

PREPARER NAME  
139-19 31 ROAD  
FLUSHING, NY 11354  
718-539-4821

AUGUST 10, 2011

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK, NY 10003

FOR PROFESSIONAL SERVICES RENDERED IN THE PREPARATION OF YOUR 2010 INCOME TAX RETURN.

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AMOUNT DUE

\$1,400.00

**2011 CARRYFORWARD INFORMATION**

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

2010 state and local tax refund. (This amount may or may not be taxable in 2011) .....	_____
Charitable contributions carryover to 2011 .....	_____
Estimated short-term capital loss carryover .....	5,245
Estimated long-term capital loss carryover .....	39,290
2010 tax liability (for 2011 Form 2210 purposes) .....	63,112
Refund amount applied to 2011 .....	_____
Disallowed investment interest in 2010 .....	_____
Additional state taxes paid .....	_____
Form 8396: Mortgage interest credit from 2008 .....	_____
Mortgage interest credit from 2009 .....	_____
Mortgage interest credit from 2010 .....	_____
Form 8801: Minimum tax credit carryforward .....	_____
Potential 2011 IRA contribution from 2010 tax refund .....	_____

**Sample Return**

NOL carryforward:		<b>Regular Tax</b>		<b>AMT Tax</b>			
from 1996	_____	from 2003	_____	from 1996	_____	from 2003	_____
from 1997	_____	from 2004	_____	from 1997	_____	from 2004	_____
from 1998	_____	from 2005	_____	from 1998	_____	from 2005	_____
from 1999	_____	from 2006	_____	from 1999	_____	from 2006	_____
from 2000	_____	from 2007	_____	from 2000	_____	from 2007	_____
from 2001	_____	from 2008	_____	from 2001	_____	from 2008	_____
from 2002	_____	from 2009	_____	from 2002	_____	from 2009	_____
Gross NOL generated in 2010 .....	_____			Gross AMT NOL generated in 2010 .....	_____		
To be absorbed in carryback period ...	_____			To be absorbed in carryback period ...	_____		
Net carryforward from 2010 .....	_____			Net carryforward from 2010 .....	_____		
Total carryforward to 2011 .....	_____			Total carryforward to 2011 .....	_____		

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2011 .....
- General Business Credit carryforward to 2011 .....
- First-Time Homebuyer Credit Repayment carryforward to 2011 .....
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2011.

2010TAXPAYERS NYC-202 TAX FOR 2011.....	7,782
NY INCOME TAX DUE ON 2010 RETURN PAYABLE IN 2011..	11,812
NY 2010 TAX FOR 2011 UNDERPMT PENALTY FORM.....	15,750
NY 2010 ESTIMATED TAX PAYMENT PAID IN 2011.....	1,000

Declaration Control Number (DCN)

00 - 222121 - 00000 - 1

IRS Use Only -- Do not write or staple in this space.

Form 8453

U.S. Individual Income Tax Transmittal for an IRS e-file Return

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

For the year January 1-December 31, 2010

2010

See instructions.

Please print or type.	PRINT CLEARLY	Your first name and initial JOHN	Last name TAXPAYER	Your social security number 002-21-1252
		If a joint return, spouse's first name and initial	Last name	Spouse's social security no.
		Home address (number and street). If you have a P.O. box, see instructions.		Apt. no.
		City, town or post office, state, and ZIP code NEW YORK NY 10003		

Sample Return

Important! You must enter your SSN(s) above.

FILE THIS FORM ONLY IF YOU ARE ATTACHING ONE OR MORE OF THE FOLLOWING FORMS OR SUPPORTING DOCUMENTS.

Check the applicable box(es) to identify the attachments.

- Appendix A, Statement by Taxpayer Using the Procedures in Rev. Proc. 2009-20 to Determine a Theft Loss Deduction Related to a Fraudulent Investment Arrangement
- Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes (or equivalent contemporaneous written acknowledgement)
- Form 2848, Power of Attorney and Declaration of Representative (or POA that states the agent is granted authority to sign the return)
- Form 3115, Application for Change in Accounting Method
- Form 3468 -- attach a copy of the first page of NPS Form 10-168a, Historic Preservation Certification Application (Part 2 -- Description of Rehabilitation), with an indication that it was received by the Department of the Interior or the State Historic Preservation Officer, together with proof that the building is a certified historic structure (or that such status has been requested)
- Form 4136 -- attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- Form 5713, International Boycott Report
- Form 8283, Noncash Charitable Contributions, Section A, (if any statement or qualified appraisal is required) or Section B, Donated Property, and any related attachments (including any qualified appraisal or partnership Form 8283)
- Form 8332, Release/Revocation of Release of Claim to Exemption for Child by Custodial Parent (or certain pages from a divorce decree or separation agreement, that went into effect after 1984 and before 2009) (see instructions)
- Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities
- Form 8864 -- attach the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller or a certificate from the provider identifying the product as renewable diesel and, if applicable, a statement from the reseller
- Form 8885, Health Coverage Tax Credit, and all required attachments
- Schedule D-1, Continuation Sheet for Schedule D (Form 1040) (or a statement with the same information), if you elect not to include your transactions on the electronic short-term capital gain (loss) or long-term capital gain (loss) records

DO NOT SIGN THIS FORM.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8453 (2010)

# IRS e-file Signature Authorization

Department of the Treasury  
Internal Revenue Service

- ▶ Do not send to the IRS. This is not a tax return.
- ▶ Keep this form for your records. See instructions.

**2010**

Declaration Control Number (DCN) ▶ 00222121000000

Taxpayer's name <b>JOHN TAXPAYER</b>	Social security number 002-21-1252
Spouse's name	Spouse's social security number

<b>Part I Tax Return Information -- Tax Year Ending December 31, 2010</b> (Whole Dollars Only)	
1 Adjusted gross income (Form 1040, line 33; Form 1040A, line 21; Form 1040EZ, line 4) . . . . .	1 187,370
2 Total tax (Form 1040, line 60; Form 1040A, line 37; Form 1040EZ, line 11) . . . . .	2 63,112
3 Federal income tax withheld (Form 1040, line 61; Form 1040A, line 38; Form 1040EZ, line 7) . . . . .	3
4 Refund (Form 1040, line 74a; Form 1040A, line 46a; Form 1040EZ, line 12a; Form 1040-SS, Part I, line 12a) . . . . .	4
5 Amount you owe (Form 1040, line 76; Form 1040A, line 48; Form 1040EZ, line 13) . . . . .	5 45,021

### Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2010, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). In order for me to initiate further payments, I request that the IRS send me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

I authorize PREPARER NAME to enter or generate my PIN 07344 as my signature on my tax year 2010 electronically filed income tax return. **Enter five numbers, but do not enter all zeros**

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Spouse's PIN: check one box only**

I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my signature on my tax year 2010 electronically filed income tax return. **Enter five numbers, but do not enter all zeros**

I will enter my PIN as my signature on my tax year 2010 electronically filed income tax return. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

### Practitioner PIN Method Returns Only -- continue below

#### Part III Certification and Authentication -- Practitioner PIN Method Only

**ERO's EFIN/PIN.** Enter your six-digit EFIN followed by your five-digit self-selected PIN. 22212114142  
**do not enter all zeros**

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2010 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Publication 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**ERO Must Retain This Form -- See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

# Sample Return

**A voucher is printed at the bottom of this page.**

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-V for the year 2010. This is different than the voucher that is on the IRS website.**

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) on your check or money order.

Mail payment to:

INTERNAL REVENUE SERVICE CENTER  
P O BOX 37008  
HARTFORD CT 06176-0008

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

▼ DETACH HERE ▼

Form **1040-V** (2010)

10 1040VS1 TWF 41740 Copyright Forms (Software Only) - 2010 TW

Department of the Treasury  
Internal Revenue Service

2010

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) on your check or money order.

Enter the amount  
of your payment ▶

45,021

1043

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK NY 10003

INTERNAL REVENUE SERVICE CENTER  
P O BOX 37008  
HARTFORD CT 06176-0008

002211252 FU TAXP 30 0 201012 610

# Sample Return

**A voucher is printed at the bottom of this page.**

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-ES for the year 2011.  
This is different than the voucher that is on the IRS website.**

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher
- ▶ Mail payment before April 18, 2011

Mail payment to:

Internal Revenue Service  
P O BOX 37007  
HARTFORD, CT 06176-0007

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

▼ DETACH HERE ▼

Form **1040-ES** (2011)

10 1040ESS1 TWF 41742 Copyright Forms (Software Only) - 2010 TW

Department of the Treasury  
Internal Revenue Service

2011

Form 1040-ES Payment Voucher #1  
Calendar year - Due April 18, 2011

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher

Enter the amount  
of your payment ▶

17,400

1043

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK NY 10003

P O BOX 37007  
HARTFORD, CT 06176-0007

002211252 FU TAXP 30 0 201112 430

# Sample Return

**A voucher is printed at the bottom of this page.**

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-ES for the year 2011.  
This is different than the voucher that is on the IRS website.**

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher
- ▶ Mail payment before June 15, 2011

Mail payment to:

Internal Revenue Service  
P O BOX 37007  
HARTFORD, CT 06176-0007

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

▼ DETACH HERE ▼

Form **1040-ES** (2011)

10 1040ESS2 TWF 41743 Copyright Forms (Software Only) - 2010 TW

Department of the Treasury  
Internal Revenue Service

2011

Form 1040-ES Payment Voucher #2  
Calendar year - Due June 15, 2011

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher

Enter the amount  
of your payment ▶

17,400

1043

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK NY 10003

P O BOX 37007  
HARTFORD, CT 06176-0007

002211252 FU TAXP 30 0 201112 430

# Sample Return

**A voucher is printed at the bottom of this page.**

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-ES for the year 2011.  
This is different than the voucher that is on the IRS website.**

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher
- ▶ Mail payment before September 15, 2011

Mail payment to:

Internal Revenue Service  
P O BOX 37007  
HARTFORD, CT 06176-0007

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

▼ DETACH HERE ▼

Form **1040-ES** (2011)

