Electronic Filing Instructions for your 2014 Federal Tax Return

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

Intuit 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 $3,129.00. Your tax refund will be direct deposited into your account. The account information you entered - Account Number: 0024018617 Routing Transit Number: 222371863.
When Will You Get Your Refund?	The IRS issued more than 9 out of 10 refunds to taxpayers in less than 21 days last year. The same results are expected in 2015. To get your estimated refund date from TurboTax, log into My TurboTax at www.turbotax.com. If you do not receive your refund within 21 days, or the amount you get 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.
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your federal return

2014 Federal Tax Return Summary	Adjusted Gross Income	$	89,641.00
	Taxable Income	$	79,491.00
	Total Tax	$	15,725.00
	Total Payments/Credits	$	18,854.00
	Amount to be Refunded	$	3,129.00
	Effective Tax Rate		17.54%

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 2014 taxes:

Your federal refund is: $ 3,129.00

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 provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.

Form **1040EZ**

Department of the Treasury—Internal Revenue Service

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

2014

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/state/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	89,641.
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	89,641.
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 $10,150 if **single;** $20,300 if **married filing jointly.** See back for explanation.	5	10,150.
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your **taxable income.** ▶	6	79,491.

Payments, Credits, and Tax

7	Federal income tax withheld from Form(s) W-2 and 1099.	7	18,854.
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	18,854.
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	15,725.
11	Health care: individual responsibility (see instructions) Full-year coverage ☒	11	
12	Add lines 10 and 11. This is your **total tax.**	12	15,725.

Refund

Have it directly deposited! See instructions and fill in 13b, 13c, and 13d, or Form 8888.

13a	If line 9 is larger than line 12, subtract line 12 from line 9. This is your **refund.** If Form 8888 is attached, check here ▶ ☐	13a	3,129.
▶ 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

14	If line 12 is larger than line 9, subtract line 9 from line 12. This is the **amount you owe.** For details on how to pay, see instructions. ▶	14	

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
		Software Test Engineer	(585)281-3665
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.

Tax History Report

2014

G Keep for your records

Name(s) Shown on Return
Mark T Hazel

	Five Year Tax History:				
	2010	**2011**	**2012**	**2013**	**2014**
Filing status	Single	Single	Single	Single	Single
Total income	57,540.	56,749.	55,386.	65,823.	89,641.
Adjustments to income					
Adjusted gross income	57,540.	56,749.	55,386.	65,823.	89,641.
Tax expense	4,128.	4,051.	3,860.	4,511.	6,147.
Interest expense					
Contributions					
Miscellaneous deductions					
Other Itemized Deductions					
Total itemized/ standard deduction	5,700.	5,800.	5,950.	6,100.	6,200.
Exemption amount	3,650.	3,700.	3,800.	3,900.	3,950.
Taxable income	48,190.	47,249.	45,636.	55,823.	79,491.
Tax	8,225.	7,931.	7,436.	9,885.	15,725.
Alternative min tax					
Total credits					
Other taxes				4,232.	
Payments	11,074.	10,827.	10,379.	12,889.	18,854.
Form 2210 penalty					
Amount owed				1,228.	
Applied to next year's estimated tax					
Refund	2,849.	2,896.	2,943.		3,129.
Effective tax rate %	13.60	13.98	13.43	15.02	17.54
**Tax bracket %	25.0	25.0	25.0	25.0	25.0

**Tax bracket % is based on Taxable income.

Audit Defense Order Confirmation

Thank you for choosing Audit Defense for your 2014 income tax return. This service is provided by an independent tax firm TaxAudit.com brought to you by the experts at TaxResources, Inc.

Name:	Mark T Hazel
Confirmation Number:	TTWQP1T33203691
Amount Paid:	44.99

When TaxAudit.com defends your income tax return during an IRS or state audit, you have professional representation throughout the entire process.

TaxAudit.com:

- Defends your 2014 income 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 tax agency 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 TaxAudit.com 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 e-filed return and your refund has been processed
2. Two to five days after this, you'll receive an email from TaxAudit.com 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 e-filing your return or paying by credit card.

If you receive any audit or tax notice from the IRS or state taxing agency, contact TaxAudit.com immediately at 877-829-9695. TaxAudit.com's customer service office hours are 8 a.m. to 5 p.m. Pacific Time, Monday through Friday. TaxAudit.com must be your only contact with the IRS or state (please read the Audit Defense Membership Agreement).

