

For office use only

New York State Department of Taxation and Finance
Cover Sheet for Form IT-201
Resident Income Tax Return
New York State • New York City • Yonkers

2006

IT-201

This is the cover sheet of your return. For your return to be complete you **must** include this cover sheet with all four pages of Form IT-201 and all required attachments.

Taxpayer name and address		Software vendor code 1019	
Your social security number		Spouse's social security number	
Your first name and m.i. Sean	Your last name Leckey		
Spouse's first name and m.i. Ihassane		Spouse's last name Leckey	
Mailing address (number and street or rural route)		Apartment number	
City, village or post office Staten Island USA		State	ZIP code
Summary of return data			
Federal adjusted gross income		7217.	
Total NYS adjusted gross income		7050.	
Total New York State tax withheld		117.	
Total New York City tax withheld		80.	
Total Yonkers tax withheld			
Amount to be refunded to you		572.	
Amount you owe			

668000
11-24-06

Staple check or
money order
here.

0731061019

File this original scannable cover sheet
with all four pages of your tax return.



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New York State Department of Taxation and Finance
Cover Sheet for Form IT-201
Resident Income Tax Return
New York State • New York City • Yonkers

2006

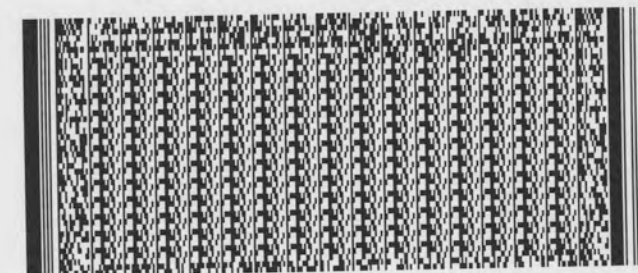
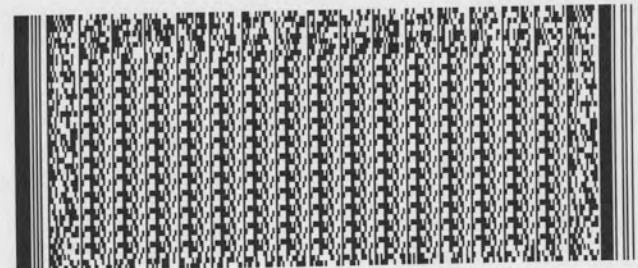
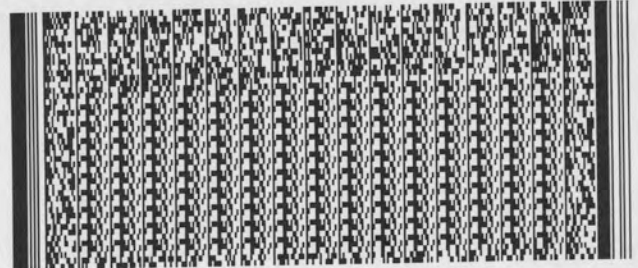
IT-201

This is the cover sheet of your return. For your return to be complete you **must** include this cover sheet with all four pages of Form IT-201 and all required attachments.

Taxpayer name and address		Software vendor code 1019	
Your social security number [REDACTED]		Spouse's social security number [REDACTED]	
Your first name and m.i. Sean	Your last name Leckey		
Spouse's first name and m.i. Ihassane	Spouse's last name Leckey		
Mailing address (number and street or rural route) [REDACTED]		Apartment number [REDACTED]	
City, village or post office Staten Island USA		State [REDACTED]	ZIP code [REDACTED]
Summary of return data			
Federal adjusted gross income		7217.	
Total NYS adjusted gross income		7050.	
Total New York State tax withheld		117.	
Total New York City tax withheld		80.	
Total Yonkers tax withheld		572.	
Amount to be refunded to you			
Amount you owe			

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11-24-06

Staple check or
money order
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File this original scannable cover sheet
with all four pages of your tax return.

2006

New York State Department of Taxation and Finance

IT-201

Resident Income Tax Return (long form)

New York State • New York City • Yonkers

For the full year January 1, 2006, through December 31, 2006, or fiscal year beginning ...

For help completing your return, see the combined instr., Form IT-150/201-I, or the IT-RP-1 resident packet instr.

and ending ...

