New York State Department of Taxation and Finance

Resident Income Tax Return

New York State • New York City • Yonkers

IT-201

For the full year January 1, 2013, through December 31, 2013, or fiscal year beginning ..

and ending ..

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

Your first name and middle initial		Your last name (for a joint return, enter spouse's name on line below)	Your date of birth (mm-dd-yyyy)	Your social security number
Marcus	J	Molinaro	10-08-1975	
Spouse's first name and middle initial		Spouse's last name	Spouse's date of birth (mm-dd-yyyy)	Spouse's social security number

Mailing address (see instructions, page 12) (number and street or rural route)	Apartment number	New York State county of residence
▓▓▓▓▓▓▓▓		Dutc

City, village, or post office	State	ZIP code	Country (if not United States)	School district name
Red Hook	NY	12571		Red Hook

Taxpayer's permanent home address (see instructions, page 12) (number and street or rural route)	Apartment number	School district code number 526

City, village, or post office	State	ZIP code	Decedent Information	Taxpayer's date of death	Spouse's date of death
	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 widow(er) with dependent child

B Did you itemize your deductions on your 2013 federal income tax return? .... Yes ☒ No ☐

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

D Did you have a financial account located in a foreign country? (see page 13) .... Yes ☐ No ☒

E (1) Did you or your spouse maintain living quarters in NYC during 2013? (see page 13) Yes ☐ No ☒

(2) Enter the number of days spent in NYC in 2013 (any part of a day spent in NYC is considered a day) ...... ☐

F NYC residents and NYC part-year residents only (see page 13):

(1) Number of months you lived in NYC in 2013 .... ☐

(2) Number of months your spouse lived in NYC in 2013 .... ☐

G Enter your 2-character special condition code if applicable (see page 13) .... ☐

If applicable, also enter your second 2-character special condition code .... ☐

H Dependent exemption information (see page 14)

First name and middle initial	Last name	Relationship	Social security number	Date of birth (mm-dd-yyyy)
▓▓▓▓▓▓	▓▓▓▓▓▓	Daughter	▓▓▓▓▓▓	

If more than 9 dependents, mark an X in the box. ☐

Your social security number

Federal income and adjustments (see page 14)

Whole dollars only

1 Wages, salaries, tips, etc.	1	140,601.
2 Taxable interest income	2	
3 Ordinary dividends	3	
4 Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 25)	4	1,117.
5 Alimony received	5	
6 Business income or loss (submit a copy of federal Schedule C or C-EZ, Form 1040)	6	
7 Capital gain or loss (if required, submit a copy of federal Schedule D, Form 1040)	7	
8 Other gains or losses (submit 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. (submit copy of federal Schedule E, Form 1040)	11	

12 Rental real estate included in line 11	12		
13 Farm income or loss (submit a copy of federal Schedule F, Form 1040)		13	
14 Unemployment compensation		14	
15 Taxable amount of social security benefits (also enter on line 27)		15	
16 Other income (see page 14) Identify:		16	
17 Add lines 1 through 11 and 13 through 16		17	141,718.
18 Total federal adjustments to income (see page 14) Identify:		18	
19 Federal adjusted gross income (subtract line 18 from line 17)		19	141,718.

New York additions (see page 14)

20 Interest income on state and local bonds and obligations (but not those of NYS or its local governments)	20	
21 Public employee 414(h) retirement contributions from your wage and tax statements (see page 15)	21	
22 New York's 529 college savings program distributions (see page 15)	22	
23 Other (see page 16) Identify:	23	
24 Add lines 19 through 23	24	141,718.

New York subtractions (see page 15)

25 Taxable refunds, credits, or offsets of state and local income taxes (from line 4)	25	1,117.		
26 Pensions of NYS and local governments and the federal government (see page 19)	26			
27 Taxable amount of social security benefits (from line 15)	27			
28 Interest income on U.S. government bonds	28			
29 Pension and annuity income exclusion (see page 19)	29			
30 New York's 529 college savings program deduction/earnings	30	2,400.		
31 Other (see page 20) Identify:	31			
32 Add lines 25 through 31			32	3,517.
33 New York adjusted gross income (subtract line 32 from line 24)			33	138,201.

Standard deduction or itemized deduction (see page 24)

34 Enter your standard deduction (table on page 24) or your itemized deduction (from Form IT-201-D)		
Mark an X in the appropriate box: ☐ Standard - or - ☒ Itemized	34	25,902.
35 Subtract line 34 from line 33 (if line 34 is more than line 33, leave blank)	35	112,299.
36 Dependent exemptions (not the same as total federal exemptions; see page 24)	36	1,000.
37 Taxable income (subtract line 36 from line 35)	37	111,299.