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

Consent to Use of Tax Return Information

Federal law requires this consent form be provided to you. Unless authorized by law we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

If you are requesting use of personal information from a joint return, you are representing that we have consent for both parties on the return.

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at *complaints@tigta.treas.gov.*

The following statements apply:

I authorize Intuit, the maker of TurboTax, to use the 2014 tax return information to determine if I am eligible for certain payment options and benefits beyond my refund.

Sign this agreement by entering your name and the date below.

Mark	Hazel
First Name	Last Name

02/05/2015
Date

Form **1095-OTH** **Health Insurance Coverage** **2014**

► Keep for your records

QuickZoom to Form 1095-A, Health Insurance Marketplace Statement . . . . ► ____
QuickZoom to Form 1095-B, Health Coverage . . . . ► ____
QuickZoom to Form 1095-C, Employer-Provided Health Insurance Offer and Coverage . . . . ► ____
QuickZoom to Form 1095, Worksheet . . . . ► ____
QuickZoom to Form 8962, Premium Tax Credit (PTC) . . . . ► ____
QuickZoom to Form 8965, Health Coverage Exemptions . . . . ► ____

Health Insurance Coverage for Individuals - This form may be used to report health insurance coverage information for each individual whose health coverage is NOT reported on a Form 1095-A. If reporting an individual's periods of coverage from Form 1095-B or Form 1095-C, that individual's health coverage information should not be reported below.

☐ Check the box to populate the Name, SSN, and DOB for everyone listed on the return below.
Note: Checking this box again will repopulate the information below and overwrite existing entries.

Line	Covered Individual: **a.** Name of covered individual(s) / **b.** SSN	**c.** DOB	Covered all 12 months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
17	Mark 039-42-0131	03/20/58		X	X	X	X	X	X	X	X	X	X	X	X
18															
19															
20															
21															
22															

Tax Payments Worksheet 2014

► Keep for your records

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

Estimated Tax Payments for 2014 (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	04/15/14		04/15/14			04/15/14		
2	06/16/14		06/16/14			06/16/14		
3	09/15/14		09/15/14			09/15/14		
4	01/15/15		01/15/15			01/15/15		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2014					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2014 extensions					

Taxes Withheld From:	Federal	State	Local
10 Forms W-2	18,854.	6,147.	
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 ___			
f Additional Medicare Tax.			
19 **Total Withholding** Lines 10 through 18f	18,854.	6,147.	
20 **Total Tax Payments for 2014**	18,854.	6,147.	

Prior Year Taxes Paid In 2014 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2013 extensions				
22 2013 estimated tax paid after 12/31/2013				
23 Balance due paid with 2013 return				
24 Other (amended returns, installment payments, etc) . .				

Federal Carryover Worksheet 2014

► Keep for your records

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

2013 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			4,511.		1,087.	
Totals . .			4,511.		1,087.	

Other Tax and Income Information		**2013**	**2014**
1 Filing status	**1**	1 Single	1 Single
2 Number of exemptions for blind or over 65 (0 - 4).	**2**		
3 Itemized deductions	**3**	4,511.	6,147.
4 Check box if required to itemize deductions	**4**	☐	☐
5 Adjusted gross income	**5**	65,823.	89,641.
6 Tax liability for Form 2210 or Form 2210-F	**6**	9,885.	15,725.
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		**2013**	**2014**
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		**2013**	**2014**
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** 2014. . .	**16 a**		
b 2013. . .	**b**		
c 2012. . .	**c**		
d 2011. . .	**d**		
e 2010. . .	**e**		
f 2009. . .	**f**		

Mark T Hazel 039-42-0131

Loss and Expense Carryovers (cont'd)				**2013**	**2014**
17 AMT Nonrecap'd net Sec 1231 losses from:	**a**	2014	**17 a**		
	b	2013	**b**		
	c	2012	**c**		
	d	2011	**d**		
	e	2010	**e**		
	f	2013	**f**		

Credit Carryovers				**2013**	**2014**
18 General business credit			**18**		
19 Adoption credit from:	**a**	2014	**19 a**		
	b	2013	**b**		
	c	2012	**c**		
20 Mortgage interest credit from:	**a**	2014	**20 a**		
	b	2013	**b**		
	c	2012	**c**		
	d	2011	**d**		
21 Credit for prior year minimum tax			**21**		
22 District of Columbia first-time homebuyer credit			**22**		
23 Residential energy efficient property credit			**23**		

