



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

IT-201-V

(12/23)

Did you know? You can pay personal income tax owed with your return through your Individual Online Services account, no matter how you file your return. You can pay—or schedule a payment for—any day up to and including the due date. To learn about your payment options, visit www.tax.ny.gov (search: *pay*).

When to use this form

If you are paying New York State income tax by check or money order, you must use Form IT-201-V and submit it with your payment.

Caution

Do **not** use this form to pay a bill or other notice from the Tax Department that indicates you owe tax. For more information, visit www.tax.ny.gov (search: *pay a bill*).

If you received a bill from us for the amount you owe with your return **and** want to request an installment payment agreement (IPA), visit www.tax.ny.gov (search: *IPA*); do **not** use Form IT-201-V.

How to fill out your check or money order

1. Make your check or money order payable in U.S. funds to **New York State Income Tax**.
2. Write the last four digits of your Social Security number (SSN), the tax year, and **Income Tax** on it.

Completing the voucher

You must complete **all** information on the voucher to be sure your payment is credited to your account.

1. Enter the tax year from the income tax return you are filing and your **entire** SSN. If you do not enter this information completely and accurately, your payment may not be properly credited to your account.

2. If you are filing a joint return, include information for both spouses.
3. If you are entering a foreign address:
 - a. Enter the city, province, or state all in the *City, village, or post office box*,
 - b. Enter the **full** country name in the *Country* box. Do **not** abbreviate.
 - c. Enter the postal code, if any, in the *ZIP code* box.
4. Do not staple or clip your payment to Form IT-201-V. Place it loose in the envelope.

Mailing address

E-filed and previously filed returns

If you e-filed your income tax return, or if you are making a payment for a previously filed return, mail the voucher and payment to:

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

Paper returns

If you are filing a paper income tax return (including amended returns), include the voucher and payment with your return and mail to this address:

**STATE PROCESSING CENTER
PO BOX 15555
ALBANY NY 12212-5555**

If you are not using U.S. Mail, see Publication 55, *Designated Private Delivery Services*.

◀ Cut here ▶

STOP: Pay this electronically on our website.

Department of Taxation and Finance

Payment Voucher for Income Tax Returns



REV 01/17/24 PRO

IT-201-V

(12/23)

Tax year (yyyy) **2023** Make your check or money order payable in U.S. funds to **New York State Income Tax**. Write on your check or money order the last four digits of your SSN, the tax year, and **Income Tax**.

Your first name and middle initial YASWANTH		Your last name (for a joint return, enter spouse's name on line below) BADUGU		Your full SSN 809754687
Spouse's first name and middle initial		Spouse's last name		Spouse's full SSN (only if filing a joint return)
Mailing address 176 W DELAVAN AVE			Apartment number	Country
City, village or post office BUFFALO		State NY	ZIP code 14213	
Email: YASHBADUGU@GMAIL.COM				

Payment amount Dollars **2419** Cents **00**



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For office use only

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New York State E-File Signature Authorization for Tax Year 2023

For Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, and NYC-210

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

Taxpayer's name YASWANTH BADUGU	Spouse's name <i>(jointly filed return only)</i>
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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.

EROs must complete Part C prior to transmitting electronically filed income tax returns (Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, and NYC-210).

Both the paid preparer and the ERO are required to sign Part C. However, an individual performing as both the paid preparer and the ERO is only required to sign as the paid preparer. It is not necessary to include the ERO signature in this case. Note that an alternative signature can be used as described in Publication 58, *Information for Income Tax Return Preparers*, available on our website.

General instructions

Taxpayers must complete Part B before the ERO transmits the taxpayer's electronically filed Forms IT-201, *Resident Income Tax Return*, IT-201-X, *Amended Resident Income Tax Return*, IT-203, *Nonresident and Part-Year Resident Income Tax Return*, IT-203-X, *Amended Nonresident and Part-Year Resident Income Tax Return*, IT-214, *Claim for Real Property Tax Credit*, and NYC-210, *Claim for New York City School Tax Credit*. Note that an electronic signature can be used as described in TSB-M-20(1)C, (2)I, *E-File Authorizations (TR-579 forms) for Taxpayers Using a Paid Preparer for Electronically Filed Tax Returns*.

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 2023 Form IT-370 and Tax Year 2024 Form IT-2105*.