10 1040ESS3 TWF 41744 Copyright Forms (Software Only) - 2010 TW

Department of the Treasury  
Internal Revenue Service

2011

Form 1040-ES Payment Voucher #3  
Calendar year - Due Sept. 15, 2011

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher

Enter the amount  
of your payment ▶

17,400

1043

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK NY 10003

P O BOX 37007  
HARTFORD, CT 06176-0007

002211252 FU TAXP 30 0 201112 430



# Sample Return

**A voucher is printed at the bottom of this page.**

**NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-ES for the year 2011.  
This is different than the voucher that is on the IRS website.**

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on your check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher
- ▶ Mail payment before January 17, 2012

Mail payment to:

Internal Revenue Service  
P O BOX 37007  
HARTFORD, CT 06176-0007

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

▼ DETACH HERE ▼

Form **1040-ES** (2011)

10 1040ESS4 TWF 41745 Copyright Forms (Software Only) - 2010 TW

Department of the Treasury  
Internal Revenue Service

2011

Form 1040-ES Payment Voucher #4  
Calendar year - Due Jan. 17, 2012

- ▶ Do not send cash
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your social security number (SSN) and 2011 Form 1040ES on check or money order.
- ▶ Enclose, but do not staple or attach, your payment with this voucher

Enter the amount  
of your payment ▶

17,400

1043

JOHN TAXPAYER  
10 EAST 10 STREET APT 5  
NEW YORK NY 10003

P O BOX 37007  
HARTFORD, CT 06176-0007

002211252 FU TAXP 30 0 201112 430

2010 FORM 1116 AMT WORKSHEET FOR HOME MORTGAGE INTEREST - LINE 4a

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

Category of Income PASSIVE CATEGORY INCOME

Country VARIOUS

Sample Return

- 1. Enter gross foreign source income of the type shown on Form 1116 AMT. **Do not** enter income excluded on Form 2555 or Form 2555-EZ ..... 1. 805
- 2. Enter gross income from all sources. **Do not** enter income excluded on Form 2555 or Form 2555-EZ ... 2. 352,483
- 3. Divide line 1 by line 2 and enter the result as a decimal (rounded to at least four places) ..... 3. 0.0023
- 4. Enter deductible home mortgage interest (from lines 10 through 13 of Schedule A (Fm 1040)) ..... 4. 1,513
- 5. Multiply line 4 by line 3. Enter the result here and on the appropriate Form 1116 AMT, line 4a ..... 5. 3

**2010 SELF-EMPLOYED HEALTH INSURANCE DEDUCTION WORKSHEET -- LINE 29**

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

- Before you begin:** ✓ If, during 2010, you were an eligible trade adjustment assistance (TAA) recipient, alternative TTA (ATAA) recipient, reemployment trade adjustment assistance (RTAA) recipient, or Pension Benefit Guaranty Corporation pension recipient, see Form 1040 instructions.
- ✓ Be sure you have read the **Exception** in the instructions to see if you can use this worksheet instead of Pub. 535 to figure your deduction.

**Sample Return**

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|
| <p>1. Enter the total amount paid in 2010 for health insurance coverage established under your business (or the S corporation in which you were a more-than-2% shareholder) for 2010 for you, your spouse, and your dependents. Effective March 30, 2010, the insurance can cover any child of yours who was under age 27 at the end of 2010. But do not include amounts for any month you were eligible to participate in an employer-sponsored health plan or amounts paid from retirement plan distributions that were nontaxable because you are a retired public safety officer .....</p> | 1.  | <u>18,811</u>  |
| <p>2a. Enter your net profit* and any other earned income** from the business under which the insurance plan is established, minus any deductions on Form 1040, lines 28. Do not include not include amounts exempt from self-employment tax *** .....</p>                                                                                                                                                                                                                                                                                                                                     | 2a. | <u>208,621</u> |
| <p>2b. For purposes of this line, complete Schedule SE as a worksheet. When completing Section A, line 3, or Section B, line 3, of the worksheet Schedule SE, treat the amount from Form 1040, line 29, as zero. Enter on this line the amount shown on that worksheet Schedule SE, Section A, line 6, or Section B, line 13 .....</p>                                                                                                                                                                                                                                                         | 2b. | <u>9,415</u>   |
| <p>2c. Subtract line 2b from line 2a .....</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2c. | <u>199,206</u> |
| <p>3. <b>Self-employed health insurance deduction.</b> Enter the <b>smaller</b> of line 1 or line 2c here and on Form 1040, line 29. <b>Do not</b> include this amount in figuring any medical expense deduction on Schedule A .....</p>                                                                                                                                                                                                                                                                                                                                                       | 3.  | <u>18,811</u>  |

\* If you used either optional method to figure your net earnings from self-employment, do not enter your net profit. Instead, enter the amount from Schedule SE, Section B, line 4b.

\*\* **Earned income** includes net earnings and gains from the sale, transfer, or licensing of property you created. However it does not include capital gain income. If you were a more-than-2% shareholder in the S corporation under which the insurance plan is established, earned income is your Medicare wages (box 5 of Form W-2) from that corporation.

\*\*\* Include amounts exempt from self-employment tax if they are exempt because you are a member of a religious order who has taken a vow of poverty or because you have an approved Form 4361 or 4029.

## 2010 SEHID LINE 2b WORKSHEET - SHORT SCHEDULE SE

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

### Section A -- Short Schedule SE

**Note:** This worksheet calculates the deduction for one-half of SE tax without reducing SE income by allowable SEHID on Form 1040, line 29.  
Line 13 of this worksheet carries to line 2b of the SEHID worksheet.

1a. Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A .....	1a.	
b. If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code Y .....	1b.	(                    )
2. Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report .....	2.	208,621
3. Combine lines 1a, 1b, and 2 .....	3.	208,621
4. <b>Net earnings from self-employment.</b> Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; <b>do not</b> file this schedule unless you have an amount on line 1b ..... ▶	4.	192,661
<b>Note.</b> If line 4 is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
5. <b>Self-employment tax.</b> If the amount on line 4 is: <ul style="list-style-type: none"> <li>● \$106,800 or less, multiply line 4 by 15.3% (.153). Enter the result here.</li> <li>● More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$13,243.20 to the result. Enter the total here .....</li> </ul>	5.	18,830
6. <b>Deduction for one-half of self-employment tax.</b> Multiply line 5 by 50% (.50). Enter the result here and on SEHID worksheet, line 2b .....	6.	9,415

Sample Return

# 2010 QUALIFIED DIVIDENDS and CAPITAL GAIN TAX WORKSHEET -- LINE 44

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

**Before you begin:** ✓ See the instructions for line 44 in the instructions to see if you can use this worksheet to figure your tax.

✓ If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040.

Sample Return

1. Enter the amount from Form 1040, line 43. However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the worksheet in the instructions . . . . .		158,453		1. <u>158,453</u>
2. Enter the amount from Form 1040, line 13 . . . . .				
3. Are you filing Schedule D?*				
<input checked="" type="checkbox"/> <b>Yes.</b> Enter the <b>smaller</b> of line 15 or 16 of Schedule D. If either line 15 or line 16 is a loss, enter -0-	}	0		
<input type="checkbox"/> <b>No.</b> Enter the amount from Form 1040, line 13		0		
4. Add lines 2 and 3 . . . . .		5,907		4. <u>5,907</u>
5. If filing Form 4952, (used to figure investment interest expense deduction), enter any amount from line 4g of that form. Otherwise, enter -0- . . . . .		0		5. <u>0</u>
6. Subtract line 5 from line 4. If zero or less, enter -0- . . . . .		5,907		6. <u>5,907</u>
7. Subtract line 6 from line 1. If zero or less, enter -0- . . . . .		152,546		7. <u>152,546</u>
8. Enter: \$34,000 if single or married filing separately, \$68,000 if married filing jointly or qualifying widow(er), \$45,550 if head of household.	}			
		34,000		8. <u>34,000</u>
9. Enter the smaller of line 1 or line 8 . . . . .		34,000		9. <u>34,000</u>
10. Enter the smaller of line 7 or line 9 . . . . .		34,000		10. <u>34,000</u>
11. Subtract line 10 from line 9. This amount is taxed at 0% . . . . .		0		11. <u>0</u>
12. Enter the smaller of line 1 or line 6 . . . . .		5,907		12. <u>5,907</u>
13. Enter the amount from line 11 . . . . .		0		13. <u>0</u>
14. Subtract line 13 from line 12 . . . . .		5,907		14. <u>5,907</u>
15. Multiply line 14 by 15% (.15) . . . . .				15. <u>886</u>
16. Figure the tax on the amount on line 7. If the amount on line 7 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet . . . . .				16. <u>39,231</u>
17. Add lines 15 and 16 . . . . .				17. <u>40,117</u>
18. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure this tax. If the amount on line 7 is \$100,000 or more, use the Tax Computation Worksheet . . . . .				18. <u>41,180</u>
19. <b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 17 or line 18. Also include this amount on Form 1040, line 44. (If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44. Instead, enter it on line 4 of the worksheet in the instructions) . . . . .				19. <u>40,117</u>

\* If you are filing Form 2555 or 2555-EZ, see the footnote in the worksheet in the instructions before completing this line.

**2010 SCHEDULE D TAX WORKSHEETS**

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

**CAPITAL LOSS CARRYOVER WORKSHEET - LINES 6 and 14**

Use this worksheet to figure your capital loss carryovers from 2009 to 2010 if your 2009 Schedule D, line 21, is a loss and **(a)** that loss is a smaller loss than the loss on your 2009 Schedule D, line 16, **or (b)** the amount on your 2009 Form 1040, line 41 (or your 2009 Form 1040NR, line 38, if applicable), reduced by any amount on your 2009 Form 8914, line 2, is less than zero. Otherwise, you do not have any carryovers.

