Electronic Filing Instructions for your 2008 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 $2,753.00. Your tax refund should be mailed to you by check within three to four weeks after your return is accepted.
Where's My Refund?	Before you call the Internal Revenue Service with questions about your refund, give them three to four weeks 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

2008 Federal Tax Return Summary			
	Adjusted Gross Income	$	53,009.00
	Taxable Income	$	44,059.00
	Total Tax	$	7,363.00
	Total Payments/Credits	$	10,116.00
	Amount to be Refunded	$	2,753.00
	Effective Tax Rate		13.89%

Form **1040EZ**

Department of the Treasury — Internal Revenue Service

Income Tax Return for Single and Joint Filers With No Dependents (99) 2008

OMB No. 1545-0074

Label (See instructions)

Use the IRS label. Otherwise, please print or type.

LABEL HERE

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

Home address (number and street). If you have a P.O. box, see instructions. Apt no.

214 whittier Rd

City, town or post office. If you have a foreign address, see instructions. State ZIP code

rochester NY 14624-0000

You **must** enter your SSN(s) above.

Checking a box below will not change your tax or refund.

Presidential Election Campaign (see instrs)

Check here if you, or your spouse if a joint return, want $3 to go to this fund? ☐ **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	53,009.
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	53,009.
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. ☐ **You** ☐ **Spouse** If no one can claim you (or your spouse if a joint return), enter $8,950 if **single;** $17,900 if **married filing jointly.** See instructions	5	8,950.
6	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your **taxable income**	6	44,059.

Payments and tax

7	Federal income tax withheld from box 2 of your Form(s) W-2	7	10,116.
8a	**Earned income credit (EIC)** (see instructions)	8a	
b	Nontaxable combat pay election	8b	
9	Recovery rebate credit (see instructions)	9	0.
10	Add lines 7, 8a, and 9. These are your **total payments**	10	10,116.
11	**Tax.** Use the amount on **line 6 above** to find your tax in the tax table in the instruction booklet. Then, enter the tax from the table on this line	11	7,363.

Refund

Have it directly deposited! See instructions and fill in 12b, 12c, and 12d or Form 8888.

12a If line 10 is larger than line 11, subtract line 11 from line 10. This is your **refund.** If Form 8888 is attached, check here ☐ — **12a** 2,753.

b Routing number XXXXXXXXX c Type: ☐ Checking ☐ Savings

d Account number XXXXXXXXXXXXXXXXX

Amount you owe

13 If line 11 is larger than line 10, subtract line 10 from line 11. This is the **amount you owe.** For details on how to pay, see instructions — **13**

Third party designee

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

Designee's name — Phone no. — Personal ID no. (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 no.
		IT support	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	

Paid preparer's use only

Preparer's signature	Date	Check if self-employed ☐	Preparer's SSN or PTIN

Firm's name (or yours if self-employed), address, and ZIP code: Self-Prepared

EIN

Phone no.

Tax Payments Worksheet — 2008

► Keep for your records

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

Estimated Tax Payments for 2008 (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	04/15/08		04/15/08			04/15/08		
2	06/16/08		06/16/08			06/16/08		
3	09/15/08		09/15/08			09/15/08		
4	01/15/09		01/15/09			01/15/09		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2008					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2008 extensions					

Taxes Withheld From:	Federal	State	Local
10 Forms W-2	10,116.	3,795.	
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			
19 **Total Withholding** Lines 10 through 18c	10,116.	3,795.	
20 **Total Tax Payments for 2008**	10,116.	3,795.	

Prior Year Taxes Paid In 2008 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2007 extensions				
22 2007 estimated tax paid after 12/31/07				
23 Balance due paid with 2007 return				
24 Other (amended returns, installment payments, etc) . .				

Federal Carryover Worksheet 2008

► Keep for your records

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

2007 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			3,944.		1,072.	
Totals . .			3,944.		1,072.	

Other Tax and Income Information			**2007**	**2008**
1	Filing status	**1**	1 Single	1 Single
2	Number of exemptions for blind or over 65 (0 - 4)	**2**		
3	Itemized deductions after limitation	**3**	3,944.	3,795.
4	Check box if required to itemize deductions	**4**	☐	☐
5	Adjusted gross income	**5**	55,214.	53,009.
6	Tax liability for Form 2210 or Form 2210-F	**6**	8,043.	7,363.
7	Alternative minimum tax	**7**		
8	Federal overpayment applied to next year estimated tax	**8**		

QuickZoom to the IRA Information Worksheet for IRA information (see Tax Help) . . . . ►

