayer?

Extended due date . . . ____

	X	Has NYC-EXT, "Application for Automatic Extension", been filed for the spouse?

Extended due date . . . ____

Part X — Extension Status (Continued)

Metropolitan Commuter Transportation Mobility Tax Return (MTA-6)

Yes	No	
	X	Has MTA-7, "Application for Automatic Six-Month Extension", been filed for the taxpayer?

Extended due date . . . ______________

Yes	No	
	X	Has MTA-7, "Application for Automatic Six-Month Extension", been filed for the spouse?

Extended due date . . . ______________

Part XI — Form NYC-1127, Nonresident Employees of the City of New York

		Taxpayer	Spouse
1	Check the box to indicate the individual(s) who were employed by the city of New York	☐	☐
2	New York City department or agency where employed		
3	Date current employment with the city of New York began		
4	If employment ended in 2011, enter final date of employment		

5 For married filing joint taxpayers, file NYC-1127:

- ☐ Separately, considering only the income/adjustments of the New York City employee
- ☐ Jointly with spouse, all income/adjustments of both taxpayer and spouse are used to compute overpayment or balance due

Part XII — Other Information for Your Tax Return

2-digit special condition code number:

☐ **Code A6** **Build America Bond Interest —** You (or your spouse if married) included Build America Bond (BAB) interest in your federal adjusted gross income (AGI)

* Enter total BAB interest included on Form 1040A or Form 1040, line 8a . . . ______________

* Enter BAB interest entered above from NY state or local governments . . . . ______________

☐ **Code C7** **Combat zone —** You (or your spouse if married) qualify for an extension of time to file and pay your tax due under the combat zone or contingency operation relief provisions

☐ **Code D9** **Deceased taxpayer —** If a joint return is being filed, the tax return qualifies for an automatic 90-day extension to file because either the taxpayer or spouse died within 30 days before the due date of their tax return.

☐ **Code K2** **Combat zone, killed in action (KIA) —** You are filing a return on behalf of a member of the armed forces who died while serving in a combat zone

☐ **Code M2** **Military Spouse Income —** The spouse of a servicemember is exempt from New York state tax on compensation earned in New York if domiciled in another state (IT-203 filers only)

☐ **Code E3** **Out of the country —** You (or your spouse if married) qualify for an automatic two-month extension of time to file your federal return because you are out of the country

☐ **Code E4** **Nonresident aliens —** You (or your spouse if married) are a federal nonresident alien

☐ **Code E5** **Extension of time to file beyond six months —**You (or your spouse if married):

- Qualify for an extension of time to file beyond six months because you are outside the United States and Puerto Rico. Attach a copy of the letter sent to the IRS requesting additional time to file
- Received a federal extension to qualify for the federal foreign earned income exclusion and/or the foreign housing exclusion or deduction. Attach a copy of the approved Form 2350, *Application for Extension of Time to File U.S. Income Tax Return*

Part XII – Other Information for Your Tax Return (continued)

☐ **Code M3** **Same-sex married spouse(s)**- You and your spouse are required to use a married filing status on your New York return and could not file your federal return using a married filing status

☐ **Code 56** **Ponzi-type fraudulent investment** - You (or your spouse if married) had a Ponzi-type fraudulent investment reported as a theft loss (itemized deduction) on the federal and New York tax returns using the federal safe harbor rules

☐ **Code P2** **Protective Claim** - You (or your spouse if married) are claiming a refund on an amended return (IT-201-X or IT-203-X) based on unresolved issues involving the Tax Department

☐ **Code N3** **NOL Carryback**- You (or your spouse if married) are filing an amended return (IT-201-X or IT-203-X) due to a net operating loss carryback

____ If you (or your spouse if married) qualify under a special condition for filing your 2011 tax return not listed above, enter your 2-digit special condition code number

____ If applicable, also enter the second 2-digit special condition code number

Third Party Designee:

Yes No

☐ ☐ May another person discuss this return with the New York Department of Taxation and Finance?

If Yes, complete the following:

Designee's name . . . . ____________________

Designee's email address . . . . . . ____________________

Designee's phone number . . . . . . ____________

Personal identification number. . . . ______

New York State Underpayment Penalty:

X Allow New York Department of Taxation and Finance to figure the interest and penalty on IT-2105.9

☐ The taxpayer qualified for a 90 day extension of time to pay their first **2011** estimated tax payment

Long-term Residential Care Deduction (IT-201 and IT-203 Filers):

Yes No

☐ ☐ Was the taxpayer a resident in a continuing care retirement community that was issued a certificate of authority by the New York State Department of Health to operate as a continuing care retirement community?

☐ ☐ Was the spouse a resident in a continuing care retirement community that was issued a certificate of authority by the New York State Department of Health to operate as a continuing care retirement community?