Tax computation, credits, and other taxes (see page 25)

38 Taxable income (from line 37 on page 2)	38	111,299.
39 NYS tax on line 38 amount (see page 25 and Tax computation on pages 57, 58, and 59)	39	7,197.
40 NYS household credit (page 25, table 1, 2, or 3)	40	
41 Resident credit (see page 26)	41	
42 Other NYS nonrefundable credits (Form IT-201-ATT, line 7)	42	
43 Add lines 40, 41, and 42	43	
44 Subtract line 43 from line 39 (if line 43 is more than line 39, leave blank)	44	7,197.
45 Net other NYS taxes (Form IT-201-ATT, line 30)	45	
46 Total New York State taxes (add lines 44 and 45)	46	7,197.

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

47 NYC resident tax on line 38 amount (see page 26)	47	
48 NYC household credit (page 26, table 4, 5, or 6)	48	
49 Subtract line 48 from line 47 (if line 48 is more than line 47, leave blank)	49	
50 Part-year NYC resident tax (Form IT-360.1)	50	
51 Other NYC taxes (Form IT-201-ATT, line 34)	51	
52 Add lines 49, 50, and 51	52	
53 NYC nonrefundable credits (Form IT-201-ATT, line 10)	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 28)	55	
56 Yonkers nonresident earnings tax (Form Y-203)	56	
57 Part-year Yonkers resident income tax surcharge (Form IT-360.1)	57	

See instructions on pages 26, 27, and 28 to compute New York City and Yonkers taxes, credits, and tax surcharges.

58 Total New York City and Yonkers taxes / surcharges (add lines 54 through 57)	58	
59 Sales or use tax (see page 29; do not leave line 59 blank)	59	74.

Voluntary contributions (see page 30)

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 30)	60e	
60f Prostate Cancer Research Fund	60f	
60g 9/11 Memorial	60g	
60h Volunteer Firefighting & EMS Recruitment Fund	60h	
60i Teen Health Education	60i	
60j Veterans Remembrance	60j	

60 Total voluntary contributions (add lines 60a through 60j)	60	
61 Total New York State, New York City, and Yonkers taxes, sales or use tax, and voluntary contributions (add lines 46, 58, 59, and 60)	61	7,271.

Your social security number

62 Enter amount from line 61 .... | **62** | 7,271.

Payments and refundable credits (see page 31)

63 Empire State child credit	**63**	
64 NYS/NYC child and dependent care credit	**64**	120.
65 NYS earned income credit (EIC)	**65**	
66 NYS noncustodial parent EIC	**66**	
67 Real property tax credit	**67**	
68 College tuition credit	**68**	
69 NYC school tax credit (also complete F on page 1; see page 31)	**69**	
70 NYC earned income credit	**70**	
71 Other refundable credits (Form IT-201-ATT, line 18)	**71**	
72 Total New York State tax withheld	**72**	8,590.
73 Total New York City tax withheld	**73**	
74 Total Yonkers tax withheld	**74**	
75 Total estimated tax payments and amount paid with Form IT-370	**75**	
76 Total payments (add lines 63 through 75)	**76**	8,710.

Submit your wage and tax statements with your return (see page 33).

Your refund, amount you owe, and account information (see pages 33 through 36)

77 Amount overpaid (if line 76 is more than line 62, subtract line 62 from line 76)	**77**	1,439.
78 Amount of line 77 to be refunded direct	**78**	1,439.

Mark one refund choice: [X] deposit (fill in line 83) - or - [ ] debit card - or - [ ] paper check ....

See pages 33 and 34 for information about your three refund choices.

79 Amount of line 77 that you want applied to your
2014 estimated tax (see instructions) .... | **79** | |

See page 35 for payment options.

80 Amount you owe (if line 76 is less than line 62, subtract line 76 from line 62). To pay by electronic
funds withdrawal, mark an X in the box [ ] and fill in lines 83 and 84. If you pay by check
or money order you must complete Form IT-201-V and mail it with your return. .... | **80** | |

See page 37 for the proper assembly of your return.

81 Estimated tax penalty (include this amount in line 80 or
reduce the overpayment on line 77; see page 34) .... | **81** | |
82 Other penalties and interest (see page 35) .... | **82** | |

83 Account information for direct deposit or electronic funds withdrawal (see page 35).

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 (see pg. 35) [ ]

83a Account type: [X] Personal checking - or - [ ] Personal savings - or - [ ] Business checking - or - [ ] Business savings

83b Routing number [▮▮▮] **83c** Account number [▮▮▮]

84 Electronic funds withdrawal (see page 36) .... Date [   ] Amount [   ]

Third–party designee? (see instr.) Yes [X] No [ ]	Print designee's name Mark S. O'Sullivan CPA E-mail: ▮▮▮	Designee's phone number ▮▮▮	Personal identification number (PIN) ▮▮▮

▼ Paid preparer must complete (see instr.) ▼	Date 03-03-2014	▼ Taxpayer(s) must sign here ▼
Preparer's signature	Preparer's NYTPRIN	Your signature
Firm's name (or yours, if self-employed) Sedore & Company, C.P.A.'s	Preparer's PTIN or SSN ▮▮▮	Your occupation County Executive
Address 2678 South Road, Suite 101 Poughkeepsie NY 12601	Employer identification number ▮▮▮ Mark an X if self-employed ___	Spouse's signature and occupation (if joint return) Date Daytime phone number
E-mail: ▮▮▮		E-mail:

See instructions for where to mail your return.