Excess Contributions			**2007**	**2008**
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			**2007**	**2008**
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** 2008	**16 a**		
	b 2007	**b**		
	c 2006	**c**		
	d 2005	**d**		
	e 2004	**e**		
	f 2003	**f**		

Mark T Hazel 039-42-0131

Loss and Expense Carryovers (cont'd)				2007	2008
17 AMT Nonrecap'd net Sec 1231 losses from:	a	2008	17 a		
	b	2007	b		
	c	2006	c		
	d	2005	d		
	e	2004	e		
	f	2003	f		

Credit Carryovers				2007	2008
18 General business credit			18		
19 Adoption credit from:	a	2008	19 a		
	b	2007	b		
	c	2006	c		
	d	2005	d		
	e	2004	e		
	f	2003	f		
20 Mortgage interest credit from:	a	2008	20 a		
	b	2007	b		
	c	2006	c		
	d	2005	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		
24 Amount overpaid less earned income credit			24	2,684.	

Other Carryovers				2007	2008
25 Section 179 expense deduction disallowed			25		
26 Excess foreign housing deduction:	a	Taxpayer (Form 2555, line 46)	26 a		
	b	Taxpayer (Form 2555, line 48)	b		
	c	Spouse (Form 2555, line 46)	c		
	d	Spouse (Form 2555, line 48)	d		

Mark T Hazel 039-42-0131

Charitable Contribution Carryovers

27 **2007** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2007				
b 2006				
c 2005				
d 2004				
e 2003				

28 **2008** Carryover of charitable contributions from:	Other Property		Capital Gain	
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%
a 2008				
b 2007				
c 2006				
d 2005				
e 2004				

Estimated Rebate Due to Economic Stimulus Act of 2008

29 Total estimated economic stimulus rebate calculated on your 2007 tax return . . . . 600.

2007 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 POSTMARK - CERTIFICATION OF ELECTRONIC FILING

TAXPAYER: Mark T Hazel
PRIMARY SSN: 039-42-0131

FEDERAL RETURN SUBMITTED: Your return was electronically transmitted on 01/28/2009
FEDERAL RETURN ACCEPTANCE DATE:

Your return was electronically transmitted on 01/28/2009

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 15, 2009. 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 15, 2009, your Intuit electronic postmark will indicate April 15, 2009, 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 15, 2009, and a corrected return is submitted and accepted before April 20, 2009. If your return is submitted after April 20, 2009, 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, 2009. 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, 2009, and the corrected return is submitted and accepted by October 20, 2009.

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.

Mark T Hazel 039-42-0131

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 2008? . . . . ► 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 2008 . . . . ► ☐

Electronic Filing Instructions for your 2008 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-150) shows a refund due to you in the amount of $1,074.00. Your tax refund should be mailed to you by check within three to four weeks after your return is accepted.
Where's My Refund?	Before you call the New York State Department of Taxation and Finance with questions about your refund, give them three to four weeks 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 1-800-443-3200. You can also visit the New York State Department of Taxation and Finance web site at http://www.nystax.gov/.
What You Need to Sign	Sign and date E-File Signature Authorization within 1 day of acceptance.
Do Not Mail	Do not mail a paper copy of your tax return. Since you filed electronically, the New York State Department of Taxation and Finance already has your return.
What You Need to Keep	Your Electronic Filing Instructions (this form) Printed copy of your state and federal returns

2008 New York Tax Return Summary

Taxable Income	$	45,509.00
Total Tax	$	2,721.00
Total Payments/Credits	$	3,795.00
Amount to be Refunded	$	1,074.00

For office use only

New York State Department of Taxation and Finance

Cover Sheet for Form IT-150
Resident Income Tax Return

New York State • New York City • Yonkers

2008 **IT-150**

This is the cover sheet of your return. For your return to be complete you **must** include this cover sheet with both pages of Form IT-150 and all required attachments.

Taxpayer name and address		Software vendor code: 1030
Your social security number: 039-42-0131	Spouse's social security number:	
Your first name and middle initial: MARK T	Your last name: HAZEL	
Spouse's first name and middle initial:	Spouse's last name:	
Mailing address *(number and street or rural route)*: 214 WHITTIER RD	Apartment number:	
City, village or post office: ROCHESTER	State: NY	ZIP code: 14624-0000

Summary of return data

Federal adjusted gross income	53,009.
Total NYS adjusted gross income	53,009.
Total New York State tax withheld	3,795.
Total New York City tax withheld	
Total Yonkers tax withheld	
Amount to be refunded to you	1,074.
Amount you owe	

NYIA1204 10/20/08

Staple check or money order here.

