

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 \$2,849.00. 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 
2010 Federal Tax Return Summary	Adjusted Gross Income       \$ 57,540.00         Taxable Income       \$ 48,190.00         Total Tax       \$ 8,225.00         Total Payments/Credits       \$ 11,074.00         Amount to be Refunded       \$ 2,849.00         Effective Tax Rate       14.29%



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 2010 taxes:

Your federal refund is: \$ 2,849.00

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

Many happy returns from TurboTax.



### Audit Defense Order Confirmation

Thank you for choosing Audit Defense for your 2010 tax return. This service is provided by TaxResources, Inc. (TRI) an independent tax firm.

Name:Mark T HazelConfirmation Number:TTWG9132269381Amount 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 2010 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

**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.* 



Form <b>1040E</b> 2	Z	Department of the Treas Income Tax Joint Filers	Return f	ior Singl		2010	D			OMB No. 1545-0074
Name,		first name			Last name	,	- 1		Your soc	ial security number
Address,	Маз				_			039-	42-013	•
and SSN		ے ہے۔ hint return, spouse's first name	3		Hazel Last name					ocial security number
		init rotarni, opodoo o mot name							, pouco o o	
See separate instructions.										
		e address (number and street)	I. If you have a P.C	J. DOX, SEE INSTRUC	ctions.		Apt no.			ure the SSN(s)
		4 whittier Rd						-	above	e are correct.
	City,	town or post office. If you have	e a foreign addres	s, see instructions	5.	State ZIP co	de	Ch	ecking a	box below will not
Presidential	roc	chester				NY 146	524-0000	c	hange y	our tax or refund.
Election Campaign								-		
(see instrs)		Check here if you, or y	our spouse if	a ioint return.	. want \$3 to a	o to this fund?		►	You	Spouse
Income	1									
	•	Attach your Form(s)	W-2				vv-2.		. 1	57,540.
Attack									<u> </u>	3773101
	2	Taxable interest. If th Form 1040EZ							2	
W-2 here.						<u></u>			· 2	
Enclose,	3	Unemployment comp dividends (see instru	pensation and	Alaska Perm	nanent Fund				2	
		aividends (see instru	cuons)						. ა	
payment.	4	Add lines 1, 2, and 3	This is your a	adjusted aro	ss income .				. 4	57,540.
Vou mov ho		If someone can clain								3773101
Attach2Form(s)W-2 here.Enclose,3but do notattach, anypayment.4You may be entitled to a larger deduc- tion if you file Form 1040A or 1040. See Begin in the instructions.5	_	applicable box(es) be	elow and ente	r the amount	from the wor	ksheet.	,			
	You	Spou	se							
	If no one can claim y			t return) ente	r \$9 350 if <b>sir</b>	nale: \$18 700 if	ŧ			
		married filing jointly	<b>y.</b> See instruct	tions		· · · · · · · ·	· · · · · · · · · ·		. 5	9,350.
	6	Subtract line 5 from I	ine 4. If line 5	is larger than	n line 4. enter	-0 This is vo	our			
Instructions.	-	taxable income							▶ 6	48,190.
Payments,										
Before You Begin in the instructions.	7	Federal income tax w	vithheld from I	Form(s) W-2	and 1099				. 7	10,674.
and Tax	8	Making work pay cre	dit (see works	sheet on page	2)				· 8	400.
	9 a	a Earned income cred	dit (EIC) (see	instructions)					. 9a	
	I	b Nontaxable combat p	bay election .			9b	)			
	10									
		total payments and							▶ 10	11,074.
	11	Tax. Use the amount Then, enter the tax fr	t on line 6 abo	<b>ove</b> to find yo	our tax in the t	ax table in the	e instructions.		11	8,225.
	40.									0,225.
Refund	128	a If line 10 is larger tha				•				0.040
Have it directly deposited! See		If Form 8888 is attac	ched, check he	ere ►			<u></u>		► 12a	2,849.
instructions and fill in 12b, 12c,	►	<b>b</b> Routing number	XXXXXXX	xx	► c Type:	Checking	Savings			
and 12d or Form 8888.					<b>0</b> 1)po.			•		
0000.	► (	d Account number	XXXXXXX	XXXXXXXX	XXX					
Amount	13	If line 11 is larger tha	n line 10 sub	tract line 10 f	rom line 11 T	his is the <b>am</b>	ount vou owe			
You Owe		For details on how to							▶ 13	
Third Dorty	Do yo	ou want to allow another per	rson to discuss th	nis return with th	ie IRS (see instru	uctions)?		. <b>Y</b> e	es. Comple	ete the following. X No
Third Party Designee										
Designee	Desig name	nee's			Phone no.	•		Personano. (PIN	alID N)►	
Sign		r penalties of perjury, I declare	that I have exami	ined this return a		w knowledge and	belief it is true corr	,	/	s all amounts and
Here		es of income I received during								
Joint return?	Your	signature			Date	Your occupation			Dav	time phone no.
See instructions.									,	
Keep	Spour	oc'o oignoturo. If o joint roturn	hath must sign		Data	IT suppo				
a copy for your records.	Spou	se's signature. If a joint return,	, <b>both</b> must sign.		Date	Spouse's occupa	auvii			
				1			1	1		
	Print/	Type preparer's name		Preparer's signa	ature		Date	Check	if	PTIN
Paid	L							self-empl	oyed	
Preparer	Firm'	sname 🕨 Self	-Prepare	d						
Use Only		s address						Firm's	EIN 🕨	
-								Phone		
									-	