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

Your first name and middle initial

Your last name (for a joint return, enter spouse's name on line below)

Sean

Leckey

Spouse's first name and middle initial

Spouse's last name

Ihassane

Leckey

Mailing address (see instructions, page 77) (number and street or rural route)

Apartment number

City, village, or post office

State

ZIP code

Staten Island USA

Permanent home address (see instructions, page 77) (number and street or rural route)

City, village, or post office

State

ZIP code

Staten Island

NY

▼ Your social security number

▼ Spouse's social security number

New York State county of residence

School district name

School district code number ...

Decedent information:

Taxpayer's date of death

Spouse's date of death

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

①

Single

②

X Married filing joint return
(enter spouse's social security number above)

③

Married filing separate return
(enter spouse's social security number above)

④

Head of household (with qualifying person)

⑤

Qualifying widow(er) with dependent child

(B) Did you itemize your deductions on your 2006 federal income tax return? Yes No X

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

(D) If you do not need a NYS income tax forms packet mailed to you next year, mark an X in the box (see page 78). ...

(E) Did you or your spouse maintain living quarters in NYC during 2006 (see page 78)? Yes X No

(F) NYC residents and NYC part-year residents only (see page 79):

(1) Number of months you lived in NY City in 2006 12

(2) Number of months your spouse lived in NY City in 2006 12

(G) Enter your 2-digit special condition code number if applicable (see page 79).

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

Federal income and adjustments

Only full-year NY State residents may file this form. For lines 1 through 18 below, enter your income items and total adjustments as they appear on your federal return (see page 80). Also see page 80 instructions for showing a loss.

Dollars

1	Wages, salaries, tips, etc.	1.	7050.
2	Taxable interest income	2.	167.
3	Ordinary dividends	3.	
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25 on page 2)	4.	
5	Alimony received	5.	
6	Business income or loss (attach a copy of federal Schedule C or C-EZ, Form 1040)	6.	
7	Capital gain or loss (if required, attach a copy of federal Schedule D, Form 1040)	7.	
8	Other gains or losses (attach a copy of federal Form 4797)	8.	
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an X in the box	9.	
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box	10.	
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (attach copy of federal Schedule E, Form 1040)	11.	
12	Farm income or loss (attach a copy of federal Schedule F, Form 1040)	12.	
13	Unemployment compensation	13.	
14	Taxable amount of social security benefits (also enter on line 27 on page 2)	14.	
15	Other income (see page 80) Identify:	15.	
16	Add lines 1 through 15	16.	7217.
17	Total federal adjustments to income (see page 80) Identify:	17.	
18	Subtract line 17 from line 16. This is your federal adjusted gross income.	18.	7217.

(continued on page 2)

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11-15-06

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



19 Enter the amount from line 18 on page 1. This is your **federal adjusted gross income**. 19. 7217.

New York additions (see page 81)

20 Interest income on state and local bonds and obligations (but not those of NY State or its local governments) 20.
 21 Public employee 414(h) retirement contributions from your wage and tax statements (see page 82) 21.
 22 New York's 529 college savings program distributions (see page 82) 22.
 23 Other (see page 83) Identify: 23.
 24 Add lines 19 through 23 24. 7217.

New York subtractions (see page 86)

25 Taxable refunds, credits, or offsets of state and local income taxes (from line 4 on page 1) 25.
 26 Pensions of NYS and local governments and the federal government (see pg. 86) 26.
 27 Taxable amount of social security benefits (from line 14 on page 1) 27.
 28 Interest income on U.S. government bonds 28. 167.
 29 Pension and annuity income exclusion (see page 86) 29.
 30 New York's 529 college savings program deduction / earnings 30.
 31 Other (see page 87) Identify: 31.
 32 Add lines 25 through 31 32. 167.
 33 Subtract line 32 from line 24. This is your **New York adjusted gross income**. 33. 7050.