Other Carryovers				**2013**	**2014**
24 Section 179 expense deduction disallowed			**24**		
25 Excess foreign housing deduction:	**a**	Taxpayer (Form 2555, line 46)	**25 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

26 **2013** Carryover of charitable contributions from:	**Other Property**		**Capital Gain**	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2013				
b 2012				
c 2011				
d 2010				
e 2009				

27 **2014** Carryover of charitable contributions from:	**Other Property**		**Capital Gain**	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2014				
b 2013				
c 2012				
d 2011				
e 2010				

28 Amount overpaid less earned income credit . . . . . . 0.

2013 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

Electronic Filing Instructions for your 2014 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 $1,191.00. Your tax refund will be direct deposited into your account. 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 30 business 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
2014 New York Tax Return Summary	Taxable Income $ 81,841.00 Total Tax $ 4,956.00 Total Payments/Credits $ 6,147.00 Amount to be Refunded $ 1,191.00

New York State Department of Taxation and Finance

Resident Income Tax Return

New York State • New York City • Yonkers

IT-201

2014

For the full year January 1, 2014, through December 31, 2014, or fiscal year beginning ... 14

and ending ...

For help completing your return, see the instructions, Form IT-201-I.

Your first name	MI	Your last name (*for a joint return, enter spouse's name on line below*)	Your date of birth (*mmddyyyy*)	Your social security number
MARK	T	HAZEL	03201958	039420131
Spouse's first name	MI	Spouse's last name	Spouse's date of birth (*mmddyyyy*)	Spouse's social security number

Mailing address (***see instructions, page 12***) (*number and street or PO box*)	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

Taxpayer's permanent home address (***see instructions, page 12***) (*number and street or rural route*)	Apartment number	School district code number ....
		614

City, village, or post office	State	ZIP code	Decedent information	Taxpayer's date of death (*mmddyyyy*)	Spouse's date of death (*mmddyyyy*)
	NY				

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

B **Did you itemize** your deductions on your 2014 federal income tax return? .... Yes [ ] No [X]

C **Can you be claimed** as a dependent on another taxpayer's federal return? .... Yes [ ] No [X]

D1 Did you have a financial account located in a foreign country? (*see page 13*) ..... Yes [ ] No [X]

D2 **Yonkers residents and Yonkers part-year residents only:**

(1) Did you receive a property tax freeze credit? (*see page 13*) .... Yes [ ] No [ ]

(2) If *Yes*, enter the amount............. 00

D3 Did you receive a family tax relief credit? (*see page 13*) .... Yes [ ] No [X]

E (1) Did you or your spouse **maintain living quarters in NYC** during 2014? (*see page 13*) .. Yes [ ] No [X]

(2) Enter the number of days spent in NYC in 2014 (*any part of a day spent in NYC is considered a day*).........

F **NYC residents and NYC part-year residents only** (*see page 13*):

(1) Number of months **you** lived in NYC in 2014 ....

(2) Number of months **your spouse** lived in NYC in 2014 ....

G Enter your **2-character special condition code if applicable** (*see page 13*) ....

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

H Dependent exemption information (*see page 14*)

First name	MI	Last name	Relationship	Social security number	Date of birth (*mmddyyyy*)

If more than 7 dependents, mark an ***X*** in the box. [ ]

REV 10/27/14 TTO

201001141555

For office use only

Your social security number
0 3 9 4 2 0 1 3 1

Federal income and adjustments
(see page 14)

Whole dollars only

1	Wages, salaries, tips, etc.	1	89,641 00
2	Taxable interest income	2	00
3	Ordinary dividends	3	00
4	Taxable refunds, credits, or offsets of state and local income taxes *(also enter on line 25)*	4	00
5	Alimony received	5	00
6	Business income or loss *(submit a copy of federal Schedule C or C-EZ, Form 1040)*	6	00
7	Capital gain or loss *(if required, submit a copy of federal Schedule D, Form 1040)*	7	00
8	Other gains or losses *(submit a copy of federal Form 4797)*	8	00
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an ***X*** in the box ☐	9	00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an ***X*** in the box ☐	10	00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. *(submit copy of federal Schedule E, Form 1040)*	11	00
12	Rental real estate included in line 11 — 12: 00		
13	Farm income or loss *(submit a copy of federal Schedule F, Form 1040)*	13	00
14	Unemployment compensation	14	00
15	Taxable amount of social security benefits *(also enter on line 27)*	15	00
16	Other income *(see page 14)* *Identify:*	16	00
17	Add lines **1 through 11** and **13 through 16**	17	89,641 00
18	Total federal adjustments to income *(see page 14)* *Identify:*	18	00
19	**Federal adjusted gross income** *(subtract line 18 from line 17)*	19	89,641 00