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### **Tax Payments Worksheet**

2010

Keep for your records

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

#### Estimated Tax Payments for 2010 (If more than 4 payments for any state or locality, see Tax Help)

	Fed	deral		State					Local		
	Date	Amount	Date	e Am	ount	ID	Dat	e	Amount	10	כ
1	04/15/10		04/15,	/10			04/15	5/10			
2	06/15/10		06/15,	/10			06/15	5/10			
3	09/15/10		09/15,	/10			09/15	5/10			
4	01/18/11		01/18,	/11			01/18	8/11		_	
5_										_	
_								-		_ _	_
	Estimated										<u> </u>
Тах	A Payments C	<b>Other Than With</b> , see Tax Help)	holding	Federa	I	St	ate	ID	Local		ID
7 8 9 Tax	Totals Line	estates and trust es 1 through 7 . ions d From:			   Fed	deral		State		Local	
10 11 12 13 14 15 16 17 18 a	Forms W-2 Forms 109 Forms 109 Schedules Forms 109 Social Sec Form 1099	2	9-G DID	· · · · · · · · · · · · · · · · · · ·	1	0,67	4.	4,1	<u></u>		
	C Other with Total With	holding holding holding Lines 1 Payments for 20	-			0,67			128. 128.		
		es Paid In 201 or localities, see				St	ate	ID	Local		ID
21 22 23 24	2009 estim Balance du	ith 2009 extension ated tax paid aft ue paid with 2009 anded returns, in	er 12/31/09 9 return	· · · · · · · ·	· ·   _						

# Federal Carryover Worksheet ► Keep for your records

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

#### 2009 State and Local Income Tax Information (See Tax Help)

-	(a) tate or ocal ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With- held/Pmts 4,158.	(e Paid Retu	With	(f) Total Over- payment 1,108.	(g) Applied Amount
Tota		nd Income Info		4,158.			1,108. 1,108.	2010
1 2 3 4 5 6 7 8	Numbe Itemize Check Adjuste Tax lia	er of exemptions ad deductions af box if required t ad gross income bility for Form 2 tive minimum ta	for blind or over ter limitation o itemize deducti 210 or Form 2210 ax	65 (0 - 4) ons 	· · · · · · · · · · · · · · · · · · ·	1 2 3 4 5 6 7 8	<u>1</u> Single <u>4,158.</u> <u>57,819.</u> 8,156.	<u>1</u> Single <u>4,128.</u> <u>57,540.</u> 7,825.