	Taxpayer	Spouse
1 Fees paid during the year that are attributable to the cost of providing long-term care benefits under a continuing care contract		
2 Long-term care insurance deduction age limitation		

Part XIII– Amended Return

☐ You are filing a current year New York amended income tax return

Payment made with original return . . . . ____________

Refund received from original return . . . ____________

New York State School District/County Selection Worksheet

2011

► Keep for your records

Name as Shown on Return	Social Security No.
MARK T HAZEL	039-42-0131

Listed below are the counties in New York state. The school districts associated with each county are available by clicking on the field next to your county of residence.You should select the appropriate school district. Based on the school district selected, the program will automatically select the matching school district code.

New York Counties

Albany		Niagara	
Allegany		Oneida	
Broome		Onondaga	
Cattaraugus		Ontario	
Cayuga		Orange	
Chautauqua		Orleans	
Chemung		Oswego	
Chenango		Otsego	
Clinton		Putnam	
Columbia		Rensselaer	
Cortland		Rockland	
Delaware		St. Lawrence	
Dutchess		Saratoga	
Erie		Schenectady	
Essex		Schoharie	
Franklin		Schuyler	
Fulton		Seneca	
Genesee		Steuben	
Greene		Suffolk	
Hamilton		Sullivan	
Herkimer		Tioga	
Jefferson		Tompkins	
Lewis		Ulster	
Livingston		Warren	
Madison		Washington	
Monroe	Spencerport	Wayne	
Montgomery		Westchester	
Nassau		Wyoming	
New York City		Yates	

NYIW8901.SCR 05/31/00

Tax Payments Worksheet 2011

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Name	Social Security Number
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Tax Payments for the Current Year

		Date	Payments: State	New York City	Yonkers
1	First Payment				
2	Second Payment				
3	Third Payment				
4	Fourth Payment				
	Additional Payments				
5 a	Payment				
b	Payment				
c	Payment				
d	Payment				
e	Payment				

6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	**Total tax payments**	8	

New York State Income Tax Withheld for the Current Year

9	State withholding on Forms W-2	9	4,051.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
12 b	State withholding on Forms 1099-G	12 b	
13	Other state tax withholding	13	
14	**Total state income tax withheld**	14	4,051.

City Income Tax Withheld for the Current Year

15	Total City of New York withholding	15	
16	Total Yonkers withholding	16	
17	Section 1127 withholding	17	

Section 414(h) and 125 Withholding

18	Public employee 414(h) retirement contributions - subject to New York Tax	18	
19	Public employee 414(h) retirement contributions - **not** subject to New York Tax	19	
20	Total City of New York withholding (IRC 125) - subject to New York Tax	20	
21	Total City of New York withholding (IRC 125) - **not** subject to New York Tax	21	
22	Date return will be filed and balance paid	22	

College Tuition Qualified Expenses Optimization Worksheet 2011

► Keep for your records

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Part I — Complete columns A through G below for each eligible student for whom you paid qualified college tuition expenses.

- Do not list the same student more than once
- List the EIN and name of the college that was last attended
- Tuition payments for enrollment or attendance in a course of study leading to the granting of a post baccalaureate or other graduate degree do **not** qualify for the college tuition credit

1

A Student's name **B** Student's SSN	**C** Student Type	**D** EIN of college **E** College name	**F** Under-graduate expense?	**G** Qualified college tuition expenses paid in 2011
			Yes ☐ **No** ☐	
			Yes ☐ **No** ☐	
			Yes ☐ **No** ☐	

2	Total tuition (sum of column G)	**2**	
3	Total tuition eligible for the College Tuition Credit or Itemized Deduction	**3**	

Part II — Optimization of College Tuition Credit vs College Tuition Itemized Deduction (IT-201 Filers Only)

Taxpayers who file IT-201, Resident Income Tax Return **and** itemize deductions can use college tuition expenses as an itemized deduction or used to calculate a tax credit.

1 **Check this box to launch the optimizer now.** This will automatically determine whether the deduction or the credit generates the lowest tax ☐

Caution: **A.** If you make any changes to this return after launching the automatic optimization above, you **MUST** optimize again by rechecking the box on Line 1 above.

B. If you check the Optimizer box on Line 1 above, wait until the calculations are done before you continue. Refer to the calculation indicator at the bottom right. It will indicate refund or tax due when calculations are done.

2 Automatic - Check to use the Deduction or Credit choices calculated in column (b) below ► X

OR

3 Manual - Check to use the Deduction or Credit choices you entered in column (a) below ► ☐

	(a) **Manual:** Choose Credit or Deduction	**(b)** **Automatic:** Program Choice
Check the box to use your qualified college tuition expenses to calculate a credit	☐	X
Check the box to use your qualified college tuition expenses as an itemized deduction	☐	☐

Part III — Net Refund/Balance Due

Refund	1,076.
Balance Due	

New York State Wages/Self-Employment Income Allocation

2011

► Keep for your records

Name as Shown on Return	Social Security No.