New York additions
(see page 15)

20	Interest income on state and local bonds and obligations (but not those of NYS or its local governments)	20	00
21	Public employee 414(h) retirement contributions from your wage and tax statements *(see page 15)*	21	00
22	**New York's** 529 college savings program distributions *(see page 15)*	22	00
23	Other *(Form IT-225, line 9)*	23	00
24	Add lines **19** through **23**	24	89,641 00

New York subtractions
(see page 16)

25	Taxable refunds, credits, or offsets of state and local income taxes *(from line 4)*	25	00		
26	Pensions of NYS and local governments and the federal government *(see page 16)*	26	00		
27	Taxable amount of social security benefits *(from line 15)*	27	00		
28	Interest income on U.S. government bonds	28	00		
29	Pension and annuity income exclusion *(see page 16)*	29	00		
30	**New York's** 529 college savings program deduction/earnings	30	00		
31	Other *(Form IT-225, line 18)*	31	00		
32	Add lines 25 through 31			32	00
33	**New York adjusted gross income** *(subtract line **32** from line **24**)*			33	89,641 00

Standard deduction or itemized deduction
(see page 18)

34	Enter your **standard deduction** *(table on page 18)* **or** your **itemized deduction** *(from Form IT-201-D)* Mark an ***X*** in the appropriate box: ☒ **Standard** - or - ☐ **Itemized**	34	7,800 00
35	Subtract line 34 from line 33 *(if line 34 is more than line 33, leave blank)*	35	81,841 00
36	Dependent exemptions *(enter the number of dependents listed in item H; see page 18)*	36	**000 00**
37	**Taxable income** *(subtract line 36 from line 35)*	37	81,841 00

201002141555

Name(s) as shown on page 1	Your social security number
MARK T HAZEL	0 3 9 4 2 0 1 3 1

Tax computation, credits, and other taxes (see page 19)

38	**Taxable income** *(from line 37 on page 2)*	81,841 00
39	NYS tax on line 38 amount *(see page 19 and* Tax computation *on pages 51, 52, and 53)*	4,956 00
40	NYS household credit *(page 19, table 1, 2, or 3)*	00
41	Resident credit *(see page 20)*	00
42	Other NYS nonrefundable credits *(Form IT-201-ATT, line 7)*	00
43	Add lines 40, 41, and 42	00
44	Subtract line 43 from line 39 *(if line 43 is more than line 39, leave blank)*	4,956 00
45	Net other NYS taxes *(Form IT-201-ATT, line 30)*	00
46	**Total New York State taxes** *(add lines 44 and 45)*	4,956 00

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

47	NYC resident tax on line 38 amount *(see page 20)*	00
48	NYC household credit *(page 20, table 4, 5, or 6)*	00
49	Subtract line 48 from line 47 *(if line 48 is more than line 47, leave blank)*	00
50	Part-year NYC resident tax *(Form IT-360.1)*	00
51	Other NYC taxes *(Form IT-201-ATT, line 34)*	00
52	Add lines 49, 50, and 51	00
53	NYC nonrefundable credits *(Form IT-201-ATT, line 10)*	00
54	Subtract line 53 from line 52 *(if line 53 is more than line 52, leave blank)*	00
55	Yonkers resident income tax surcharge *(see page 22)*	00
56	Yonkers nonresident earnings tax *(Form Y-203)*	00
57	Part-year Yonkers resident income tax surcharge *(Form IT-360.1)*	00
58	**Total New York City and Yonkers taxes / surcharges** *(add lines 54 through 57)*	00
59	**Sales or use tax** *(see page 23;* ***do not leave line 59 blank)***	0 00

See instructions on pages 20, 21, and 22 to compute New York City and Yonkers taxes, credits, and tax surcharges.