0721081030

File this original scannable cover sheet with both pages of your tax return

2008

New York State Department of Taxation and Finance

Resident Income Tax Return (short form)

IT-150

New York State • New York City • Yonkers

Important: You **must** enter your social security number(s) in the spaces to the right.

Print or type

Your first name and middle initial	Your last name (for a joint return, enter spouse's name on line below)	Your social security number
MARK T	HAZEL	039-42-0131
Spouse's first name and middle initial	Spouse's last name	Spouse's social security number

Mailing address (see instructions) (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	School district name
ROCHESTER	NY	14624-0000	SPENCERPORT

Permanent home address *(see instructions)* (number and street or rural route) — Apartment number

School district code number 614

City, village, or post office	State	ZIP code
	NY	

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) Have you underreported your tax due on past returns? To correct this without penalty, visit us at ***www.nystax.gov***

(C) Were you a **New York City** resident for all of 2008? (*Part-year residents must file Form IT-201; see instructions)* . . . . Yes No X

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

(E) Enter your **2-digit special condition code number if applicable** *(see instructions)* . . . .

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

For help completing your return, see the combined instructions for Forms IT-150 and IT-201.

				Dollars
1	Wages, salaries, tips, etc	1.		53,009.
2	Taxable interest income	2.		
3	Ordinary dividends	3.		
4	Capital gain distributions	4.		
5	Taxable amount of IRA distributions. If received as a beneficiary, mark an *X* in the box	5.		
6	Taxable amount of pensions and annuities. If received as a beneficiary, mark an *X* in the box	6.		
7	Unemployment compensation	7.		
8	Taxable amount of social security benefits *(also enter on line 17 below)*	8.		
9	**Add lines 1 through 8**	9.		53,009.
10	Total federal adjustments to income *(see instructions)* *Identify:*	10.		
11	**Federal adjusted gross income** *(subtract line 10 from line 9)*	11.		53,009.
12	Interest income on state and local bonds and obligations *(but not those of NYS or its local governments)*	12.		
13	Public employee 414(h) retirement contributions from your wage and tax statements (see instrs)	13.		
14	Other *(see instrs)* *Identify:*	14.		
15	**Add lines 11 through 14**	15.		53,009.
16	Pensions of NYS and local governments and federal government *(see instructions)*	16.		
17	Taxable amount of social security benefits *(from line 8 above)*	17.		
18	Pension and annuity income exclusion *(see instructions)*	18.		
19	Other *(see instrs)* *Identify:*	19.		
20	Add lines 16 through 19	20.		
21	**New York adjusted gross income** *(subtract line 20 from line 15)*	21.		53,009.
22	New York standard deduction *(see instructions)*	22.	7,500.	
23	Dependent exemptions *(not the same as total federal exemptions; see instructions)*	23.		
24	Add lines 22 and 23	24.		7,500.
25	**Taxable income** *(subtract line 24 from line 21)*	25.		45,509.

NYIA1212 11/04/08

1501081030

Please file this original scannable return with the Tax Department.

				Dollars
26	**Taxable income** *(enter the amount from line 25 on page 1)*	26.		45,509.
27	New York State tax on line 26 amount *(see Tax Computation in the instructions)*	27.		2,721.
28	New York State (NYS) household credit *(from table 1, 2, or 3 in the instructions)*	28.		
29	Subtract line 28 from line 27 *(if line 28 is more than line 27, leave blank)*	29.		2,721.
30	New York City (NYC) resident tax *(see instructions)*	30.		
31	NYC household credit *(from table 4, 5 or 6 in the instructions)*	31.		
32	Subtract line 31 from line 30 *(if line 31 is more than line 30, leave blank)*	32.		
33	Yonkers resident income tax surcharge *(from* Yonkers worksheet *in the instructions)*	33.		
34	Yonkers **nonresident** earnings tax *(attach Form Y-203)*	34.		
35	**Sales or use tax** *(see instructions.* ***Do not leave line 35 blank****)*	35.		0.
36	**Voluntary contributions** *(whole dollars amounts only; see instructions)* Return a Gift to Wildlife **36a.** Missing/Exploited Children Fund **36b.** Breast Cancer Research Fund **36c.** Prostate Cancer Research Fund **36d.** Alzheimer's Fund **36e.** Olympic Fund **36f.** National 9/11 Memorial **36g.** **Total** *(add lines 36a through 36g)*	36.		
37	**Add line 29 and lines 32 through 36**	37.		2,721.
38	Empire State child credit *(attach Form IT-213)*	38.		
39	NYS/NYC child and dependent care credit *(attach Form IT-216)*	39.		
40	NYS earned income credit *(attach Form IT-215 or Form IT-209)*	40.		
41	NYS noncustodial parent earned income credit *(attach Form IT-209)*	41.		
42	Real property tax credit *(attach Form IT-214)*	42.		
43	College tuition credit *(attach Form IT-272)*	43.		
44	NYC school tax credit	44.		
45	NYC earned income credit *(attach Form IT-215 or Form IT-209)*	45.		
46	Total **New York State** tax withheld	46.	3,795.	
47	Total **New York City** tax withheld	47.		
48	Total **Yonkers** tax withheld	48.		
49	Total estimated tax payments / Amount paid with Form IT-370	49.		
50	Add lines 38 through 49	50.		3,795.
51	Total Amount **overpaid** – *If line 50 is* ***more than*** *line 37, subtract line 37 from line 50*	51.		1,074.
52	Amount of line 51 that you want refunded to you. **Complete line 56** **Refund**	52.		1,074.
53	Amount of line 51 that you want applied to your 2009 estimated tax (see instrs)	53.		
54	Total amount you owe *(if line 50 is* ***less than*** *line 37, subtract line 50 from line 37)* . **Complete line 56** **Owe**	54.		
55	Estimated tax penalty *(Include this amount in line 54 or reduce the overpayment on line 51; See instrs)*	55.		