Standard deduction or itemized deduction (see page 92)

34 Enter your **standard deduction** (from the table below) or your **itemized deduction** (from the worksheet below). Mark an **X** in the appropriate box: ● **X** Standard ... or ... ● Itemized 34. 15000.
 35 Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank) 35.
 36 Dependent exemptions (not the same as total federal exemptions; see page 94) 36.
 37 Subtract line 36 from line 35. This is your **taxable income**. 37.

or

**New York State
standard deduction table**

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

New York State itemized deduction worksheet

a Medical and dental expenses (from federal Sch. A, line 4) ... a.
 b Taxes you paid (from federal Schedule A, line 9) b.
 c Interest you paid (from federal Schedule A, line 14) c.
 d Gifts to charity (from federal Schedule A, line 18) d.
 e Casualty and theft losses (from federal Sch. A, line 19) e.
 f Job expenses and most other miscellaneous
deductions (from federal Schedule A, line 26) f.
 g Other miscellaneous deductions (from federal
Schedule A, line 27) g.
 h Enter amount from federal Schedule A, line 28 h.
 i State, local, and foreign income taxes and other
subtraction adjustments (see page 92) i.
 j Subtract line i from line h j.
 k Addition adjustments (see page 93) k.
 l Add lines j and k l.
 m Itemized deduction adjustment (see page 94) m.
 n Subtract line m from line l n.
 o College tuition itemized deduction (see Form IT-272) ... o.
 p Add lines n and o. This is your **New York State
itemized deduction; enter on line 34 above.** p.

(continued on page 3)



Name(s) as shown on page 1

Sean & Ihassane Leckey

▼ Enter your social security number

IT-201 (2006) Page 3 of 4

Tax computation, credits, and other taxes (see page 95)

Dollars

38	Enter the amount from line 37 on page 2. This is your taxable income .	38.	
39	New York State tax on line 38 amount (see page 95 and Tax Computation on page 54)	39.	0.
40	New York State household credit (from table 1, 2, or 3 on pages 95 and 96)	40.	75.
41	Resident credit (attach Form IT-112-R or IT-112-C, or both; see page 96)	41.	
42	Other New York State nonrefundable credits (from Form IT-201-ATT, line 7; attach form)	42.	
43	Add lines 40, 41, and 42	43.	75.
44	Subtract line 43 from line 39 (if line 43 is more than line 39, leave blank)	44.	
45	Net other New York State taxes (from Form IT-201-ATT, line 30; attach form)	45.	
46	Add lines 44 and 45. This is the total of your New York State taxes .	46.	0.

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

47	New York City resident tax on line 38 amount (see page 96)	47.	
48	New York City household credit (from table 4, 5, or 6 on page 97)	48.	60.
49	Subtract line 48 from line 47 (if line 48 is more than line 47, leave blank)	49.	
50	Part-year New York City resident tax (attach Form IT-360.1)	50.	
51	Other New York City taxes (from Form IT-201-ATT, line 34; attach form)	51.	
52	Add lines 49, 50, and 51	52.	
53	NY City nonrefundable credits (from Form IT-201-ATT, line 10; attach form)	53.	
54	Subtract line 53 from line 52 (if line 53 is more than line 52, leave blank)	54.	
55	Yonkers resident income tax surcharge (see page 98)	55.	
56	Yonkers nonresident earnings tax (attach Form Y-203)	56.	
57	Part-year Yonkers resident income tax surcharge (attach Form IT-360.1)	57.	
58	Add lines 54 through 57. This is the total of your New York City and Yonkers taxes / surcharges .	58.	

◀ **New York City (NYC) and Yonkers residents only:**
See instructions beginning on page 96 for figuring NYC and Yonkers taxes, credits, and tax surcharges.

59	Sales or use tax See the instructions beginning on page 66. Do not leave line 59 blank.	59.	0.
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Voluntary contributions (whole dollar amounts only; see page 99)

60a	Return a Gift to Wildlife	60a.	
60b	Missing/Exploited Children Fund	60b.	
60c	Breast Cancer Research Fund	60c.	
60d	Alzheimer's Fund	60d.	
60e	Olympic Fund (\$2 or \$4; see page 99)	60e.	
60f	Prostate Cancer Research Fund	60f.	
60g	WTC Memorial Fund	60g.	
60	Add lines 60a through 60g. This is your total voluntary contributions .	60.	
61	Add lines 46, 58, 59, and 60. This is your total New York State, New York City, and Yonkers taxes, sales or use tax, and voluntary contributions .	61.	0.