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

Part A – Tax return information

1 Federal adjusted gross income <i>(from applicable line)</i>	1.	86506.
2 Refund	2.	
3 Amount you owe	3.	2419.
4 Financial institution routing number	4.	
5 Financial institution account number	5.	
6 Account type: <input type="checkbox"/> Personal checking <input type="checkbox"/> Personal savings <input type="checkbox"/> Business checking <input type="checkbox"/> Business savings		

Part B – Declaration of taxpayer and authorizations for Forms IT-201, IT-201-X, IT-203, IT-203-X, IT-214, and NYC-210

Under penalty of perjury, I declare that I have examined the information on my 2023 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 2023 New York State electronic return to New York State through the Internal Revenue Service (IRS). In addition, by using a computer system and software to prepare and transmit my form electronically, I consent to the disclosure to New York State of all information pertaining to the transmission of my tax form electronically. 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 certify that the account holder has authorized 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 2023 electronic return, and authorized the financial institution to withdraw the amount from that account. As New York does not support International ACH Transactions (IAT), I attest the source for these funds is within the United States. I understand and agree that I may revoke this authorization for payment only by contacting the Tax Department no later than two (2) business days prior to the payment date.

Taxpayer's signature	Date
Spouse's signature <i>(jointly filed return only)</i>	Date

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

Under penalty of perjury, I declare that the information contained in this 2023 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 2023 New York State return signed by a paid preparer, I declare that the information contained in the taxpayer's 2023 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 2023 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.

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.

ERO's signature	Print name GLOBAL TAXES LLC	Date
Paid preparer's signature	Print name VENKATA SAI PAVAN KUMAR DUDIPALLI	Date



Department of Taxation and Finance

Resident Income Tax Return

New York State • New York City • Yonkers • MCTMT

IT-201

For the full year January 1, 2023, through December 31, 2023, or fiscal year beginning ... **23**
and ending ...

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

Your first name		MI	Your last name (for a joint return, enter spouse's name on line below)		Your date of birth (mmddyyyy)	Your Social Security number	
YASWANTH			BADUGU		06271999	809754687	
Spouse's first name		MI	Spouse's last name		Spouse's date of birth (mmddyyyy)	Spouse's Social Security number	
Mailing address (see instructions) (number and street or PO Box)					Apartment number	New York State county of residence	
176 W DELAVAN AVE						ERIE	
City, village, or post office			State	ZIP code	Country	School district name	
BUFFALO			NY	14213	UNITED STATES	365	
Taxpayer's permanent home address (see instructions) (number and street or rural route)					Apartment number	School district code number	
City, village, or post office			State	ZIP code	Decedent information	Taxpayer's date of death (mmddyyyy)	Spouse's date of death (mmddyyyy)
			NY				

- A Filing status** (mark an X in one box):
- ① Single
 - ② Married filing joint return (enter spouse's Social Security number above)
 - ③ Married filing separate return (enter spouse's Social Security number above)
 - ④ Head of household (with qualifying person)
 - ⑤ Qualifying surviving spouse

B Did you itemize your deductions on your 2023 federal income tax return? Yes No

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



H Dependent information

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

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



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Your Social Security number
809754687

Federal income and adjustments

Whole dollars only

1	Wages, salaries, tips, etc.	1	86506.00
2	Taxable interest income	2	.00
3	Ordinary dividends	3	.00
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)	4	.00
5	Alimony received	5	.00
6	Business income or loss (submit a copy of federal Schedule C, Form 1040)	6	.00
7	Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)	7	.00
8	Other gains or losses (submit a copy of federal Form 4797)	8	.00
9	Taxable amount of IRA distributions. If received as a beneficiary, mark an X in the box .. <input type="checkbox"/>	9	.00
10	Taxable amount of pensions and annuities. If received as a beneficiary, mark an X in the box <input type="checkbox"/>	10	.00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit copy of federal Schedule E, Form 1040)	11	.00
12	Rental real estate included in line 11	12	.00
13	Farm income or loss (submit a copy of federal Schedule F, Form 1040)	13	.00
14	Unemployment compensation	14	.00
15	Taxable amount of Social Security benefits (also enter on line 27)	15	.00
16	Other income Identify:	16	.00
17	Add lines 1 through 11 and 13 through 16	17	86506.00
18	Total federal adjustments to income Identify:	18	.00
19	Federal adjusted gross income (subtract line 18 from line 17)	19	86506.00