1. Enter the amount from your 2009 Form 1040, line 41, or your Form 1040NR, line 38. If a loss, enclose the amount in parentheses	1.	35,529
2. Did you file Form 8914 (to claim an exemption amt for housing a Midwestern displaced individual) for 2009? <input checked="" type="checkbox"/> <b>No.</b> Enter -0-.		
<input type="checkbox"/> <b>Yes.</b> Enter the amount from your 2009 Form 8914, line 2	2.	
3. Subtract line 2 from line 1. If the result is less than zero, enclose it in parentheses	3.	35,529
4. Enter the loss from your 2009 Schedule D, line 21, as a positive amount.	4.	1,500
5. Combine lines 3 and 4. If zero or less, enter -0-	5.	37,029
6. Enter the <b>smaller</b> of line 4 or line 5	6.	1,500
<b>If line 7 of your 2009 Schedule D is a loss, go to line 7; otherwise, enter -0- on line 7 and go to line 11.</b>		
7. Enter the loss from your 2009 Schedule D, line 7, as a positive amount	7.	8,296
8. Enter any gain from your 2009 Schedule D, line 15. If a loss, enter -0- . . . . . 8.	8.	0
9. Add lines 6 and 8	9.	1,500
10. <b>Short-term capital loss carryover for 2010.</b> Subtract line 9 from line 7. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 6	10.	6,796
<b>If line 15 of your 2009 Schedule D is a loss, go to line 11; otherwise, skip lines 11 through 15.</b>		
11. Enter the loss from your 2009 Schedule D, line 15, as a positive amount	11.	37,699
12. Enter any gain from your 2009 Schedule D, line 7. If a loss, enter -0- . . . . . 12.	12.	0
13. Subtract line 7 from line 6. If zero or less, enter -0- . . . . . 13.	13.	0
14. Add lines 12 and 13	14.	
15. <b>Long-term capital loss carryover for 2010.</b> Subtract line 14 from line 11. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 14	15.	37,699

**AMT CAPITAL LOSS CARRYOVER WORKSHEET - LINES 6 and 14**

Use this worksheet to figure your capital loss carryovers from 2009 to 2010 if your 2009 Schedule D, line 21, is a loss and **(a)** that loss is a smaller loss than the loss on your 2009 Schedule D, line 16, **or (b)** the amount on your 2009 Form 1040, line 41 (or your 2009 Form 1040NR, line 38, if applicable), reduced by any amount on your 2009 Form 8914, line 2, is less than zero. Otherwise, you do not have any carryovers.

1. Enter the amount from your 2009 Form 1040, line 41, or your Form 1040NR, line 38. If a loss, enclose the amount in parentheses	1.	35,529
2. Did you file Form 8914 (to claim an exemption amt for housing a Midwestern displaced individual) for 2009? <input checked="" type="checkbox"/> <b>No.</b> Enter -0-.		
<input type="checkbox"/> <b>Yes.</b> Enter the amount from your 2009 Form 8914, line 2	2.	
3. Subtract line 2 from line 1. If the result is less than zero, enclose it in parentheses	3.	35,529
4. Enter the loss from your 2009 Schedule D, line 21, as a positive amount.	4.	1,500
5. Combine lines 3 and 4. If zero or less, enter -0-	5.	37,029
6. Enter the <b>smaller</b> of line 4 or line 5	6.	1,500
<b>If line 7 of your 2009 Schedule D is a loss, go to line 7; otherwise, enter -0- on line 7 and go to line 11.</b>		
7. Enter the loss from your 2009 Schedule D, line 7, as a positive amount	7.	8,296
8. Enter any gain from your 2009 Schedule D, line 15. If a loss, enter -0- . . . . . 8.	8.	0
9. Add lines 6 and 8	9.	1,500
10. <b>Short-term capital loss carryover for 2010.</b> Subtract line 9 from line 7. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 6	10.	6,796
<b>If line 15 of your 2009 Schedule D is a loss, go to line 11; otherwise, skip lines 11 through 15.</b>		
11. Enter the loss from your 2009 Schedule D, line 15, as a positive amount	11.	37,699
12. Enter any gain from your 2009 Schedule D, line 7. If a loss, enter -0- . . . . . 12.	12.	0
13. Subtract line 7 from line 6. If zero or less, enter -0- . . . . . 13.	13.	0
14. Add lines 12 and 13	14.	
15. <b>Long-term capital loss carryover for 2010.</b> Subtract line 14 from line 11. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 14	15.	37,699

**2011 SCHEDULE D TAX WORKSHEETS**

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

**CAPITAL LOSS CARRYOVER WORKSHEET\***

Use this worksheet to figure your capital loss carryovers from 2010 to 2011 if your 2010 Schedule D, line 21, is a loss and **(a)** that loss is a smaller loss than the loss on your 2010 Schedule D, line 16, **or (b)** the amount on your 2010 Form 1040, line 41 (or your 2010 Form 1040NR, line 38, if applicable), reduced by any amount on your 2010 Form 8914, line 6, is less than zero. Otherwise, you do not have any carryovers.

**Sample Return**

1. Enter the amount from your 2010 Form 1040, line 41, or your 2010 Form 1040NR, line 38. If a loss, enclose the amount in parentheses	1.	<u>162,103</u>
2. Did you file Form 8914 (to claim an exemption amt for housing a Midwestern displaced individual) for 2010? <input checked="" type="checkbox"/> <b>No.</b> Enter -0-.		
<input type="checkbox"/> <b>Yes.</b> Enter the amount from your 2010 Form 8914, line 6	2.	
3. Subtract line 2 from line 1. If the result is less than zero, enclose it in parentheses	3.	<u>162,103</u>
4. Enter the loss from your 2010 Schedule D, line 21, as a positive amount	4.	<u>1,500</u>
5. Combine lines 3 and 4. If zero or less, enter -0-	5.	<u>163,603</u>
6. Enter the <b>smaller</b> of line 4 or line 5	6.	<u>1,500</u>
<b>If line 7 of your 2010 Schedule D is a loss, go to line 7; otherwise, enter -0- on line 7 and go to line 11.</b>		
7. Enter the loss from your 2010 Schedule D, line 7, as a positive amount	7.	<u>6,745</u>
8. Enter any gain from your 2010 Schedule D, line 15. If a loss, enter -0- 8. _____		
9. Add lines 6 and 8	9.	<u>1,500</u>
10. <b>Short-term capital loss carryover for 2011.</b> Subtract line 9 from line 7. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 6	10.	<u>5,245</u>
<b>If line 15 of your 2010 Schedule D is a loss, go to line 11; otherwise, skip lines 11 through 15.</b>		
11. Enter the loss from your 2010 Schedule D, line 15, as a positive amount	11.	<u>39,290</u>
12. Enter any gain from your 2010 Schedule D, line 7. If a loss, enter -0- 12. _____		
13. Subtract line 7 from line 6. If zero or less, enter -0- 13. _____		
14. Add lines 12 and 13	14.	
15. <b>Long-term capital loss carryover for 2011.</b> Subtract line 14 from line 11. If zero or less, enter -0-. If more than zero, also enter this amount on Schedule D, line 14	15.	<u>39,290</u>

**\*\* The carryover losses computed on this form are estimates. The actual 2011 carryovers will be computed using the worksheet found in the 2011 Schedule D instructions.**

**2010 GROSS INCOME FROM ALL SOURCES, FORM 1116, LINE 3e**

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

# Sample Return

1. Total wages and salaries	1.	
2. Interest	2.	358
3. Ordinary dividends	3.	6,491
4. Taxable refunds of state and local income taxes	4.	1,359
5. Alimony received	5.	
6. Schedule C gross income	6.	337,939
7. Capital gains:		
Total gain from Schedule D grid		51
Short-term gain from Schedule(s) K-1		
Long-term gain from Schedule(s) K-1		
Short-term gain from Form 6252		
Long-term gain from Form 6252		
Short-term gain from Form 4684		
Long-term gain from Form 4684		
Short-term gain from Form 6781		
Long-term gain from Form 6781		
Short-term gain from Form 8824		
Long-term gain from Form 8824		
Long term-gain from Form 4797		
Long-term gain from Form 2439		
Capital gain distributions		1,243
<b>Total capital gain or (loss)</b>	7.	1,294
8. Ordinary gains from sale on Form 4797	8.	
9. Taxable IRA distributions	9.	
10. Taxable pensions and annuities	10.	
11. Rental real estate income (Schedule E)	11.	71
12. Farm income (Schedule F)	12.	
13. Gross farm rental income (Form 4835)	13.	
14. Unemployment compensation	14.	
15. Taxable social security benefits	15.	
16. Other income	16.	4,971
17. <b>Total Form 1116, line 3e income</b>	17.	352,483



**2010 FOREIGN TAX CREDIT REGULAR CARRYOVER STATEMENT**

JOHN TAXPAYER  
002-21-1252

Foreign Income Category: PASSIVE CATEGORY INCOME

Regular	2000	2001	2002	2003	2004
1. Foreign tax paid or accrued .....					
2. Reduction in foreign taxes ** .....					
3. Foreign tax credit available (line 1 less line 2) .....					
4. Prior year credit used					
5. Current year credit available .....					
6. Current yr credit used					
7. Carryback .....					
8. Carryover (line 3 less lines 4, 6, and 7) ...					

Sample Return

Regular	2005	2006	2007	2008	2009	2010
1. Foreign tax paid or accrued .....				73	39	121
2. Reduction in foreign taxes ** .....						
3. Foreign tax credit available (line 1 less line 2) .....				73	39	121
4. Prior year credit used				73	39	
5. Current year credit available .....						121
6. Current yr credit used						121
7. Carryback .....						
8. Carryover (line 3 less lines 4, 6, and 7) ...						
9. Total foreign taxes from all available years to be carried to 2011. (Add line 8, 2001 - 2010 only) .....						0

\*\* Due to excluded income from Sec. 911 (Form 2555).

# 2010 EARNED INCOME WORKSHEET - LINE 1a

Keep for Your Records

**Before you begin:**

- ✓ If you are claiming the additional child tax credit and have already completed Form 8812, enter on line 1a of Schedule M the amount from line 4a of your Form 8812. Do not complete the worksheet below.
- ✓ Disregard community property laws when figuring the amounts to enter on this worksheet.
- ✓ If married filing jointly, include your spouse's amounts with yours when completing this worksheet.