QuickZoom to the IRA Information Worksheet for IRA information

Excess Contributions				2009	2010
<ul> <li>9 a Taxpayer's excess Archer MSA contributions as</li> <li>b Spouse's excess Archer MSA contributions as of</li> <li>10 a Taxpayer's excess Coverdell ESA contributions as</li> <li>b Spouse's excess Coverdell ESA contributions as</li> <li>11 a Taxpayer's excess HSA contributions as of 12/37</li> <li>b Spouse's excess HSA contributions as of 12/31</li> </ul>	f 12/: as of s of 1 1	31 i 12/31 2/31	9 a b 10 a b 11 a b		
Loss and Expense Carryovers				2009	2010
<ul> <li>12 a Short-term capital loss.</li> <li>b AMT Short-term capital loss</li> <li>13 a Long-term capital loss.</li> <li>b AMT Long-term capital loss.</li> <li>c AMT Long-term capital loss.</li> <li>14 a Net operating loss available to carry forward</li> <li>b AMT Net operating loss available to carry forward</li> <li>15 a Investment interest expense disallowed</li> <li>c b AMT Investment interest expense disallowed</li> <li>d Nonrecaptured net Section 1231 losses from:</li> </ul>	  d	· · · · · · · · · · · · · · · · · · ·	12 a b 13 a b 14 a b 15 a b 16 a c d e f		

#### Federal Carryover Worksheet page 3

Mark T Hazel

039-42-0131

#### Charitable Contribution Carryovers

26	2009 Carryover of	Other I	Property	Capita	l Gain
	charitable contributions from:	<b>(a)</b> 50%	<b>(b)</b> 30%	<b>(c)</b> 30%	<b>(d)</b> 20%
b c d	2007				
27	<b>2010</b> Carryover of charitable contributions from:	Other I (a) 50%	Property (b) 30%	Capita (c) 30%	l Gain (d) 20%
b c d					
28	Amount overpaid less earned inc	come credit			2,619.

2009 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
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ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING TAXPAYER: Mark T Hazel PRIMARY SSN: 039-42-0131

FEDERAL RETURN SUBMITTED: January 25, 2011 12:57 PM PST FEDERAL RETURN ACCEPTANCE DATE:

#### Your return was electronically transmitted on 01/25/2011

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 18, 2011. 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 18, 2011, your Intuit electronic postmark will indicate April 18, 2011, 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 18, 2011, and a corrected return is submitted and accepted before April 22, 2011. If your return is submitted after April 22, 2011, 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, 2011. 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, 2011, and the corrected return is submitted and accepted by October 20, 2011.

#### 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.

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#### SMART WORKSHEET FOR: Form 1040EZ: Individual Tax Return

	Earned Income Credit Smart Worksheet
A B C	Date of birth (mm/dd/yyyy)
D	United States for more than half of 2010?
Е	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 2010



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

Balance Due/ Refund	<pre>    Your New York state tax return (Form IT   you in the amount of \$1,098.00. Your ta   you by check within three to four weeks  </pre>	x ref	und should be mailed to
Where's My Refund?	Before you call the New York State Depa with questions about your refund, give processing time from the date your retu have not received your refund, or the a expected, contact the New York State De Finance directly at 1-800-443-3200. You State Department of Taxation and Finance http://www.nystax.gov/.	them rn is mount partm can	three to four weeks accepted. If then you is not what you ent of Taxation and also visit the New York
No Signature Document Needed	   No signature form is required since you   electronically.   	sign	ed your return
What You Need to Keep	   Your Electronic Filing Instructions (th   Printed copy of your state and federal 		
2010 New York Tax Return Summary	   Taxable Income   Total Tax   Total Payments/Credits   Amount to be Refunded	ሩን ሩን ሩን ሩን	50,040.00 3,030.00 4,128.00 1,098.00

For office use only

New York State Department of Taxation and Finance Cover Sheet for Form IT-150

2010 **IT-150** 

Resident Income Tax Return New York State • New York City • Yonkers

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.