Part I – New York Wage Allocation

Taxpayer

Allocate by Formula	Allocate by Percent		New York Wages
		ITT SPACE SYSTEMS LLC PO BOX 60488	56,749.

Spouse

Allocate by Formula	Allocate by Percent		New York Wages

See Tax Help for details.

Part II – State Self-Employment Income Allocation

Taxpayer

Type of Business	State Code	Allocation Percent		State Self-Employment Income

Spouse

Type of Business	State Code	Allocation Percent		State Self-Employment Income

See Tax Help for details.

Form **IT-2105 WKS** | New York State **Estimated Tax Worksheet** ► Keep for your records | **2012**

Name as Shown on Return	Social Security No.
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Part I 2012 Estimated Tax Amount Options

1 Select One of Five Ways to Calculate the Required Annual Payment for 2012 Estimates:

		State	New York City	Yonkers
a 100% (110%) of **2011** taxes	X	2,975.		
b 100% of tax on **2012** estimated taxable income		2,977.	0.	
c 90% of tax on **2012** estimated taxable income		2,679.	0.	
d 66-2/3% of tax on **2012** estimated taxable income (farmers and fishermen)		1,985.	0.	
e Fixed total amount (not program calculated)				

2 Selected estimated tax amount:

a 2012 Required Annual Payment based on your choice above	2,975.
b Estimated amount of 2012 state income tax withholding	4,051.
c Total of estimated tax payments required for 2012 (line 2a less line 2b)	0.

3 Select Estimated Tax Payment option:

a Calculate estimates if New York State, New York City or Yonkers tax is $300 or more	X
b Calculate estimates if ______ (specify amount) or more	
c Calculate estimates regardless of amount	
d Do **not** calculate estimates	

4 Other Options:

a Enter the number of vouchers to be prepared (default 4 payments) . . . 4

Part II Overpayment Application Options

1	Amount of overpayment available	1,076.
	Check to apply overpayment and refund excess	
	or enter amount to apply	
A	Apply consecutively to all quarters	X
B	Apply to first quarter only	
C	Apply evenly to state estimated amounts only	

Part III Rounding and Printing Options

1 Select Rounding Option:

- a [X] ◄ Round up to next $1
- b [ ] ◄ Round up to next $10
- c [ ] ◄ Round up to next $50
- [ ] Round up to next $100

2 Select Voucher Printing Option:

- a [X] ◄ Print (per Part I, lines 3a - c)
- b [ ] ◄ Print only name, etc.
- c [ ] ◄ Do **not** print vouchers

Part IV Filing Status and Dependent Exemptions for 2012 Calculations

A 1 Choose 2012 filing status:

- [X] Single
- [ ] Married filing jointly
- [ ] Married filing separately
- [ ] Head of household
- [ ] Qualifying widow(er)

B Check if dependent of another in 2012. . . . . Yes [ ] No [ ]

C Enter the number of dependent exemptions in 2012 . . . . ____

Part V Changes to Income, Deductions, Credits and Withholding for 2012

Your 2011 income and deductions are entered in the '2011 Actual' column.
*****For each line in the '2012 Estimated' column, enter estimated 2012 amount if **different** from 2011; otherwise, the '2011 Actual' amount will be used for that line. If zero, you **must** enter zero.*

		2011 Actual	*2012 Estimated
A	New York adjusted gross income	56,749.	
B	Enter either your standard or estimated itemized deduction	7,500.	7,500.
C	Dependent exemption *(number of dependents times $1,000)*		
D	New York City Household Credit/Accum Distribution Credit		
E	New York City tax on ordinary income portion of lump-sum distribution		
F	New York City Unincorporated Business Tax Credit		
G	New York State Household Credit; nonresidents and part-year residents also enter Child and Dependent Care Credit and Earned Income Credit		
H	**Nonresidents and Part-Year residents:**		
	(1) New York adjusted gross income (Form IT-203, line 45, New York State amount)		
	(2) New York adjusted gross income (Form IT-203, line 45, federal amount)		
I	Nonresident and part-year resident income percentage		
J	Additional taxes — New York State		
K	Additional taxes — New York City		
L	Resident credit and other nonrefundable credits — New York State		
M	Refundable credits — New York State	0.	
N	Refundable credits — New York City		
O	Gross wages subject to the Yonkers nonresident tax (Form Y-203)		
P	Net earnings from self-employment subject to the Yonkers nonresident tax (Form Y-203)		
Q	Yonkers nonresident earnings tax (Form Y-203)		
R	New York State income tax withheld	4,051.	
S	New York City income tax withheld		
T	Yonkers income tax withheld		