Sample Return

<p>1a. Enter the amount from line 7 of Form 1040A or Form 1040 .....</p> <p>b. Enter the amount of any nontaxable combat pay received. Also enter this amount on Schedule M, line 1b. This amount should be shown in box 12 of Form(s) W-2 .....</p> <p><b>Next</b>, if you are filing Schedule C, C-EZ, F, or SE, or you received a Schedule K-1 (Form 1065 or Form 1065-B), go to line 2a. Otherwise, skip lines 2a through 2e and go to line 3.</p> <p>2a. Enter any statutory employee income reported on line 1 of Schedule C or C-EZ .....</p> <p>b. Enter any net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1.* Reduce any Schedule K-1 amounts as described in the instructions for completing Schedule SE in the Partner's Instructions for Schedule K-1. <b>Do not</b> include on this line any statutory employee income or any other amounts exempt from self-employment tax. Options and commodities dealers must add any gain or subtract any loss (in the normal course of dealing in or trading section 1256 contracts) from section 1256 contracts or related property .....</p> <p>c. Enter any net farm profit or (loss) from Schedule F, line 36, and from farm partnerships, Schedule K-1 (Form 1065), box 14, code A.* Reduce any Schedule K-1 amounts as described in the instructions for completing Schedule SE in the Partner's Instructions for Schedule K-1. <b>Do not</b> include on this line any amount exempt from self-employment tax .....</p> <p>d. If you used the farm optional method to figure net earnings from self-employment, enter the amount from Schedule SE, Section B, line 15. Otherwise, skip this line and enter on line 2e the amount from line 2c .....</p> <p>e. If line 2c is a profit, enter the <b>smaller</b> of line 2c or line 2d. If line 2c is a (loss), enter the (loss) from line 2c .....</p> <p>3. Combine lines 1a, 1b, 2a, 2b, and 2e. If zero or less, <b>stop</b>. Do not complete the rest of this worksheet. You <b>do not</b> qualify for the making work pay credit .....</p> <p>4. Enter any amount included on line 1a that is:</p> <p>a. A scholarship or fellowship grant not reported on Form W-2 .....</p> <p>b. For work done while an inmate in a penal institution (enter "PRI" and this amount on the dotted line next to line 7 of Form 1040A or 1040) .....</p> <p>c. A pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan (enter "DFC" and this amount on the dotted line next to line 7 of Form 1040A or 1040). This amount may be shown in box 11 of your Form W-2. If you received such an amount but box 11 is blank, contact your employer for the amount received as a pension or annuity .....</p> <p>5a. Enter any amount included on line 3 that is also included on Form 2555, line 43, or Form 2555-EZ, line 18. <b>Do not</b> include any amount that is also included on line 4a, 4b, or 4c above .....</p> <p>b. Enter the portion, if any, of the amount from Form 2555, line 44, that is also included on Schedule E in partnership net income or (loss) or deducted on: Form 1040, line 27; Schedule C; Schedule C-EZ; or Schedule F .....</p> <p>c. Subtract line 5b from line 5a .....</p> <p>6. Enter the amount from Form 1040, line 27 .....</p> <p>7. Add lines 4a through 4c, 5c, and 6 .....</p> <p>8. Subtract line 7 from line 3. Enter the result here and on Schedule M, line 1a .....</p>	<p>1a.</p> <p>1b.</p> <p>2a.</p> <p>2b.</p> <p>2c.</p> <p>2d.</p> <p>2e.</p> <p>3.</p> <p>4a.</p> <p>4b.</p> <p>4c.</p> <p>5a.</p> <p>5b.</p> <p>5c.</p> <p>6.</p> <p>7.</p> <p>8.</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">208,621</p> <p>_____</p> <p style="text-align: right;">208,621</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;">9,163</p> <p style="text-align: right;">199,458</p>
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\* If you have any Schedule K-1 amounts and you are not required to file Schedule SE, complete the appropriate line(s) of Schedule SE, Section A. Put your name and social security number on Schedule SE and attach it to your return.

## 2010 PUBLICLY TRADED PARTNERSHIP WORKSHEET

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

Partnership Name: PTP ENERGY TRANSFER PAR 73-1493906

Form or schedule to be reported on	Current year		Prior year	Overall gain or loss	
	(a) Net income	(b) Net loss	(c) Unallowed loss	(d) Gain	(e) Loss
PTP ENERGY TRANSFER PAR					626

Sample Return

1a Total income from column (a) .....	1a			
b Total loss from column (b) .....	b	626		
c Total prior year loss from column (c) .....	c			
2 Overall income or loss (combine lines 1a, 1b, and 1c) .....	2	-626		
<b>If the result on line 2 is net income or zero, all losses are allowed.</b>				
3 Nonpassive income (amount from line 2 if greater than zero, or amount from line 1a if disposed in a fully taxable transaction) .....	3			
4 Nonpassive losses (amount from line 1b and 1c if disposed in a fully taxable transaction) .....	4			
5 Passive income (amount from line 1a, not to exceed the sum of 1b and 1c) .....	5			
6 Passive losses allowed (amount from line 1b and 1c not to exceed line 1a) .....	6			

### ALLOCATION OF UNALLOWED LOSSES

Form or schedule to be reported on	(a) Loss (See instructions)	(b) Ratio (See instructions)	(c) Unallowed loss (See instructions)
PTP ENERGY TRANSFER PARTN SCH E PT 2	626	1.00000	626
<b>Total</b> .....	<b>626</b>	<b>1.00</b>	<b>626</b>

### ALLOWED LOSSES

Form or schedule to be reported on	(a) Loss (See instructions)	(b) Unallowed loss (See instructions)	(c) Allowed loss (See instructions)
PTP ENERGY TRANSFER PARTN SCH E PT 2	626	626	
<b>Total</b> .....	<b>626</b>	<b>626</b>	

## 2010 PUBLICLY TRADED PARTNERSHIP WORKSHEET

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

Partnership Name: PTP ENTERPRISE PRODUCTS 76-0568219

Form or schedule to be reported on	Current year		Prior year	Overall gain or loss	
	(a) Net income	(b) Net loss	(c) Unallowed loss	(d) Gain	(e) Loss
PTP ENTERPRISE PRODUCTS FORM 4797	71	27		71	27

Sample Return

1a Total income from column (a) .....	1a	71	
b Total loss from column (b) .....	b	27	
c Total prior year loss from column (c) .....	c		
2 Overall income or loss (combine lines 1a, 1b, and 1c) .....	2	44	
<b>If the result on line 2 is net income or zero, all losses are allowed.</b>			
3 Nonpassive income (amount from line 2 if greater than zero, or amount from line 1a if disposed in a fully taxable transaction) .....	3	44	
4 Nonpassive losses (amount from line 1b and 1c if disposed in a fully taxable transaction) .....	4		
5 Passive income (amount from line 1a, not to exceed the sum of 1b and 1c) .....	5	27	
6 Passive losses allowed (amount from line 1b and 1c not to exceed line 1a) .....	6	27	

### ALLOCATION OF UNALLOWED LOSSES

Form or schedule to be reported on	(a) Loss (See instructions)	(b) Ratio (See instructions)	(c) Unallowed loss (See instructions)
<b>Total</b> .....		<b>1.00</b>	

### ALLOWED LOSSES

Form or schedule to be reported on	(a) Loss (See instructions)	(b) Unallowed loss (See instructions)	(c) Allowed loss (See instructions)
<b>Total</b> .....			

## 2011 FEDERAL ESTIMATED TAX WORKSHEET

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

		2010 (a)	Adjustment (b)		2011 ES Tax (c)
<b>Filing Status</b> .....		MFS			MFS
1. Ordinary income (Wages, Interest, Taxable Refunds, Rental, etc) .....	1.	5,816			5,816
2. Qualified dividends and/or long term capital gain income (15% or 10%) .....	2.	5,907			5,907
3. Self-employment income: .....	3.	208,621			208,621
4. Adjustments .....	4.	32,974	-816		32,158
5. <b>Adjusted Gross Income</b> (lines 1-3 less line 4) .....	5.	187,370			188,186
6. Itemized deductions .....	6.	25,267			25,267
7. Standard deduction .....	7.	5,700			5,800
8. Personal exemptions ..... <u>1</u> .....	8.	3,650			2,433
9. Taxable income (line 5 less (the greater of line 6 or line 7) less line 8) .....	9.	158,453			160,486
10. Tax ..... CAP. GAINS TAX WKSHT .....	10.	40,117			40,624
11. Alternative minimum tax .....	11.	4,790			4,790
12. Nonrefundable credits .....	12.	121			121
13. <b>Summary</b> (lines 10 and 11 less line 12) .....	13.	44,786			45,293
14. Other taxes (2010 Form 1040, lines 56, 58, and 59) .....	14.	18,326			16,694
15. Refundable credits (2010 Form 1040, lines 63, 64a, 65, 66, 70 - not Form 2439 or 8801) .....	15.				
16. Gross 2010 estimated tax (line 13 plus line 14 less line 15) .....	16.	63,112			61,987
17. <b>Required payment to avoid penalty</b> * .....	17.	69,423			55,788
18. <b>Selected estimated tax</b> (see assumptions below) .....	18.				69,423
19. Withholding .....	19.				
20. Total 2011 estimated tax payments paid to date .....	20.				
21. <b>Balance due</b> (line 18 less lines 19 and 20) .....	21.				69,423

### VOUCHER AMOUNTS

Due Date	Estimated Tax	Overpayment Applied	Tentative Amount	Voucher Amount	Date Paid	Amount Paid
04-18-2011	17,356		17,356	17,400		
06-15-2011	17,356		17,356	17,400		
09-15-2011	17,356		17,356	17,400		
01-17-2012	17,355		17,355	17,400		
<b>TOTALS:</b>	69,423		69,423	69,600		

Assumptions:

ESTIMATE OPTION - 100% OF THIS YEARS TAX (110% IF AGI IS OVER \$150,000)

OVERPAYMENT OPTION - APPLY ALL OVERPAYMENT

OVERPAYMENT ALLOCATION - CONSECUTIVE

THRESHOLD OPTION - PREPARE VOUCHERS IF LINE 21 IS GREATER THAN ZERO

ROUNDING OPTION - ROUND TENTATIVE AMOUNTS UP TO THE NEXT \$100

PREPARE ALL VOUCHERS

\* The required payment to avoid penalty is the lesser of 100% of 2010 tax (line 16, column a) or 90% of 2010 ES tax (line 16, column c). If 2010 AGI is greater than \$150,000 (\$75,000, MFS), then the required payment is 110% of 2010 tax or 90% of 2010 ES tax. For farmers and fisherman (2011 ES option 5), the required annual payment is the lesser of 100% of 2010 tax or 66.67% of 2011 ES tax. These calculations are automatically based on the 2011 ES Tax option selected. Refer to Pub 505 for more information.