Software vendor code Taxpayer name and address 1030 Your social security number Spouse's social security number 039-42-0131 Your first name and middle initial Your last name MARK Т HAZEL Spouse's first name and middle initial Spouse's last name Mailing address (number and street or rural route) Apartment number 214 WHITTIER RD ZIP code City, village or post office State 14624-0000 ROCHESTER NY Country (if not United States) Summary of return data 57,540. Federal adjusted gross income . . al - Do Not File 57,540. 4,128. Total NYS adjusted gross income Total New York State tax withheld Total New York City tax withheld Total Yonkers tax withheld . . . . . . . . 1,098. Amount to be refunded to you . . . . . . NYIA1204 09/28/10

Staple check or money order here.

# Form Not Final - Do Not File



File this original scannable cover sheet with both pages of your tax return Resident Income Tax Return (short form)

2010

-	Ju must child	1 your 500iui 5	ecurity number(s) in the spa		igin.						
Your first name an	d middle initial	Yo	ur last name (for a joint return, enter	spouse's nam	e on line	below)		Your social	I security nu	umber	
MARK			AZEL					039-42	-0131		
Spouse's first nam	ne and middle initi	ial Sp	ouse's last name					▼ Spouse's s	social secur	ity numb	ber
Mailing address (s	ee instructions)	(number and stree	t or rural route)		Apar	tment number		New York State	county of re	sidence	9
ZI4 WHII								MONF			
City, village, or pos			State ZIP code	Country	(if not Un	ted States)		School district na			
ROCHESTE			NY 14624-0000		<b>A</b> = = =			• SPEN	NCERPO	DRT	
ermanent home address	s (see instruction	ns) (number and s	treet of rural route)		Араг	tment number		School district	t		<i>с</i> 1
ty, village, or post office		Sta	ate ZIP code					code number			61
ty, village, of post enfoc		N		Dece		Taxpayer's dat	e of death	• Spo	ouse's date	of death	ו
		IN	1	inform	nation	•		•			
	1 X	Single									
	IA	Single		(C)	Were	you a New Y	ork City res	sident			
(A) Filing status –	2	Married filing	n joint return			of 2010? (Pa file Form IT-2				No	
mark an	-		social security number above)		maor		, 000 110	10) 100		110	
X in one box:	3	Married filing	g separate return	(D)		ou be claime		endent			
	-		social security number above)			other taxpaye ?(see instruct		Yes		No	
aple check	4	Head of hou	sehold (with qualifying person)	(E)		your 2-chara	,		aada		
money der here				(E)		blicable (see i			coue	•	
	5	Qualifving w	idow(er) with dependent chi	- I							
			iuuw(ei) with dependent chi	a	If anr	dicable aleo					
r help completing you	irect deposit t	to avoid paper	check if refund delays.			blicable, also or racter special	condition c	ode	Dollar	s 7,54	40
or help completing your 1 Wages, salario 2 Taxable intere	irect deposit t rreturn, see the es, tips, etc est income	to avoid paper	check if refund delays.		2-cha		condition c		Dollar 5	s 7,54	40
or help completing your 1 Wages, salarie 2 Taxable intere 3 Ordinary divide	irect deposit t r return, see the es, tips, etc est income ends	to avoid paper	check if refund delays.		2-cha		condition c	ode	Dollar	s 7,54	40
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or help completing your1Wages, salarie2Taxable intere3Ordinary divide4Capital gain di5Taxable amout6Taxable amout7Unemployment8Taxable amout9Add lines 1 th10Total federal adjut	irect deposit to rueturn, see the es, tips, etc est income ends istributions int of IRA dist int of pension nt compensati int of social so hrough 8 istments to incor	to avoid paper combined instruc- tributions. If re- ns and annuitie ion ecurity benefit me (see instruction	check if refund delays. tions for Forms IT-150 and IE-20 acceived as a beneficiary, man as. If received as a beneficia as (also enter on line 17 belo	rk an <b>X</b> in th ry, mark ar	2-cha	DO	condition c 	ode	5		40