(continued on page 4)



▼ Enter your social security number

Dollars

62 Enter the amount from line 61 on page 3. This is your total New York State, New York City, and Yonkers taxes, sales or use tax, and voluntary contributions. 62. 0.

Payments and refundable credits (see page 100)

63 Empire State child credit (attach new Form IT-213)	63.		
64 NY State child and dependent care credit (attach Form IT-216)	64.		
65 NY State earned income credit (attach Form IT-215 or IT-209)	65.	124.	
66 NY State noncustodial parent EIC (attach new Form IT-209)	66.		
67 Real property tax credit (attach Form IT-214)	67.		
68 College tuition credit (attach Form IT-272)	68.	230.	
69 NY City school tax credit (also complete (F) on page 1; see page 101)	69.	21.	
70 NY City earned income credit (attach Form IT-215 or IT-209)	70.		
71 Other refundable credits (from Form IT-201-ATT, line 18; attach form)	71.	117.	
72 Total New York State tax withheld	72.	80.	
73 Total New York City tax withheld	73.		
74 Total Yonkers tax withheld	74.		
75 Total estimated tax payments / Amount paid with Form IT-370	75.		
76 Add lines 63 through 75. This is the total of your payments	76.		572.

Forms IT-2 and/or IT-1099-R must be completed and attached to your return instead of federal Forms W-2 and/or 1099-R.

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

See Step 11 on page 108 for the proper assembly of your four-page return and all attachments.

Your refund / amount overpaid (see page 103)

77 If line 76 is more than line 62, subtract line 62 from line 76 77. 572.

78 Amount of line 77 that you want refunded to you (for Direct Deposit, see Account information on line 82) **Refund** 78. 572.

79 **Estimated tax only** Amount of line 77 that you want applied to your 2007 estimated tax. (Do not include any amount that you claimed as a refund on line 78.) 79.

Amount you owe (see page 104)

80 If line 76 is less than line 62, subtract line 76 from line 62. (For Payment options, see page 104; for electronic funds withdrawal, see Account information on line 82 below) **Owe** 80.

81 Estimated tax penalty (Include this amount on line 80, or reduce the overpayment on line 77. See page 104.) 81.

Account information (see page 105)

82 Mark one box: ☒ **Refund - Direct Deposit** ... or ... ☐ **Owe -**

a Routing number:

b Account number:

c Type: ☒ **Checking** ☐ **Savings**

Electronic funds withdrawal effective date:

You can choose to have your refund directly deposited into your bank account. Or, you can have the amount of any New York State tax you owe automatically withdrawn from your bank account. See the instructions on page 105 and fill in lines 82, and 82a, b, and c.

Sign your return below
(complete the following) No

Personal identification number (PIN)

Sign your return here

Preparer's signature

Your signature

▼ Preparer's SSN or PTIN

• Employer identification number Your occupation: **Financial Engineer**

Spouse's signature (if joint return)

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

Mark an X if self-employed:
Date

Spouse's occupation (if joint return): **Student**
Date

Address

▼ Daytime phone number

Mail your completed return and any attachments to:

STATE PROCESSING CENTER
PO BOX 61000
ALBANY NY 12261-0001

668004
11-20-06

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

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IT-2

▼ Spouse's social security number

1021061019

2006

New York State Department of Taxation and Finance

Claim for Earned Income Credit

New York State • New York City

IT-215

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

Print or type	Your first name and middle initial	Your last name (for a joint claim, enter spouse's name on line below)	▼ Your social security number
	Sean	Leckey	
	Spouse's first name and middle initial	Spouse's last name	▼ Spouse's social security number
	Ihassane	Leckey	
	Mailing address (number and street or rural route)	Apartment number	New York State county or residence
	City, village, or post office	State	ZIP code
	Staten Island USA		

- 1 Did you claim the federal earned income credit for 2006? If **No**, stop; you do not qualify for these credits. 1. Yes ☒ No
- 2 Is your investment income (see instructions) greater than \$2,800? If **Yes**, stop; you do not qualify for these credits. 2. Yes No ☒
- 3 Have you already filed your 2006 New York State income tax return? If **No**, you must file this claim with a return 3. Yes No ☒
- 4 Did you claim qualifying children on your 2006 federal Schedule EIC? If **No**, continue with line 5. 4. Yes No ☒
- If **Yes**, in the spaces below, list up to two of the same children you claimed on federal Schedule EIC
- If you claimed more than two, see instructions.