**2011 ESTIMATED PAYMENT OF  
FORM 1040 INDIVIDUAL INCOME TAX**

Department of the Treasury  
Internal Revenue Service

**PRACTITIONER'S COPY**

Taxpayer's Social Security Number <b>002-21-1252</b>		Spouse's Social Security Number		For Calendar Year 2011 or Fiscal Year Ending	
First Name(s) and Initial(s) <b>JOHN TAXPAYER</b>		Last Name(s)		Estimated Tax for the Year	69,600
Address <b>10 EAST 10 STREET APT 5</b>				Overpayment Credited to this Year	
City, State, Zip <b>NEW YORK NY 10003</b>		<h1>Sample Return</h1>		Total Amount to be Paid	69,600
Make Check or Money Order Payable To: <b>United States Treasury</b>				Installment Due April 18, 2011	17,400
				June 15, 2011	17,400
				Sept. 15, 2011	17,400
				Jan. 17, 2012	17,400

**2011 ESTIMATED PAYMENT OF  
FORM 1040 INDIVIDUAL INCOME TAX**

Taxpayer's Social Security Number 002-21-1252	Spouse's Social Security Number	For Calendar Year 2011 or Fiscal Year Ending
--------------------------------------------------	---------------------------------	----------------------------------------------

First Name(s) and Initial(s) JOHN TAXPAYER	Last Name(s)	Estimated Tax for the Year 69,600
-----------------------------------------------	--------------	--------------------------------------

Address 10 EAST 10 STREET APT 5	Overpayment Credited to this Year
------------------------------------	-----------------------------------

City, State, Zip NEW YORK NY 10003	Total Amount to be Paid 69,600
---------------------------------------	-----------------------------------

Make Check or Money Order Payable To: <del>United States Treasury</del>	Installment Due April 18, 2011 17,400
-------------------------------------------------------------------------	------------------------------------------

**Sample Return**

Include SS#(s) on Payment.

Payment Record	April 18, 2011	June 15, 2011	Sept. 15, 2011	Jan. 17, 2012
Amount Paid				
Date				
Check Number				

June 15, 2011	17,400
Sept. 15, 2011	17,400
Jan. 17, 2012	17,400

# New York State E-File Signature Authorization for Tax Year 2010 For Forms IT-150, IT-201, and IT-203

Electronic return originator (ERO): **do not** mail this form to the Tax Department. Keep it for your records.

Taxpayer's name: JOHN TAXPAYER

Spouse's name: \_\_\_\_\_  
(jointly filed return only)

## Purpose

Form TR-579-IT must be completed to authorize an ERO to e-file a personal income tax return and to transmit bank account information for the electronic funds withdrawal.

Both the paid preparer and the ERO are required to sign Part C. However, if an individual performs as both the paid preparer and the ERO, he or she is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Please note that an alternative signature can be used as described in Publication 58, Information for Income Tax Return Preparers. Go to our Web site at www.nystax.gov and select Find publications to view this document.

## General instructions

Taxpayers must complete Part B before the ERO transmits the taxpayer's electronically filed Form IT-150, Resident Income Tax Return (short form); IT-201, Resident Income Tax Return (long form); or IT-203, Nonresident and Part-Year Resident Income Tax Return.

For returns filed jointly, both spouses must complete and sign Form TR-579-IT.

EROs must complete Part C prior to transmitting electronically filed income tax returns (Forms IT-150, IT-201, and IT-203).

**Do not mail Form TR-579-IT to the Tax Department.** EROs must keep this form for three years and present it to the Tax Department upon request.

This form is not required for electronically filed Form IT-370, Application for Automatic Six-Month Extension of Time to File for Individuals. See Form TR-579.1-IT, New York State Taxpayer Authorization for Electronic Funds Withdrawal for Tax Year 2010 Form IT-370.

# Sample Return

### Part A -- Tax return information

1	Federal adjusted gross income (from Form IT-150, line 11; IT-201, line 18; or IT-203, line 18) . . . . .	1.	<u>187,370.</u>
2	Refund (from Form IT-150, line 52; IT-201, line 78; or IT-203, line 68) . . . . .	2.	<u>                    </u>
3	Amount you owe (from Form IT-150, line 54; IT-201, line 80; or IT-203, line 70) . . . . .	3.	<u>11,829.</u>

### Part B -- Declaration of taxpayer and authorizations for Forms IT-150, IT-201, and IT-203

Under penalty of perjury, I declare that I have examined the information on my 2010 New York State electronic personal income tax return, including any accompanying schedules, attachments, and statements, and certify that my electronic return is true, correct and complete. The ERO has my consent to send my 2010 New York State electronic return to New York State through the Internal Revenue Service (IRS). I understand that by executing this Form TR-579-IT, I am authorizing the ERO to sign and file this return on my behalf and agree that the ERO's submission of my personal income tax return to the IRS, together with this authorization, will serve as the electronic signature for the return and any authorized payment transaction. If I am paying my New York State personal income taxes due by electronic funds withdrawal, I authorize the New York State Tax Department and its designated financial agents to initiate an electronic funds withdrawal from the financial institution account indicated on my 2010 electronic return, and I authorize my financial institution to withdraw the amount from my account.

Taxpayer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(jointly filed return only)

### Part C -- Declaration of electronic return originator (ERO) and paid preparer

Under penalty of perjury, I declare that the information contained in this 2010 New York State electronic personal income tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed paper 2010 New York State return signed by a paid preparer, I declare that the information contained in the taxpayer's 2010 New York State electronic return is identical to that contained in the paper copy of the return. If I am the paid preparer, under penalty of perjury I declare that I have examined this 2010 New York State electronic personal income tax return, and, to the best of my knowledge and belief, the return is true, correct, and complete. I have based this declaration on all information available to me.

ERO's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Paid preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: PREPARER NAME



2010

**Instructions for Form IT-201-V**  
**Payment Voucher for E-Filed Income Tax Returns**

**Who must use a payment voucher?**

If you e-filed a New York State income tax return (on Form IT-150, Form IT-201, or Form IT-203) and you owe tax, you must submit this payment voucher, Form IT-201-V below, if you pay by check or money order. If you authorized the Tax Department to withdraw the payment from your bank account (electronic funds withdrawal) or paid by credit card, do not file Form IT-201-V.

To find out more about your payment options, visit the Tax Department's Web site (at www.nystax.gov).

**When do I file?**

You must pay the amount you owe by April 18, 2011, to avoid interest and penalties.

**How do I prepare my payment?**

Make your check or money order payable to **New York State Income Tax** for the full amount you owe and write your social security number and **2010 Income Tax** on it.

**How do I prepare the payment voucher?**

**Step 1**

Enter your name, social security number (SSN), and address in the spaces provided; if you filed a joint return, include your spouse's name and SSN in the spaces provided. Do not include your spouse's name and SSN if you filed separate returns or if you filed Form IT-203-C.

**Foreign addresses --** Enter the information in the following order: city, province or state, and then country (all in the City, village, or post office box). Follow the country's practice for entering the postal code. **Do not abbreviate the country name.**

**Step 2**

Enter the amount of your payment in the space provided (enter only whole dollar amounts).

**Step 3**

Detach the payment voucher at the line indicated below.

**Step 4**

Enclose your check or money order with your voucher. Please do not staple or clip your check to your voucher. Detach any check stubs.

**Fee for payments returned by banks --** The law allows the Tax Department to charge a \$50 fee when a check, money order, or electronic payment is returned by a bank for nonpayment. However, if an electronic payment is returned as a result of an error by the bank or the department, the department won't charge the fee. If your payment is returned, we will send a separate bill for \$50 for each return or other tax document associated with the returned payment.

**Where do I send my payment and payment voucher?**

Send your payment and this payment voucher to:

**NYS PERSONAL INCOME TAX  
 PROCESSING CENTER  
 PO BOX 4124  
 BINGHAMTON NY 13902-4124**

**Private delivery services**

If you do not wish to use a private delivery service, instead of the U. S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service **unless** you used a delivery service that has been designated by the U. S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, Designated Private Delivery Services. See Need help? in the instructions for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery. If you use **any** private delivery service, whether it is a designated service or not, send the forms covered by these instructions to: JPMorgan Chase, NYS Tax Processing -- Estimated Tax, 33 Lewis Rd., Binghamton NY 13905-1040.

**Privacy notification**

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Manager of Document Management, NYS Tax Department, W A Harriman Campus, Albany NY 12227; telephone (518) 457-5181.

▼ Detach here ▼

10 NYV1 TWF 39578 Copyright Forms (Software Only) - 2010 TW

New York State Department of Taxation and Finance

**2010 Payment Voucher for E-Filed Income Tax Returns**

IT-201-V

New York State  
**e-file**  
 www.nystax.gov

Make your check or money order payable to **New York State Income Tax** for the full amount you owe and write your social security number and **2010 Income Tax** on it. Mail voucher and payment to: NYS Personal Income Tax, Processing Center, PO Box 4124, Binghamton NY 13902-4124.