<ol> <li>Wages, salarie</li> <li>Wages, salarie</li> <li>Taxable intere</li> <li>Ordinary divide</li> <li>Capital gain di</li> <li>Taxable amout</li> <li>Tatable amout</li> <li>T</li></ol>	irect deposit to rueturg, see the es, tips, etc est income ends istributions int of IRA dist int of pension int of pension int of social so hrough 8 ustments to incor sted gross in	to avoid paper combined instruc- tributions. If re as and annuitie ion ecurity benefit me (see instruction come (subtra	check if refund delays. tions for Forms IT-150 and IT-20 acceived as a beneficiary, man es. If received as a beneficia as (also enter on line 17 belo ons) Identify:	rk an <b>X</b> in th ry, mark ar w)	2-cha	DO	condition c 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	ode	5	57,54	40
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or help completing your         1       Wages, salarie         2       Taxable intere         3       Ordinary divide         4       Capital gain di         5       Taxable amout         6       Taxable amout         7       Unemploymer         8       Taxable amout         9       Add lines 1 th         10       Total federal adjust         12       Interest income of         13       Public employee         14       Other (see instrs)	irect deposit to return, see the es, tips, etc est income ends istributions unt of IRA dist unt of pension nt compensation of social se hrough 8 ustments to incom sted gross in on state and loca 414(h) retirement ) Identify:	to avoid paper combined instant tributions. If re as and annuitie ion ecurity benefit me (see instruction income (subtra al bonds and oblig	check if refund delays. tions for Forms IT-150 and IT-207 acceived as a beneficiary, main as. If received as a beneficiar as (also enter on line 17 below toons) Identify: act line 10 from line 9) gations (but not those of NYS or its	rk an X in th ry, mark ar w)	2-cha	DO	condition c 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	ode	5	57,54 57,54	40 40
or help completing your         1       Wages, salarie         2       Taxable intere         3       Ordinary divide         4       Capital gain di         5       Taxable amout         6       Taxable amout         7       Unemployment         8       Taxable amout         9       Add lines 1 th         10       Total federal adjust         12       Interest income o         13       Public employee         14       Other (see instrs)         15       Add lines 1 th	irect deposit to rueturn, see the es, tips, etc est income ends istributions int of IRA dist int of pension for compensation of social se hrough 8 ustments to incom sted gross in on state and loca 414(h) retirement ) Identify: through 14	to avoid paper combined instruc- tributions. If re- ns and annuitie ion ecurity benefit me (see instruction ncome (subtrational al bonds and oblig nt contributions fr	check if refund delays. tions for Forms IT-150 and IT-202 deceived as a beneficiary, mark as. If received as a beneficiar as (also enter on line 17 below to be cons) Identify: act line 10 from line 9) gations (but not those of NYS or its rom your wage and tax statements	rk an X in th ry, mark ar w)	2-cha	DO	condition c 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	ode	5	57,54	40 40
or help completing your         1       Wages, salarie         2       Taxable intere         3       Ordinary divide         4       Capital gain di         5       Taxable amout         6       Taxable amout         7       Unemployment         8       Taxable amout         9       Add lines 1 th         10       Total federal adjust         11       Federal adjust         12       Interest income o         13       Public employee         14       Other (see instrs)         15       Add lines 11         16       Pensions of NYS	irect deposit to rueturn, see the es, tips, etc est income ends istributions unt of IRA dist unt of pension th compensati unt of social so hrough 8 ustments to incor sted gross in on state and loca 414(h) retirement ) Identify: through 14 and local gover	to avoid paper combined instruc- tributions. If re- ns and annuitie ion ecurity benefit me (see instruction al bonds and oblig nt contributions fr	check if refund delays. tions for Forms IT-150 and IT-207 acceived as a beneficiary, mark as. If received as a beneficia as (also enter on line 17 below ons) Identify: act line 10 from line 9) gations (but not those of NYS or its rom your wage and tax statements ral government (see instructions)	rk an X in th ry, mark ar w)	2-cha	DO	condition c 	ode	5	57,54 57,54	40 40