Part VI 2012 Estimated Taxable Income and Tax

		New York State	City of New York	City of Yonkers
1	Estimated New York adjusted gross income expected in 2012	56,749.		
2	Enter either your standard deduction or estimated itemized deduction	7,500.		
3	Subtract line 2 from line 1	49,249.		
4	Dependent exemption *(number of dependents times $1,000)*			
5	Estimated New York State taxable income (line 3 less line 4)	49,249.		
6	New York State tax	2,977.		
7	New York City resident tax			
8	New York City Household Credit and New York City Accumulation Distribution Credit			
9	Subtract line 8 from line 7		0.	
10	New York City tax on ordinary income portion of lump-sum distribution			
11	Add lines 9 and 10		0.	
12	New York City Unincorporated Business Tax Credit			
13	Subtract line 12 from line 11		0.	
14	Enter household credit; nonresidents and part-year residents also enter Child and Dependent Care Credit and Earned Income Credit			
a	Nonresident and part-year resident income percentage			
15	Subtract line 14 from line 6	2,977.		
16	Other taxes			
17	Add lines 15 and 16 *(in New York City column: add lines 13 and 16)*	2,977.	0.	
18	Resident credit and other nonrefundable credits			
19	Total estimated New York State and New York City tax (New York State *column: line 17 less line 18*; City of New York *column: enter amount from line 17)*	2,977.	0.	
20	Refundable credits	0.		
21	New York State/City estimated tax *(line 19 less line 20)*	2,977.	0.	
22	City of Yonkers:			
a	Resident tax surcharge *(line 21 times 15% (.15))*			
b	Nonresident earnings tax *(Form Y-203)*			
c	Total *(add lines 22a and 22b)*			
23	Totals (New York State *column, line 21;* New York City *column, line 21;* City of Yonkers *column, line 22c*)	2,977.	0.	

23 a	Check this box if farmer or fisherman . . . . ☐			
24	Multiply line 23 by 90% (66-2/3% for farmers and fishermen)	2,679.	0.	
24 a	100% of line 23 (tax calculated on 2012 estimated taxable income)	2,977.	0.	
25	Enter 100% of the tax shown on your 2011 income tax return. (110% of that amount if you are not a farmer or a fisherman and the New York adjusted gross income shown on that return is more than $150,000; or, if married filing separately for 2012, more than $75,000)	2,975.		
26	2012 required annual payment based on your choice of options	2,975.		
27	Estimate of income tax to be withheld	4,051.		
28	**Total estimated tax payments required for 2012**	0.		
29	Application of 2011 overpayment. Total . . 29			

	a Due Date	**b** Amount to Pay	**c** 2011 Overpayment Applied	**d** Total Amount
30 Payment				
New York State				
1st quarter				
2nd quarter				
3rd quarter				
4th quarter				
City of New York				
1st quarter				
2nd quarter				
3rd quarter				
4th quarter				
City of Yonkers				
1st quarter				
2nd quarter				
3rd quarter				
4th quarter				
Totals				

Two-Year Comparison 2011

Name as Shown on Return	Social Security No.
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	2010	2011	Difference	%
Federal Adjusted Gross Income	57,540.	56,749.	-791.	-1.37
New York Additions				
State and local interest income				
Public employee 414(h) retirement contributions				
New York's 529 college savings program distributions				
Other New York additions				
Total New York Additions				
New York Subtractions				
State tax refund				
Government pension exclusion				
Taxable social security benefits				
U.S. government interest income				
Pension and annuity income exclusion				
New York's 529 college savings program deductions/earnings				
Other New York subtractions				
Total New York Subtractions				
New York Adjusted Gross Income	57,540.	56,749.	-791.	-1.37
Standard or Itemized Deduction	7,500.	7,500.	0.	0.00
Dependent exemptions				
New York Taxable Income	50,040.	49,249.	-791.	-1.58
New York State tax	3,030.	2,975.	-55.	-1.82
New York State nonrefundable credits				
Other New York State taxes				
Total New York State taxes	3,030.	2,975.	-55.	-1.82
New York City taxes				
Yonkers City taxes				
Use tax	0.	0.	0.	
Voluntary gifts/contributions				
Total New York State, New York City and Yonkers Taxes, Use Tax and Voluntary Gifts/Contributions	3,030.	2,975.	-55.	-1.82
Withholding	4,128.	4,051.	-77.	-1.87
Estimated tax payments, extension payment, and amount applied from prior year return				
Refundable credits				
Total payments and refundable credits	4,128.	4,051.	-77.	-1.87
Underpayment penalty				
Applied to next year's estimated tax				
Refund	1,098.	1,076.	-22.	-2.00
Balance Due				