<b>Your first name &amp; middle initial</b>	Your last name (for a <b>joint return</b> , enter spouse's name below)	Your social security number (SSN)
JOHN	TAXPAYER	002-21-1252
<b>Spouse's first name &amp; middle initial</b>	Spouse's last name	Spouse's SSN (enter only if filing a joint return)
		010-25-5545

Mailing address (number and street or rural route; see instructions)	Apartment number				
10 EAST 10 STREET APT 5					
City, village or post office	State	ZIP code	Dollars	Cents	
NEW YORK	NY	10003	Balance due	11,829.00	
E-mail:					

0401101043 002211252 2

# Sample Return

A voucher is printed at the bottom of this page.

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New York State Department of Taxation and Finance

10 NYES1

TWF 39640

Copyright Forms (Software Only) - 2010 TW

## 2011 Estimated Income Tax Payment Voucher for Individuals

### IT-2105

New York State • New York City • Yonkers

**Calendar-year filer due dates:** April 18, 2011; June 15, 2011; September 15, 2011; and January 17, 2012. Enter applicable amount(s) and total payment in the boxes to the right. Print your social security number or taxpayer identification number and **2011 IT-2105** on your payment. Make payable to **NYS Income Tax**. Mail voucher and payment to: NYS Estimated Income Tax, Processing Center, PO Box 4122, Binghamton NY 13902-4122.

#### Estimated tax amounts

Social security number (SSN) or taxpayer ID number 002-21-1252		
Taxpayer's first name and middle initial JOHN		Taxpayer's last name TAXPAYER
Mailing address (number and street or rural route; see instructions) 10 EAST 10 STREET		Apartment number 5
City, village, or post office NEW YORK	State NY	ZIP code 10003
Taxpayer's e-mail address		

	Dollars	Cents
New York State	3,254	.00
New York City	1,146	.00
Yonkers		.00
Total payment	4,400	.00

**STOP:** Pay this electronically on our Web site at [www.nystax.gov](http://www.nystax.gov)

0601111043 002211252 2

# Sample Return

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New York State Department of Taxation and Finance

10 NYES2

TWF 39641

Copyright Forms (Software Only) - 2010 TW

## 2011 Estimated Income Tax Payment Voucher for Individuals

### IT-2105

New York State • New York City • Yonkers

**Calendar-year filer due dates:** April 18, 2011; June 15, 2011; September 15, 2011; and January 17, 2012. Enter applicable amount(s) and total payment in the boxes to the right. Print your social security number or taxpayer identification number and **2011 IT-2105** on your payment. Make payable to **NYS Income Tax**. Mail voucher and payment to: NYS Estimated Income Tax, Processing Center, PO Box 4122, Binghamton NY 13902-4122.

#### Estimated tax amounts

Social security number (SSN) or taxpayer ID number		
002-21-1252		
Taxpayer's first name and middle initial		Taxpayer's last name
JOHN		TAXPAYER
Mailing address (number and street or rural route; see instructions)		Apartment number
10 EAST 10 STREET		5
City, village, or post office	State	ZIP code
NEW YORK	NY	10003
Taxpayer's e-mail address		

	Dollars	Cents
New York State	3,254	.00
New York City	1,146	.00
Yonkers		.00
Total payment	4,400	.00

**STOP:** Pay this electronically on our Web site at [www.nystax.gov](http://www.nystax.gov)

0601111043 002211252 2

# Sample Return

A voucher is printed at the bottom of this page.

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New York State Department of Taxation and Finance

10 NYES3

TWF 39642

Copyright Forms (Software Only) - 2010 TW

## 2011 Estimated Income Tax Payment Voucher for Individuals

### IT-2105

New York State • New York City • Yonkers

**Calendar-year filer due dates:** April 18, 2011; June 15, 2011; September 15, 2011; and January 17, 2012. Enter applicable amount(s) and total payment in the boxes to the right. Print your social security number or taxpayer identification number and **2011 IT-2105** on your payment. Make payable to **NYS Income Tax**. Mail voucher and payment to: NYS Estimated Income Tax, Processing Center, PO Box 4122, Binghamton NY 13902-4122.

#### Estimated tax amounts

Social security number (SSN) or taxpayer ID number		
002-21-1252		
Taxpayer's first name and middle initial		Taxpayer's last name
JOHN		TAXPAYER
Mailing address (number and street or rural route; see instructions)		Apartment number
10 EAST 10 STREET		5
City, village, or post office	State	ZIP code
NEW YORK	NY	10003
Taxpayer's e-mail address		

	Dollars	Cents
New York State	3,254	.00
New York City	1,146	.00
Yonkers		.00
Total payment	4,400	.00

**STOP:** Pay this electronically on our Web site at [www.nystax.gov](http://www.nystax.gov)

0601111043 002211252 2

# Sample Return

A voucher is printed at the bottom of this page.

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New York State Department of Taxation and Finance

10 NYES4

TWF 39643

Copyright Forms (Software Only) - 2010 TW

## 2011 Estimated Income Tax Payment Voucher for Individuals

### IT-2105

New York State • New York City • Yonkers

**Calendar-year filer due dates:** April 18, 2011; June 15, 2011; September 15, 2011; and January 17, 2012. Enter applicable amount(s) and total payment in the boxes to the right. Print your social security number or taxpayer identification number and **2011 IT-2105** on your payment. Make payable to **NYS Income Tax**. Mail voucher and payment to: NYS Estimated Income Tax, Processing Center, PO Box 4122, Binghamton NY 13902-4122.

#### Estimated tax amounts

Social security number (SSN) or taxpayer ID number		
002-21-1252		
Taxpayer's first name and middle initial		Taxpayer's last name
JOHN		TAXPAYER
Mailing address (number and street or rural route; see instructions)		Apartment number
10 EAST 10 STREET		5
City, village, or post office	State	ZIP code
NEW YORK	NY	10003
Taxpayer's e-mail address		

	Dollars	Cents
New York State	3,256	.00
New York City	1,144	.00
Yonkers		.00
Total payment	4,400	.00

**STOP:** Pay this electronically on our Web site at [www.nystax.gov](http://www.nystax.gov)

0601111043 002211252 2

# Sample Return

A voucher is printed at the bottom of this page.

(Detach here)

2011 New York State Department of Taxation and Finance **10 NYMTA51** TWF 41229  
**Estimated Metropolitan Commuter Transportation Mobility Tax** Copyright Forms (Software Only) - 2010 TW **MTA-5**  
**Payment Voucher (for self-employed individuals, including partners)**

**Due dates for 2011:** May 2, 2011; August 1, 2011; October 31, 2011; and January 31, 2012. Enter the estimated MCTMT payment below. Print your social security number or taxpayer identification number and **2011 MTA-5** on your payment. Make payable to **Commissioner of Taxation and Finance**. Mail voucher and payment to: MCTMT Processing Center, PO Box 4134, Binghamton NY 13902-4134.

Social security number or taxpayer ID number 002-21-1252		
Taxpayer's first name and middle initial JOHN		Taxpayer's last name TAXPAYER
Mailing address (number and street or rural route; see instructions) 10 EAST 10 STREET		Apartment number 5
City, village, or post office NEW YORK	State NY	ZIP code 10003
Taxpayer's e-mail address		

**Estimated MCTMT amount**

Dollars	Cents
596	00

**STOP:** Pay this electronically on our Web site at [www.nystax.gov](http://www.nystax.gov)

0081111043

For CALENDAR YEAR 2011 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Print or Type

First name and initial JOHN	Last name TAXPAYER	SOCIAL SECURITY NUMBER 002-21-1252
Business name HOLLY M GILBERT MD		BUSINESS CODE NUMBER AS PER FEDERAL RETURN 621111
Business address (number and street) 141 EAST 35 STREET		ESTATES & TRUSTS ONLY -- ENTER EMPLOYER IDENTIFICATION NO. _____
City and State NEW YORK NY	Zip Code 10016	
Business Telephone Number	Taxpayer's Email Address	

Payment Enclosed

<b>A. Payment</b>	Pay amount shown on line 4 -- Make check payable to: NYC Department of Finance	●	1,950
1a.	2010 Unincorporated Business Tax: 7,782	1b.	Estimate of 2011 tax: 7,782
<b>COMPUTATION OF INSTALLMENT -- (✓) Check proper box below and enter amount indicated.</b>			
2.	If this declaration is due on: <input checked="" type="checkbox"/> April 18, 2011, enter 1/4 of line 1b	2.	1,950
3.	Enter amount of overpayment on 2010 return which you elected to have applied as a credit against 2011 estimated tax	3.	
4.	Amount to be paid with this declaration (line 2 less line 3) (Payable to: NYC DEPARTMENT OF FINANCE)	4.	1,950

Signature of taxpayer \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 60611125 To receive proper credit, you must enter your correct Social Security Number or Employer ID No. on your declaration & remittance.

10 NYCUBT1 TWF 44646 Copyright Forms (Software Only) - 2010 TW

DETACH ON LINE & SEND UPPER PORTION IN A SEPARATE ENVELOPE. RETAIN LOWER PORTION FOR YOUR RECORDS

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10 NYCUBT1 TWF 44646 Copyright Forms (Software Only) - 2010 TW

For CALENDAR YEAR 2011 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Print or Type

First name and initial JOHN	Last name TAXPAYER	SOCIAL SECURITY NUMBER 002-21-1252
Business name HOLLY M GILBERT MD		BUSINESS CODE NUMBER AS PER FEDERAL RETURN 621111
Business address (number and street) 141 EAST 35 STREET		ESTATES & TRUSTS ONLY -- ENTER EMPLOYER IDENTIFICATION NO. _____
City and State NEW YORK NY	Zip Code 10016	
Business Telephone Number	Taxpayer's Email Address	

Payment Enclosed

<b>A. Payment</b>	Pay amount shown on line 4 -- Make check payable to: NYC Department of Finance	●	1,950
1a.	2010 Unincorporated Business Tax: 7,782	1b.	Estimate of 2011 tax: 7,782
<b>COMPUTATION OF INSTALLMENT -- (✓) Check proper box below and enter amount indicated.</b>			
2.	If this declaration is due on: <input checked="" type="checkbox"/> June 15, 2011, enter 1/3 of line 1b	2.	1,950
3.	Enter amount of overpayment on 2010 return which you elected to have applied as a credit against 2011 estimated tax	3.	
4.	Amount to be paid with this declaration (line 2 less line 3) (Payable to: NYC DEPARTMENT OF FINANCE)	4.	1,950

Signature of taxpayer \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 60611125 To receive proper credit, you must enter your correct Social Security Number or Employer ID No. on your declaration & remittance.