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or help completing your         1       Wages, salarie         2       Taxable intere         3       Ordinary divide         4       Capital gain di         5       Taxable amout         6       Taxable amout         7       Unemploymer         8       Taxable amout         9       Add lines 1 th         10       Total federal adjus         11       Federal adjus         12       Interest income o         13       Public employee         14       Other (see instrs)         15       Add lines 11 th         16       Pensions of NYS         17       Taxable amout         18       Pension and a         19       Other (see instrs)         20       Add lines 16 th         21       New York adj         22       New York star         23       Dependent exem	irect deposit to rueturg, see the est, tips, etc est income ends istributions unt of IRA dist unt of pension int compensati int of social se hrough 8 ustments to incor sted gross in on state and loca 414(h) retiremen <i>i dentify:</i> through 14 and local gover unt of social se annuity incom <i>i dentify:</i> hrough 19 justed gross indard deducti ptions <i>(not the</i> s	to avoid paper combined instru- tributions. If re- as and annuitie ion ecurity benefit income (subtra- al bonds and oblig int contributions fr mments and fede ecurity benefit ie exclusion (s income (sub- ion (see instru-	check if refund delays. tions for Forms IT-150 and IT-201 deceived as a beneficiary, main as. If received as a beneficiar as (also enter on line 17 belowns) identify: the fine 10 from line 9) gations (but not those of NYS or its from your wage and tax statements aral government (see instructions) as (from line 8 above) the instructions) tract line 20 from line 15)	rk an X in th ry, mark ar w) s local govern (see instrs)	2-cha me box <i>X</i> in th <i>ments</i> ) 16. 17. 18.	DO	condition c 	ot	5	57,54 57,54 57,54	40 40 40
or help completing your         1       Wages, salarie         2       Taxable intere         3       Ordinary divide         4       Capital gain di         5       Taxable amout         6       Taxable amout         7       Unemploymer         8       Taxable amout         9       Add lines 1 th         10       Total federal adjust         11       Federal adjust         12       Interest income o         13       Public employee         14       Other (see instrs)         15       Add lines 11 th         16       Pensions of NYS         17       Taxable amout         18       Pension and a         19       Other (see instrs)         20       Add lines 16 th         21       New York star	irect deposit to rueturg, see the es, tips, etc est income ends istributions ant of IRA dist unt of pension of compensati ant of social se hrough 8 ustments to incor sted gross in on state and local 414(h) retirement <i>) Identify:</i> through 14 and local gover annuity incom <i>) Identify:</i> through 19 justed gross indard deducti ptions (not the s and 23	to avoid paper combined instant tributions. If re- ns and annuitie ion ecurity benefit me (see instruction come (subtra- al bonds and oblig int contributions fr rnments and fede ecurity benefit a exclusion (see instru- same as total fede	c check if refund delays. ctions for Forms IT-150 and IT-207 exceived as a beneficiary, main as. If received as a beneficiar as (also enter on line 17 below for the 10 from line 9) jations (but not those of NYS or its rom your wage and tax statements ral government (see instructions) as (from line 8 above) there instructions) tract line 20 from line 15) rotions) evaluations see instructions)	rk an X in th ry, mark ar w) s local govern (see instrs)	2-cha ne box X in th <i>X</i> in th 16. 17. 18. 19. 22.	DO	condition c 	ot	5555	57,54 57,54 57,54	40 40 40