First name and middle initial	Last name	Relationship	Number of months lived with you	Full-time student*	Person with disability*	Social security number	Year of birth

* Mark an **X** in these boxes **only** if you checked **Yes** in the same box on your 2006 federal Schedule EIC (box 4a or 4b).

- 5 Is the IRS figuring your federal earned income credit (EIC) for you? If **Yes**, complete lines 6 through 9 (also lines 21, 23, and 24 if you are a part-year New York State resident, and line 28 if you are a part-year New York City resident). The Tax Department will compute your New York State and, if applicable, your New York City earned income credit for you. If **No**, complete lines 6 through 17 (and lines 18 through 26 if you are a part-year New York State resident). New York City residents must complete the **New York City Earned Income Credit Worksheet** on page 3 of Form IT-215-I. Part year New York City residents must also complete line 28 on page 2 of this claim form. 5. Yes No ☒
- 6 Wages, salaries, tips, etc., from **Worksheet A**, line 3, on page 2 of the instructions, Form IT-215-I 6. 7050. Dollars
- 7 If you received a taxable scholarship or fellowship grant, or if you were paid any amount as an inmate in a penal institution for work, or if you received an amount as a pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan, enter that amount here (see instr.) 7.
- 8 Business income or loss (from your federal Form 1040 line instructions, Earned Income Credit Worksheet B, lines 1e, 2c, and 3) 8.
- Employer identification number • profit or • loss
- Mark an **X** in the applicable box: The amount on line 8 above is a • profit or • loss
- 9 Enter your federal adjusted gross income (from federal Form 1040EZ, line 4; Form 1040A, line 22; or Form 1040, line 38) 9. 7217.
- 10 Amount of federal EIC claimed (from federal Form 1040EZ, line 8a; Form 1040A, line 40a; or Form 1040, line 66a. Federal alternative minimum tax filers - see instructions) 10. 412.
- 11 New York State earned income credit (NYS EIC) rate 30% (.30) 11. .30
- 12 Tentative NYS EIC (multiply line 10 by line 11; see instructions) 12. 124.

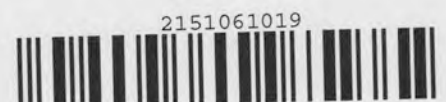
If you are a Form IT-201 or Form IT-203 filer, complete **Worksheet B** on page 2 before continuing.

- 13 Form IT-150 filers, copy the amount from Form IT-150, line 27. Form IT-201 and Form IT-203 filers, copy the amount from Worksheet B, line 5, on page 2 of this form 13. 0.
- 14 New York State household credit (from Form IT-150, line 28, Form IT-201, line 40; or Form IT-203, line 39) 14. 75.
- 15 Enter the smaller of line 13 or line 14 15. 0.
- 16 Allowable New York State earned income credit (subtract line 15 from line 12) 16. 124.

Continue on page 2.

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Please file this original scannable form with the Tax Department.



17 If your New York State filing status is (3), Married filing separate return, complete line 17. The NYS EIC on line 16 on page 1 can be divided between spouses in any manner you wish. Enter on line 17 the amount of NYS EIC from line 16 you are claiming, and also enter your joint federal adjusted gross income below **17.**

Dollars

- **federal adjusted gross income** (from federal Form 1040EZ, line 4; Form 1040A, line 22; or Form 1040, line 38)

Part-year New York State resident earned income credit

Lines 18 through 26 apply only to part-year New York State residents claiming the New York State earned income credit.