Voluntary contributions (see page 24)

60a	Return a Gift to Wildlife	00
60b	Missing/Exploited Children Fund	00
60c	Breast Cancer Research Fund	00
60d	Alzheimer’s Fund	00
60e	Olympic Fund *($2 or $4; see page 24)*	00
60f	Prostate and Testicular Cancer Research and Education Fund	00
60g	9/11 Memorial	00
60h	Volunteer Firefighting & EMS Recruitment Fund	00
60i	Teen Health Education	00
60j	Veterans Remembrance	00
60	**Total voluntary contributions** *(add lines 60a through 60j)*	00
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)*	4,956 00

201003141555

Your social security number: 0 3 9 4 2 0 1 3 1

62	Enter amount from line 61	62	4,956 00

Payments and refundable credits *(see page 25)*

63	Empire State child credit	63	00
64	NYS/NYC child and dependent care credit	64	00
65	NYS earned income credit (EIC)	65	00
66	NYS noncustodial parent EIC	66	00
67	Real property tax credit	67	00
68	College tuition credit	68	00
69	NYC school tax credit ***(also complete F on page 1;*** *see page 25)*	69	00
70	NYC earned income credit	70	00
70a	NYC enhanced real property tax credit	70a	00
71	Other refundable credits *(Form IT-201-ATT, line 18)*	71	00
72	Total **New York State** tax withheld	72	6,147 00
73	Total **New York City** tax withheld	73	00
74	Total **Yonkers** tax withheld	74	00
75	Total estimated tax payments **and** amount paid with Form IT-370	75	00
76	**Total payments** *(add lines 63 through 75)*	76	6,147 00

Submit your wage and tax statements with your return *(see page 27).*

Your refund, amount you owe, and account information *(see pages 27 through 30)*

77 **Amount overpaid** *(if line 76 is **more than** line 62, subtract line 62 from line 76)* ..... 77 | 1,191 00

78 Amount of line 77 to be **refunded**
Mark one refund choice: [X] **direct deposit** *(fill in line 83)* - or - [ ] **debit card** - or - [ ] **paper check** ... 78 | 1,191 00

79 Amount of line 77 that you want applied to your **2015** estimated tax *(see instructions)* ..... 79 | 00

See pages 27 and 28 for information about your three refund choices.

See page 29 for payment options.

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 an ***X*** in the box [ ] and fill in lines 83 and 84. If you pay by check or money order you **must** complete Form IT-201-V and mail it with your return. ..... 80 | 00

81 Estimated tax penalty *(include this amount in line 80 or reduce the overpayment on line 77; see page 28)* ..... 81 | 00

82 Other penalties and interest *(see page 29)* ..... 82 | 00

See page 31 for the proper assembly of your return.

83 Account information for direct deposit or electronic funds withdrawal *(see page 29).*
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. 29)* [ ]

83a Account type: [ ] Personal checking **- or -** [X] Personal savings **- or -** [ ] Business checking **- or -** [ ] Business savings

83b Routing number 2 2 2 3 7 1 8 6 3 **83c** Account number 0 0 2 4 0 1 8 6 1 7

84 Electronic funds withdrawal *(see page 30)* ..... Date | Amount 00

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

▼ **Paid preparer must complete** *(see instr.)* ▼	Date
Preparer's signature	Preparer's NYTPRIN
Firm's name *(or yours, if self-employed)* SELF-PREPARED	Preparer's PTIN or SSN
Address	Employer identification number
	NYTPRIN excl. code
E-mail:	

▼ **Taxpayer(s) must sign here** ▼	
Your signature	
Your occupation SOFTWARE TEST ENGINEER	
Spouse's signature and occupation *(if joint return)*	
Date	Daytime phone number (585) 281-3665
E-mail: MTHAZEL2151@YAHOO.COM	

See instructions for where to mail your return.

201004141555

REV 10/27/14 TTO

Two-Year Comparison 2014

Name as Shown on Return: MARK T HAZEL

Social Security No.: 039-42-0131

	2013	2014	Difference	%
Federal Adjusted Gross Income	65,823.	89,641.	23,818.	36.18
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	65,823.	89,641.	23,818.	36.18
Standard or Itemized Deduction	7,700.	7,800.	100.	1.30
Dependent exemptions				
New York Taxable Income	58,123.	81,841.	23,718.	40.81
New York State tax	3,424.	4,956.	1,532.	44.74
New York State nonrefundable credits				
Other New York State taxes				
Total New York State taxes	3,424.	4,956.	1,532.	44.74
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	3,424.	4,956.	1,532.	44.74
Withholding	4,511.	6,147.	1,636.	36.27
Estimated tax payments, extension payment, and amount applied from prior year return				
Refundable credits				
Total payments and refundable credits	4,511.	6,147.	1,636.	36.27
Underpayment penalty				
Applied to next year's estimated tax				
Refund	1,087.	1,191.	104.	9.57
Balance Due				