DETACH ON LINE & SEND UPPER PORTION IN A SEPARATE ENVELOPE. RETAIN LOWER PORTION FOR YOUR RECORDS

**DECLARATION OF ESTIMATED  
UNINCORPORATED BUSINESS TAX**  
(FOR INDIVIDUALS, ESTATES AND TRUSTS)
**2011**

For CALENDAR YEAR 2011 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Print or Type

First name and initial JOHN	Last name TAXPAYER	SOCIAL SECURITY NUMBER 002-21-1252
Business name HOLLY M GILBERT MD		BUSINESS CODE NUMBER AS PER FEDERAL RETURN 621111
Business address (number and street) 141 EAST 35 STREET		ESTATES & TRUSTS ONLY -- ENTER EMPLOYER IDENTIFICATION NO. _____
City and State NEW YORK NY	Zip Code 10016	
Business Telephone Number	Taxpayer's Email Address	

## Payment Enclosed

<b>A. Payment</b>	Pay amount shown on line 4 -- Make check payable to: NYC Department of Finance	●	1,950	
1a.	2010 Unincorporated Business Tax: 7,782			
	<b>COMPUTATION OF INSTALLMENT -- (✓) Check proper box below and enter amount indicated.</b>			
2.	If this declaration is due on: April 18, 2011, enter 1/4 of line 1b <input type="checkbox"/> Sept. 15, 2011, enter 1/2 of line 1b <input checked="" type="checkbox"/> June 15, 2011, enter 1/3 of line 1b <input type="checkbox"/> Jan. 17, 2012, enter amount of line 1b <input type="checkbox"/>	● 1b.	7,782	
3.	Enter amount of overpayment on 2010 return which you elected to have applied as a credit against 2011 estimated tax	● 3.		
4.	Amount to be paid with this declaration (line 2 less line 3) (Payable to: NYC DEPARTMENT OF FINANCE)	● 4.	1,950	

 Signature of taxpayer \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 60611125 To receive proper credit, you must enter your correct Social Security Number or Employer ID No. on your declaration & remittance.

10 NYCUBT2 TWF 44687 Copyright Forms (Software Only) - 2010 TW

DETACH ON LINE &amp; SEND UPPER PORTION IN A SEPARATE ENVELOPE. RETAIN LOWER PORTION FOR YOUR RECORDS

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10 NYCUBT2 TWF 44687 Copyright Forms (Software Only) - 2010 TW

**DECLARATION OF ESTIMATED  
UNINCORPORATED BUSINESS TAX**  
(FOR INDIVIDUALS, ESTATES AND TRUSTS)
**2011**

For CALENDAR YEAR 2011 or FISCAL YEAR beginning \_\_\_\_\_ and ending \_\_\_\_\_

Print or Type

First name and initial JOHN	Last name TAXPAYER	SOCIAL SECURITY NUMBER 002-21-1252
Business name HOLLY M GILBERT MD		BUSINESS CODE NUMBER AS PER FEDERAL RETURN 621111
Business address (number and street) 141 EAST 35 STREET		ESTATES & TRUSTS ONLY -- ENTER EMPLOYER IDENTIFICATION NO. _____
City and State NEW YORK NY	Zip Code 10016	
Business Telephone Number	Taxpayer's Email Address	

## Payment Enclosed

<b>A. Payment</b>	Pay amount shown on line 4 -- Make check payable to: NYC Department of Finance	●	1,950	
1a.	2010 Unincorporated Business Tax: 7,782			
	<b>COMPUTATION OF INSTALLMENT -- (✓) Check proper box below and enter amount indicated.</b>			
2.	If this declaration is due on: April 18, 2011, enter 1/4 of line 1b <input type="checkbox"/> Sept. 15, 2011, enter 1/2 of line 1b <input type="checkbox"/> June 15, 2011, enter 1/3 of line 1b <input type="checkbox"/> Jan. 17, 2012, enter amount of line 1b <input checked="" type="checkbox"/>	● 1b.	7,782	
3.	Enter amount of overpayment on 2010 return which you elected to have applied as a credit against 2011 estimated tax	● 3.		
4.	Amount to be paid with this declaration (line 2 less line 3) (Payable to: NYC DEPARTMENT OF FINANCE)	● 4.	1,950	

 Signature of taxpayer \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 60611125 To receive proper credit, you must enter your correct Social Security Number or Employer ID No. on your declaration & remittance.

DETACH ON LINE &amp; SEND UPPER PORTION IN A SEPARATE ENVELOPE. RETAIN LOWER PORTION FOR YOUR RECORDS



**2010 NEW YORK TAX COMPUTATION WORKSHEETS**  
**FORM IT-150/IT-201**

JOHN TAXPAYER  
 002-21-1252

Keep for Your Records

**TAX COMPUTATION WORKSHEET 1**

- |                                                                                                          |    |                      |
|----------------------------------------------------------------------------------------------------------|----|----------------------|
| 1. New York adjusted gross income from Form IT-150, line 21 or Form IT-201, line 33 .....                | 1. | _____                |
| 2. Taxable income from Form IT-150, line 26 or IT-201, line 38 .....                                     | 2. | _____                |
| 3. Multiply line 2 by 6.85% (.0685) .....                                                                | 3. | _____                |
| 4. New York State tax on the line 2 amount from the New York State Tax Rate<br>schedule on page 55 ..... | 4. | <input type="text"/> |
| 5. Subtract line 4 from line 3 .....                                                                     | 5. | _____                |
| 6. Excess of line 1 over \$100,000 or enter \$50,000 whichever is less .....                             | 6. | _____                |
| 7. Divide line 6 by \$50,000 and round to the fourth decimal place (cannot exceed 1.0000) .....          | 7. | _____                |
| 8. Multiply line 5 by line 7 .....                                                                       | 8. | <input type="text"/> |
| 9. Add lines 4 and 8. <b>Enter here and on line 27 of Form IT-150 or line 39 of Form IT-201</b> .....    | 9. | _____                |

**Sample Return**

**TAX COMPUTATION WORKSHEET 2**

- |                                                                                                                   |    |                |
|-------------------------------------------------------------------------------------------------------------------|----|----------------|
| 1. Taxable income from Form IT-150, line 26 or Form IT-201, line 38 .....                                         | 1. | <u>168,199</u> |
| 2. Multiply line 1 by 6.85% (.0685) <b>Enter here and on line 27 Form IT-150, or line 39 of Form IT-201</b> ..... | 2. | <u>11,522</u>  |

**TAX COMPUTATION WORKSHEET 3**

- |                                                                                                                                                                                                                                            |     |       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------|
| 1. Enter your New York adjusted gross income from Form IT-150, line 21 or Form IT-201, line 33.<br>(If the amount on line 1 is \$300,000 or less, enter 0 on lines 8, 9, and 10 of this worksheet;<br>continue with line 2.) .....         | 1.  | _____ |
| 2. Enter your taxable income from Form IT-150, line 26, or Form IT-201, line 38 .....                                                                                                                                                      | 2.  | _____ |
| 3. Multiply line 2 by 7.85% (.0785) .....                                                                                                                                                                                                  | 3.  | _____ |
| 4. Enter your New York State tax on the line 2 amount from the New York State tax rate schedule .....                                                                                                                                      | 4.  | _____ |
| 5. Subtract line 4 from line 3 .....                                                                                                                                                                                                       | 5.  | _____ |
| 6. If married filing jointly (2) or qualifying widow(er) (5) Enter <b>\$794</b> on line 6.<br>If single (1) or married filing separately (3), enter <b>\$397</b> on line 6.<br>If head of household (4) enter <b>\$563</b> on line 6. .... | 6.  | _____ |
| 7. Subtract line 6 from line 5 .....                                                                                                                                                                                                       | 7.  | _____ |
| 8. Enter the excess of line 1 over \$300,000 (cannot exceed \$50,000) .....                                                                                                                                                                | 8.  | _____ |
| 9. Divide line 8 by \$50,000 and round the result to the fourth decimal place (cannot exceed 1.0000) .....                                                                                                                                 | 9.  | _____ |
| 10. Multiply line 7 by line 9 .....                                                                                                                                                                                                        | 10. | _____ |
| 11. Enter amount from line 6 .....                                                                                                                                                                                                         | 11. | _____ |
| 12. Add lines 4, 10, and 11.<br><b>Enter here and on Form IT-150, line 27, or Form IT-201, line 39.</b> .....                                                                                                                              | 12. | _____ |

**Note:** For some taxpayers, the line 3 amount may be the same as the line 12 amount.

**2010 NEW YORK TAX COMPUTATION WORKSHEETS**  
**FORM IT-150/IT-201**

JOHN TAXPAYER  
 002-21-1252

Keep for Your Records

**TAX COMPUTATION WORKSHEET 4**

- |                                                                                                                                                                                                                                          |     |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------|
| 1. Enter your New York adjusted gross income from Form IT-150, line 21, or Form IT-201, line 33 .....                                                                                                                                    | 1.  | _____ |
| 2. Enter your taxable income from Form IT-150, line 26, or Form IT-201, line 38 .....                                                                                                                                                    | 2.  | _____ |
| 3. Multiply line 2 by 8.97% (.0897) .....                                                                                                                                                                                                | 3.  | _____ |
| 4. Enter your New York State tax on the line 2 amount from the New York State tax rate schedule .....                                                                                                                                    | 4.  | _____ |
| 5. Subtract line 4 from line 3 .....                                                                                                                                                                                                     | 5.  | _____ |
| 6. If married filing jointly (2) or qualifying widow(er)(5) enter <b>\$794</b> on line 6<br>If single (1) or married filing separately (3), enter <b>\$397</b> on line 6<br>If head of household (4), enter <b>\$563</b> on line 6 ..... | 6.  | _____ |
| 7. Subtract line 6 from line 5 .....                                                                                                                                                                                                     | 7.  | _____ |
| 8. Enter the excess of line 1 over \$500,000 (cannot exceed \$50,000) .....                                                                                                                                                              | 8.  | _____ |
| 9. Divided line 8 by \$50,000 and round the result to the fourth decimal place (cannot exceed 1.0000) .....                                                                                                                              | 9.  | _____ |
| 10. Multiply line 7 by line 9 .....                                                                                                                                                                                                      | 10. | _____ |
| 11. Enter amount from line 6 .....                                                                                                                                                                                                       | 11. | _____ |
| 12. Add lines 4, 10, and 11<br><b>Enter here and on Form IT-150, line 27, or Form IT-201, line 39</b> .....                                                                                                                              | 12. | _____ |
- Note:** For some taxpayers, the line 3 amount may be the same as the line 12 amount