New York additions

20	Interest income on state and local bonds and obligations (but not those of NYS or its local governments)	20	.00
21	Public employee 414(h) retirement contributions from your wage and tax statements	21	.00
22	New York's 529 college savings program distributions	22	.00
23	Other (Form IT-225, line 9)	23	.00
24	Add lines 19 through 23	24	86506.00

New York subtractions

25	Taxable refunds, credits, or offsets of state and local income taxes (from line 4)	25	.00
26	Pensions of NYS and local governments and the federal government	26	.00
27	Taxable amount of Social Security benefits (from line 15) ...	27	.00
28	Interest income on U.S. government bonds	28	.00
29	Pension and annuity income exclusion	29	.00
30	New York's 529 college savings program deduction/earnings	30	.00
31	Other (Form IT-225, line 18)	31	.00
32	Add lines 25 through 31	32	.00
33	New York adjusted gross income (subtract line 32 from line 24)	33	86506.00



Standard deduction or itemized deduction

34	Enter your standard deduction or your itemized deduction (from Form IT-196) Mark an X in the appropriate box: <input checked="" type="checkbox"/> Standard - or - <input type="checkbox"/> Itemized	34	8000.00
35	Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)	35	78506.00
36	Dependent exemptions (enter the number of dependents listed in item H)	36	000.00
37	Taxable income (subtract line 36 from line 35)	37	78506.00

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Name(s) as shown on page 1
YASWANTH BADUGU

Your Social Security number
809754687

Tax computation, credits, and other taxes

38 Taxable income (from line 37 on page 2)	38	78506.00
39 NYS tax on line 38 amount	39	4153.00
40 NYS household credit	40	.00
41 Resident credit	41	.00
42 Other NYS nonrefundable credits (Form IT-201-ATT, line 7) ...	42	.00
43 Add lines 40, 41, and 42	43	.00
44 Subtract line 43 from line 39 (if line 43 is more than line 39, leave blank)	44	4153.00
45 Net other NYS taxes (Form IT-201-ATT, line 30)	45	.00
46 Total New York State taxes (add lines 44 and 45)	46	4153.00

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

47 NYC taxable income	47	78506.00
47a NYC resident tax on line 47 amount	47a	2918.00
48 NYC household credit	48	.00
49 Subtract line 48 from line 47a (if line 48 is more than line 47a, leave blank)	49	2918.00
50 Part-year NYC resident tax (Form IT-360.1)	50	.00
51 Other NYC taxes (Form IT-201-ATT, line 34)	51	.00
52 Add lines 49, 50, and 51	52	2918.00
53 NYC nonrefundable credits (Form IT-201-ATT, line 10)	53	.00
54 Subtract line 53 from line 52 (if line 53 is more than line 52, leave blank)	54	2918.00
54a MCTMT net earnings base for Zone 1..	54a	.00
54b MCTMT net earnings base for Zone 2 ..	54b	.00
54c MCTMT for Zone 1	54c	.00
54d MCTMT for Zone 2	54d	.00
54e Total MCTMT (add lines 54c and 54d)	54e	.00
55 Yonkers resident income tax surcharge	55	.00
56 Yonkers nonresident earnings tax (Form Y-203)	56	.00
57 Part-year Yonkers resident income tax surcharge (Form IT-360.1) ..	57	.00
58 Total New York City and Yonkers taxes / surcharges and MCTMT (add lines 54 and 54e through 57) ..	58	2918.00
59 Sales or use tax (do not leave blank)	59	0.00
60 Voluntary contributions (Form IT-227, Part 2, line 1)	60	.00
61 Total New York State, New York City, Yonkers, and sales or use taxes, MCTMT, and voluntary contributions (add lines 46, 58, 59, and 60)	61	7071.00

See instructions to compute New York City and Yonkers taxes, credits, and surcharges.



See instructions to compute the MCTMT for each zone.

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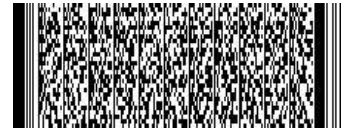


Your Social Security number
809754687

62 Enter amount from line 61 62 7071 .00

Payments and refundable credits

Table with 3 columns: Line number, Description, Amount. Includes lines 63-75 for various credits and taxes, and line 76 for total payments.