Forms IT-2 and/or IT-1099-R must be completed and attached to your return instead of the wage and tax statements provided by your employer. Staple them to the top of this page.

See the *Step 11* instructions for the proper assembly of your return and attachments.

56 Account information *(see instructions)* Mark one: Refund – Direct deposit Owe – Electronic funds withdrawal

56a Routing number

Electronic funds withdrawal effective date

56b Account number

56c Account type Checking Savings

Third -party designee? *(see instrs)* Print designee's name Designee's phone number Personal identification number (PIN)

Yes **No** E-mail:

Paid preparer's use only **Taxpayer(s) sign here**

Preparer's signature SSN or PTIN: Your signature

Employer ID Number

Firm's name *(or yours, if self-employed)*
SELF-PREPARED

Your occupation
IT SUPPORT

Mark an ***X*** if self-employed

Address

Spouse's signature and occupation *(if joint return)*

Date

Daytime phone number
585-594-5217

Date

E-mail:

E-mail: MTHAZEL2151@YAHOO.COM

1502081030

Mail your completed return and any attachments to:
STATE PROCESSING CENTER, PO BOX 61000, ALBANY NY 12261-0001.
For information about private delivery services, see instructions.

Please file this original scannable return with the Tax Department.

2008

New York State Department of Taxation and Finance

Summary of W-2 Statements

New York State ● New York City ● Yonkers

IT-2

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

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 INDUSTRIES 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: 53,009.
Box 8 Allocated tips
Box 9 Advance EIC payment
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 14a Amount ▼Description
Box 14b Amount ▼Description
Box 14c Amount ▼Description

Box 15 State: NY
Box 16 State wages, tips, etc (for NYS): 53,009.
Box 17 New York State income tax withheld: 3,795.
Box 18 Local wages, tips, etc — 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 9 Advance EIC payment
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 14a Amount ▼Description
Box 14b Amount ▼Description
Box 14c 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 — 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)

Please file this original scannable form with the Tax Department.
If you or your paid preparer use software to produce this form, it might have a two-dimensional (2-D) barcode on the bottom of this page. It will appear as a rectangular-shaped object with very small boxes and white spaces. This barcode will be used to efficiently process your entries on this form.

1021081030

Two-Year Comparison 2008

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

	2007	2008	Difference	%
Federal Adjusted Gross Income	55,214.	53,009.	-2,205.	-3.99
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	55,214.	53,009.	-2,205.	-3.99
Standard or Itemized Deduction	7,500.	7,500.	0.	0.00
Dependent exemptions				
New York Taxable Income	47,714.	45,509.	-2,205.	-4.62
New York State tax	2,872.	2,721.	-151.	-5.26
New York State nonrefundable credits				
Other New York State taxes				
Total New York State taxes	2,872.	2,721.	-151.	-5.26
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	2,872.	2,721.	-151.	-5.26
Withholding	3,944.	3,795.	-149.	-3.78
Estimated tax payments, extension payment, and amount applied from prior year return	0.		0.	
Refundable credits				
Total payments and refundable credits	3,944.	3,795.	-149.	-3.78
Underpayment penalty				
Applied to next year's estimated tax				
Refund	1,072.	1,074.	2.	0.19
Balance Due				