IT-15	<b>50</b> (2010) (Page <b>2</b> ) MARK T HAZEL	039	9-42-0131	Dollars
26	Taxable income (from line 25 on page 1)		26.	50,040.
27	New York State tax on line 26 amount (see Tax Computation in the ins	tructions)	27.	3,030.
28	New York State (NYS) household credit (from table 1, 2, or 3 in the ins	tructions)	28.	
29	Subtract line 28 from line 27 (if line 28 is more than line 27, leave blank	k)	29.	3,030.
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 blan	k) /	32.	t File
33	Yonkers resident income tax surcharge (from Yonkers worksheet in the	e 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 only; see instructions)			
	Fund a 36a. Fund b 36b.	Fund c 36c.		
	Fund <b>d</b> 36d. Fund e 36e.	Fund f 36f.		
	Fund <b>g 36g.</b> Fund <b>h 36h.</b>	Total (add lines 36a thro	ugh 36h) <b>36.</b>	
37	Add line 29 and lines 32 through 36		37.	3,030.
38	Empire State child credit (attach Form IT-213)	38.		
39	NYS/NYC child and dependent care credit (attach Form IT-216)	39.		orms IT-2, IT-1099-R, and/or
40	NYS earned income credit (attach Form IT-215 or Form IT-209)	40.		-1099-UI must be completed nd attached to your return
41	NYS noncustodial parent earned income credit (attach Form IT-209)	41.		ee instructions)
42	Real property tax credit (attach Form IT-214)	42.	S	taple them (and any other
43	College tuition credit (attach Form IT-272)	43.		pplicable forms) to the top of
44	NYC school tax credit	44.	uı	is page.
45	NYC earned income credit (attach Form IT-215 or Form IT-209)	45.	f.,	ee the Step 11 instructions r the proper assembly of
46	Total New York State tax withheld	46.		our return and attachments.
47	Total New York City tax withheld	47.		
48	Total <b>Yonkers</b> tax withheld	48.		
49	Total estimated tax payments / Amount paid with Form IT-370	49.		4 1 2 0
50	Add lines 38 through 49		<sup>50</sup> .	
51	Amount overpaid (If line 50 is more than line 37, subtract line 37 from	n line 50) in line 50)	51. beck refund 52.	1,090.
52	Amount of line 51 to be refunded by (mark one): direct deposit (mil	<i>in line 56)</i> or X paper ch	leck refund 52.	1,098.
53	Amount of line 51 that you want applied to your <b>2011</b>	53.		
54	estimated tax (see instrs) Amount you <b>owe</b> (if line 50 is <b>less than</b> line 37, subtract line 50 from li			
54		ill in line 56	54.	
55	Estimated tax penalty (Include this amount in line 54 or reduce the overpayment on lin		55.	
56	Account information for direct deposit or electronic funds withdrawal			
	If the funds for your payment (or refund) would come from (or go to) an		. mark an <b>X</b> in this bo	x (see instrs)●
56 a		tronic funds withdrawal ef		
	Account number • 56c	Account type	Checking	Savings
			•	-
	I -party designee? Print designee's name instrs)		Designee's phone number	Personal identification number (PIN)
Yes	No E-mail:			
	Paid preparer must complete (see instructions)		<ul> <li>Taxpayer(s) mus</li> </ul>	st sign here ▼
Prepa	arer's signature Date:	Your signature		
	Preparer's NYTPRIN			
►		•		
	name (or yours, if self-employed)			
SEI	JF-PREPARED	• IT SUP	PORT	
Addre	• Employer ID Number	Spouse's signature	e and occupation (if joint retui	m)
_	Form Not Find Self-employed		<b>D</b> NO	✓ Daytime phone number $585-269-5377$
E-ma		E-mail: M'I'H <i>A</i>	AZEL2151@YAHO	
6	instructions for whore to mail your return			1502101030
	instructions for where to mail your return.			
NYI	A1212 12/20/10			
	Please file this original scannable return with the Tax Department	nt.	II	