If applicable, complete Form(s) IT-2 and/or IT-1099-R and submit them with your return. Do not send federal Form W-2 with your return.

Your refund, amount you owe, and account information

Table with 3 columns: Line number, Description, Amount. Includes lines 77-78 for amount overpaid and refund, and lines 78a-78b for account deposit and total refund.

Mark one refund choice: [] direct deposit to checking or savings account (fill in line 83) - or - [] paper check

Refund? Direct deposit is the easiest, fastest way to get your refund. See instructions for payment options.

Table with 3 columns: Line number, Description, Amount. Includes lines 79-82 for tax application, payment amount, and penalties.

See instructions for the proper assembly of your return.

83 Account information for direct deposit or electronic funds withdrawal. If the funds for your payment (or refund) would come from (or go to) an account outside the U.S., mark an X in this box..... []

83a Account type: [] Personal checking - or - [] Personal savings - or - [] Business checking - or - [] Business savings
83b Routing number [] 83c Account number []

84 Electronic funds withdrawal Date [] Amount [] .00

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

Paid preparer must complete (see instructions) Preparer's NYTPRIN, NYTPRIN excl. code, Preparer's signature, Preparer's printed name, Firm's name, Preparer's PTIN or SSN, Address, Employer identification number, Date, Email.

Taxpayer(s) must sign here Your signature, Your occupation, Spouse's signature and occupation (if joint return), Date, Daytime phone number, Email.

See instructions for where to mail your return.



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Department of Taxation and Finance

Summary of W-2 Statements

IT-2

New York State • New York City • Yonkers

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

W-2 Record 1

Box a Employee's Social Security number for this W-2 Record

809754687

Box b Employer identification number (EIN)

061236737

Box c Employer's information

Employer's name SYNCHRONY BANK			
Employer's address (number and street) 170 WEST ELECTION ROAD SUITE 125			
City DRAPER	State UT	ZIP code 84020	Country

Box 1 Wages, tips, other compensation

86506.00

Box 8 Allocated tips

.00

Box 10 Dependent care benefits

.00

Box 11 Nonqualified plans

.00

Box 12a Amount

121.00 C

Box 12b Amount

780.00 D

Box 12c Amount

8326.00 D D

Box 12d Amount

.00

Box 14a Amount

399.00 NY PFL

Box 14b Amount

.00

Box 14c Amount

.00

Box 14d Amount

.00

Box 13 Statutory employee

Retirement plan

Third-party sick pay

Corrected (W-2c)

NY State information:

Box 15a NY State

N Y

Box 16a NYS wages, tips, etc.

86506.00

Box 17a NYS income tax withheld

4416.00

Other state information:

Box 15b other state

Box 16b Other state wages, tips, etc.

.00

Box 17b Other state income tax withheld

.00

NYC and Yonkers information (see instr.):

Box 18 Local wages, tips, etc.

Locality a .00

Locality b .00

Box 19 Local income tax withheld

Locality a .00

Locality b .00

Box 20 Locality name

Locality a

Locality b

Do not detach.

W-2 Record 2

Box a Employee's Social Security number for this W-2 Record

Box b Employer identification number (EIN)

Box c Employer's information

Employer's name			
Employer's address (number and street)			
City	State	ZIP code	Country

Box 1 Wages, tips, other compensation

.00

Box 8 Allocated tips

.00

Box 10 Dependent care benefits

.00

Box 11 Nonqualified plans

.00

Box 12a Amount

.00

Box 12b Amount

.00

Box 12c Amount

.00

Box 12d Amount

.00

Box 14a Amount

.00

Box 14b Amount

.00

Box 14c Amount

.00

Box 14d Amount

.00

Box 13 Statutory employee

Retirement plan

Third-party sick pay

Corrected (W-2c)

NY State information:

Box 15a NY State

N Y

Box 16a NYS wages, tips, etc.

.00

Box 17a NYS income tax withheld

.00

Other state information:

Box 15b other state

Box 16b Other state wages, tips, etc.

.00

Box 17b Other state income tax withheld

.00

NYC and Yonkers information (see instr.):

Box 18 Local wages, tips, etc.

Locality a .00

Locality b .00

Box 19 Local income tax withheld

Locality a .00

Locality b .00

Box 20 Locality name

Locality a

Locality b

102001233555



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