- 18** Enter your New York State earned income credit (from line 16 on page 1, or from line 17 above) **18.**
- 19** Enter the amount from Form IT-203, line 42 **19.**
- If line 19 is equal to or more than line 18, **stop. You do not have excess New York State earned income credit.**
 - If line 19 is less than line 18, **continue on line 20 below.**
- 20 Excess New York State earned income credit** (subtract line 19 from line 18) **20.**
- 21** Enter the amount from Form IT-203-ATT, line 31 (If you do not have to file Form IT-203-ATT, leave blank and continue on line 22 below.) **21.**
- If Form IT-215, line 21, is equal to or more than Form IT-215, line 20, **stop. Do not continue with this computation.** Enter the amount from line 20 above on Form IT-203-ATT, line 32.
 - If Form IT-215, line 21, is less than Form IT-215, line 20, enter the amount from line 20 above on Form IT-203-ATT, line 32, and continue on line 22 below.
- 22** Subtract line 21 from line 20. **This is your remaining excess New York State earned income credit** **22.**
- 23** Enter the amount from line 18, Column D, of the *Part-year resident income allocation worksheet* in your Form IT-203 instruction booklet **23.**
- 24** Enter the amount from line 18, Column A, of the *Part-year resident income allocation worksheet* in your Form IT-203 instruction booklet **24.**
- 25** Divide line 23 by line 24 (round the result to the fourth decimal place). This amount cannot exceed 100% (1.0000)..... **25.**
- 26** Multiply line 22 by line 25. Enter the result here and on Form IT-203-ATT, line 10. **This is the refundable portion of your part-year New York State resident earned income credit.** **26.**

New York City earned income credit (full-year and part-year New York City residents)

- 27** From **Worksheet C, New York City earned income credit**, on page 3 of Form IT-215-I, *Instructions for Form IT-215*. Enter here and on Form IT-150, line 45; Form IT-201, line 70; or Form IT-203-ATT, line 11 **27.** **21.**
- 28** **Part-year New York City adjusted gross income:** (see instructions) **28A.** **28B.**
- Enter the amounts from Form IT-360.1, line 20, columns A and B

Worksheet B (for Form IT-201 and Form IT-203 filers only)

- 1** New York State tax (from Form IT-201, line 39, or Form IT-203, line 38) **1.** **0.**
- 2** Resident credit (from Form IT-201, line 41, or Form IT-203-ATT, line 1) **2.**
- 3** Accumulation distribution credit (from Form IT-201-ATT, line 1, or Form IT-203-ATT, line 2) ... **3.**
- 4** Add lines 2 and 3 **4.** **0.**
- 5** Subtract line 4 from line 1. (If line 4 is more than line 1, enter 0.) Enter here and on line 13 on page 1 of this form **5.** **0.**

▼ **Paid preparer's use only** ▼

▼ **Taxpayer(s) sign here** ▼

Preparer's signature

Your signature

▼ SSN or PTIN:

• Employer identification number

Your occupation • **Financial Engineer**
Spouse's signature and occupation (if joint claim)

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

Mark an X if
self-employed

Student

▼ Daytime phone number

Address

Date

Date



2006

New York State Department of Taxation and Finance

IT-370

Application for Automatic Six-Month Extension of Time to File for Individuals

1 New York State income tax liability for 2006	1. _____	0 .
2 New York City income tax liability for 2006	2. _____	0 .
3 Yonkers income tax liability for 2006	3. _____	0 .
4 Sales and use tax due for 2006 (enter this amount here and on line 1 below)	4. _____	0 .
5 Total taxes (add lines 1 through 4)	5. _____	0 .
6 Total 2006 income tax already paid	6. _____	572 .
7 Total payment (subtract line 6 from line 5 and enter this amount here and on line 2 below). If line 6 is more than line 5, enter 0.00	7. _____	0 .

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12-02-06

▼ Detach here ▼

IT-370

2006 New York State Department of Taxation and Finance Application for Automatic Six-Month Extension of Time to File for Individuals

To get this extension, you must pay in full the balance due with this form. Attach check or money order payable to New York State Income Tax; write your social security number and 2006 Income Tax on your remittance and staple it to the top of this form.

Mark an X in the box for each tax that you are subject to:

New York State tax ☐ New York City tax ☐ Yonkers tax ☐

Your social security number (SSN)

Spouse's SSN

Your first name and middle initial

Your last name

Dollars Cents

Sean

Leckey

Spouse's first name and middle initial

Spouse's last name

1. Sales and use tax ... 0 .

Ihassane

Leckey

2. Total payment 0 .

Mailing address (number and street or rural route)

Apartment number

City, village, or post office

State ZIP code

Staten Island USA

3701061019



3701061019 084705338 4