New York State Department of Taxation and Finance

#### Summary of W-2 Statements 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.

# Taxpayer's first name and middle initial Taxpayer's last name Your social security number MARK THAZEL Spouse's first name and middle initial 039-42-0131 Spouse's first name and middle initial Spouse's last name Final - DO Notes and social security number

	Box c Employer's name a			100			
W-2 Record 1			LLC PO BOX 60				TNT 46010
Record	1919 W. COOK		•	FORT		<b>D</b> 10	IN 46818
Devil. England ideations		Box 12a	Amount 15.	▼ Code C	Box 15 State NY	Box 16	State wages, tips, etc <b>(for NYS)</b> 57,540.
Box b Employer identificat	ion number (EIN)	Day 40h	⊥ J . Amount	C ▼ Code	IN I	Day 47	New York State income tax withheld
		BOX 12D	Amount	• Code		Box 17	4,128.
This W-2 record is for		Day 12a	Amount	▼ Code		Day 49	
(mark an <b>X</b> in one box,		BOX 12C	Amount	* Code	1 10	Box 18	Local wages, tips, etc (see instr)
Taxpayer X	Spouse	D 40 d	A	▼ Code	Locality a		
Box 1 Wages, tips, othe	7,540.	Box 12d	Amount	* Code	Locality b	D 40	
	,540.				1 10	Box 19	Local income tax withheld
Box 8 Allocated tips		5 44			Locality a		
		Box 13	Statutory employee		Locality b		
Box 9 Advance EIC pay	ment	Box 14a	Amount	Description			Box 20 Locality name
							Locality a
Box 10 Dependent care b	benefits	Box 14b	Amount	Description			Locality b
Box 11 Nonqualified plan	15	Box 14c	Amount	▼ Description			
		B0x 140					Corrected (W-2c)
Do not detach. W-2 Record 2	Box c Employer's nem	e and full ac	dress (including ZIP code)	<del>31 - I</del>	)0		ot File
		Box 12a	Amount	▼ Code	Box 15 State	Box 16	State wages, tips, etc (for NYS)
Box b Employer identificat	ion number (EIN)						
		Box 12b	Amount	▼ Code		Box 17	New York State income tax withheld
This W-2 record is for							
(mark an <b>X</b> in one box,	):	Box 12c	Amount	▼ Code		Box 18	Local wages, tips, etc (see instr)
Taxpayer	Spouse				Locality a		
Box 1 Wages, tips, othe	er compensation	Box 12d	Amount	▼ Code	Locality b		
						Box 19	Local income tax withheld
Box 8 Allocated tips					Locality a		
		Box 13	Statutory employee		Locality b		
Box 9 Advance EIC pay	vment	Box 14a	Amount	Description			Box 20 Locality name
							Locality a
Box 10 Dependent care b	benefits	Box 14b	Amount	Description			Locality b
Box 11 Nonqualified plan	ıs	Box 14c	Amount	▼ Description			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 baxes and white spaces. This barcode will used to efficiently process your entries on this form.



IT-2

2010

## **Two-Year Comparison**

2010

Name as Shown on Return MARK T HAZEL	Social Security No. 039-42-0131			
	2009	2010	Difference	%
Federal Adjusted Gross Income	57,819.	57,540.	-279.	-0.48
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	57,819.	57,540.	-279.	-0.48
Standard or Itemized Deduction	7,500.	7,500.	0.	0.00
Dependent exemptions				
New York Taxable Income	50,319.	50,040.	-279.	-0.55
New York State tax	3,050.	3,030.	-20.	-0.66
New York State nonrefundable credits				
Other New York State taxes				
Total New York State taxes	3,050.	3,030.	-20.	-0.66
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	3,050.	2 0 2 0	20	0 66
	3,050.	3,030.		-0.66
Withholding	4,158.	4,128.	-30.	-0.72
Estimated tax payments, extension				
payment, and amount applied from				
prior year return				
Refundable credits				
Total payments and refundable credits	4,158.	4,128.	-30.	-0.72
Underpayment penalty				
Applied to next year's estimated tax				
Refund	1,108.	1,098.	-10.	-0.90
Balance Due	<u> </u>	±,000.		0.20

nyiw9701.SCR 11/28/10