**TAX COMPUTATION WORKSHEET 5**

- |                                                                                                                                                                                                                                                |     |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------|
| 1. Enter your New York adjusted gross income from Form IT-150, line 21, or Form IT-201, line 33 .....                                                                                                                                          | 1.  | _____ |
| 2. Enter your taxable income from Form IT-150, line 26, or Form IT-201, line 38 .....                                                                                                                                                          | 2.  | _____ |
| 3. Multiply line 2 by 8.97% (.0897) .....                                                                                                                                                                                                      | 3.  | _____ |
| 4. Enter your New York State tax on the line 2 amount form the New York State tax rate schedule .....                                                                                                                                          | 4.  | _____ |
| 5. Subtract line 4 from line 3 .....                                                                                                                                                                                                           | 5.  | _____ |
| 6. If married filing jointly (2) or qualifying widow(er)(5), enter <b>\$3,794</b> on line 6<br>If single (1) or married filing separately (3), enter <b>\$2,397</b> on line 6<br>If head of household (4) enter <b>\$3,063</b> on line 6 ..... | 6.  | _____ |
| 7. Subtract line 6 from line 5 .....                                                                                                                                                                                                           | 7.  | _____ |
| 8. Enter the excess of line 1 over \$500,000 (cannot exceed \$50,000) .....                                                                                                                                                                    | 8.  | _____ |
| 9. Divide line 8 by \$50,000 and round the result to the fourth decimal place (cannot exceed 1.0000) .....                                                                                                                                     | 9.  | _____ |
| 10. Multiply line 7 by line 9 .....                                                                                                                                                                                                            | 10. | _____ |
| 11. Enter amount from line 6 .....                                                                                                                                                                                                             | 11. | _____ |
| 12. Add lines 4, 10, and 11<br><b>Enter here and on Form IT-150, line 27, or Form IT-201, line 39</b> .....                                                                                                                                    | 12. | _____ |
- Note:** For some taxpayers, the line 3 amount may be the same as the line 12 amount.

**TAX COMPUTATION WORKSHEET 6**

- |                                                                                                                     |    |       |
|---------------------------------------------------------------------------------------------------------------------|----|-------|
| 1. Enter your taxable income from Form IT-150, line 26, or Form IT-201, line 38 .....                               | 1. | _____ |
| 2. Multiply line 1 by 8.97% (.0897)<br><b>Enter here and on Form IT-150, line 27, or Form IT-201, line 39</b> ..... | 2. | _____ |

## 2011 NEW YORK STATE ESTIMATED TAX WORKSHEET

JOHN TAXPAYER  
002-21-1252

Keep for Your Records

	New York State	City of New York	City of Yonkers
1. Amount of New York AGI expected in 2010	1. 183,418		
2. Standard / estimated itemized deduction	2. 15,219		
3. Subtract line 2 from line 1	3. 168,199		
4. Exemption for dependents (\$1,000 x # of dependents)	4.		
5. Estimated NYS taxable income (subtract line 4 from line 3)	5. 168,199		
6. New York State tax on line 5 amount (see instr, pg 3)	6. 11,522		
7. New York City resident tax on line 5 amount (use New York City Tax Rates on pg 3, instr)		7. 6,018	
8. NYC household and accumulation distribution credits		8.	
9. Subtract line 8 from line 7		9. 6,018	
10. NYC tax on ordinary income portion of lump-sum distribution		10.	
11. Add lines 9 and 10		11. 6,018	
12. New York City UBT credit		12. 1,790	
13. Subtract line 12 from line 11		13. 4,228	
14. Household credit; nonresidents and part-year residents also enter child and dependent care credit and earned income credit (see instr, pg 4)	14.		
15. Subtract line 14 from line 6	15. 11,522		
16. Other taxes (see instr, pg 4)	16.		
17. Add lines 15 and 16 (NYC column - also add lines 13 & 16)	17. 11,522	4,228	
18. Resident credit and other nonrefundable credits (see instr, pg 4)	18.		
19. Total estimated New York State and New York City tax New York State column: subtract line 18 from line 17; New York City column: enter amount from line 17	19. 11,522	4,228	
20. Refundable credits (see instr, pg 4)	20.	63	
21. NYS / NYC estimated tax (subtract line 20 from line 19)	21. 11,522	4,165	
22. Yonkers City: (a) resident tax surcharge (line 21 x 10% (.10)) (b) nonresident earnings tax (from Y-203) (c) total (add lines 22a and 22b)			22a. 22b. 22c.
23. Totals (New York State column, line 21; New York City column, line 21; Yonkers City column, line 22c)	23. 11,522	4,165	
24. Multiply line 23 by 90% (66 2/3% for farmers and fishermen)	24. 10,370	3,749	
25. Enter 100% of the tax shown on your 2010 income tax return (110% of that amount if you are not a farmer or a fisherman and the New York AGI shown on that return is more than \$150,000; or, if married filing separately for 2010, \$75,000)	* IF 2010 AGI > \$150,000 (\$75,000 MFS) 25. 12,674	4,582	
26. Enter the <b>lesser</b> of line 24 or 25. This is your required annual payment (see instr for Penalty for underpayment of est tax on pg 2) <b>Caution:</b> Generally, if you do not prepay (through income tax withholding and est tax payments) at least the amount on line 26, you may owe a penalty for not paying enough est tax. To avoid a penalty, make sure your estimate on line 23 is as accurate as possible. If you prefer, you may pay 100% of your 2010 estimated tax (line 23)	26. 12,674	4,582	
27. Estimate of income tax to be withheld	27.		
28. Balance (line 26 less line 27). If this amount is \$300 or more, file payment voucher along with payment. If this amount is less than \$300, no payment is required at this time. If applying an overpayment from 2010 to 2011, see instr for "How to complete the payment voucher"	28. 12,674	4,582	

**2011 NEW YORK STATE ESTIMATED TAX WORKSHEET (Continued)**

JOHN TAXPAYER

002-21-1252

Keep for Your Records

VOUCHER AMOUNTS

Due Date	Estimated Tax	Overpayment Applied	Tentative Amount	Voucher Amount	Date paid	Amount Paid
04-18-2011	4,315		4,315	4,400		
06-15-2011	4,315		4,315	4,400		
09-15-2011	4,315		4,315	4,400		
01-17-2012	4,311		4,311	4,400		
<b>TOTALS:</b>	17,256		17,256	17,600		

Assumptions:

ESTIMATE OPTION - 100% OF THIS YEARS TAX (110% IF AGI IS OVER \$150,000)  
 OVERPAYMENT OPTION - APPLY ALL OVERPAYMENT  
 OVERPAYMENT ALLOCATION - CONSECUTIVE  
 THRESHOLD OPTION - PREPARE VOUCHERS IF LINE 28 IS GREATER THAN ZERO.  
 ROUNDING OPTION - ROUND TENTATIVE AMOUNT UP TO THE NEXT \$100  
 PREPARE ALL VOUCHERS

# 2011 NEW YORK ESTIMATED INCOME TAX PAYMENT VOUCHER FOR INDIVIDUALS

**TAXPAYER'S COPY**

Taxpayer's Social Security Number 002-21-1252		Spouse's Social Security Number		For Calendar Year 2011 or Fiscal Year Ending	
First Name(s) and Initial(s) JOHN TAXPAYER		Last Name(s)		Estimated Tax for the Year	State 13,018
Address 10 EAST 10 STREET APT 5				Overpayment Credited to this Year	City 4,582
City, State, ZIP NEW YORK NY 10003		<b>Sample Return</b>		Total Amount to be Paid	13,018
Mail Check/Money Order Payable To: NYS ESTIMATED INCOME TAX PROCESSING CENTER PO BOX 4122 BINGHAMTON, NY 13902-4122				Installment Due	
Include SS#(s) on payment.				04-18-11	3,254
				06-15-11	3,254
				09-15-11	3,254
				01-17-12	3,256
Payment Record	04-18	06-15	09-15	01-17	
Amount Paid					
Date					
Check Number					

**2011 NEW YORK ESTIMATED INCOME TAX PAYMENT VOUCHER FOR INDIVIDUALS**

**PRACTITIONER'S COPY**

Taxpayer's Social Security Number 002-21-1252		Spouse's Social Security Number		For Calendar Year 2011 or Fiscal Year Ending				
First Name(s) and Initial(s) JOHN TAXPAYER		Last Name(s)		Estimated Tax for the Year	State 13,018	City 4,582		
Address 10 EAST 10 STREET APT 5				Overpayment Credited to this Year				
City, State, ZIP NEW YORK NY 10003		<b>Sample Return</b>		Total Amount to be Paid	13,018	4,582		
Mail Check/Money Order Payable To: NYS ESTIMATED INCOME TAX PROCESSING CENTER PO BOX 4122 BINGHAMTON, NY 13902-4122				Installment Due 04-18-11	3,254	1,146		
				06-15-11	3,254	1,146		
				09-15-11	3,254	1,146		
				01-17-12	3,256	1,144		