Submit this form with Form IT-201. See instructions for completing Form IT-201-D in the instructions for Form IT-201.

Name(s) as shown on your Form IT-201

MARCUS J MOLINARO

Your social security number

Whole dollars only

1 Medical and dental expenses (federal Schedule A, line 4)	1	
2 Taxes you paid (federal Schedule A, line 9)	2	16,010.
3 Interest you paid (federal Schedule A, line 15)	3	16,982.
4 Gifts to charity (federal Schedule A, line 19)	4	1,500.
5 Casualty and theft losses (federal Schedule A, line 20)	5	
6 Job expenses / miscellaneous deductions (federal Schedule A, line 27)	6	
7 Other miscellaneous deductions (federal Schedule A, line 28)	7	
8 Enter amount from federal Schedule A, line 29	8	34,492.
9 State, local, and foreign income taxes (or general sales tax, if applicable) and other subtraction adjustments (see instructions) ... See Stmt 1	9	8,590.
10 Subtract line 9 from line 8	10	25,902.
11 Addition adjustments (see instructions)	11	
12 Add lines 10 and 11	12	25,902.
13 Itemized deduction adjustment (see instructions)	13	
14 Subtract line 13 from line 12	14	25,902.
15 College tuition itemized deduction (see Form IT-272)	15	
16 New York State itemized deduction (add lines 14 and 15; enter on Form IT-201, line 34)	16	25,902.

New York State Department of Taxation and Finance

Claim for Child and Dependent Care Credit

New York State • New York City

2013

IT-216

Submit this form with Form IT-201 or IT-203.

Name(s) as shown on return	Your social security number
Marcus J Molinaro	████████

1 Have you already filed your New York State income tax return? .... Yes ☐ No ☒

If Yes, you must file an amended New York State return and include

Form IT-216 to claim this credit.

2 Persons or organizations who provided the care. (If you have more than two providers, see instructions.)

A – Care provider's first name, middle initial, and last name	B – Address	C – Identifying number (SSN or EIN)	D – Amount paid (see instructions)
Bobbie's Day Care	████████	TAXEXEMPT	8,805.

3 Qualifying persons you are claiming. List in order from youngest to oldest.

(If you are claiming more than four qualifying persons, mark an X in the box and see instructions.) .... ☐

A – First name and middle initial	B – Last name	C – Qualified expenses paid	D – Person with disability (see instr.)	E – Social security number	F – Date of birth (mm-dd-yyyy)
████████	Molinaro	8,805.	☐	████████	
			☐		
			☐		
			☐		

Note: If you are claiming expenses paid for a dependent child, include only those qualified expenses paid through the day preceding the child's 13th birthday.

3a Total of line 3, column C amounts. Include amounts from additional sheet(s), if any .... **3a** | 8,805.

4 Can you claim an exemption for all the qualified persons listed on line 3 and any additional sheet(s)? .... Yes ☒ No ☐

5 Enter the smallest of:

– line 3a above; or

– federal Form 2441, line 3; or

Whole dollars only

– 3,000 if one qualifying person, or 6,000 if two or more qualifying persons .... **5** | 3,000.

6 Enter your earned income (see instructions) .... **6** | 140,601.

7 If your filing status is ❺ Married filing joint return, enter your spouse's earned income;

all others, enter the amount from line 6 (see instructions) .... **7** | 140,601.

8 Enter the smallest of line 5, 6, or 7 .... **8** | 3,000.

9 Enter the amount from: federal Form 1040A, line 22,

or federal Form 1040, line 38 .... **9** | 141,718.

10 Enter the decimal amount that applies to the amount

on line 9 from the Table for line 10 in the instructions .... **10** | .20

11 Multiply line 8 by the decimal amount on line 10 (enter here and on line 12 on the back) .... **11** | 600.

12 Amount from line 11 .... **12** | 600.

13 Enter your New York adjusted gross income (Form IT-201 filers,
line 33; Form IT-203 filers, line 32) .... | 138,201.

Use the New York State child and dependent care
credit limitation table in the instructions to determine the decimal to be entered on this line .... **13** | 0.200

14 Multiply line 12 by the decimal amount on line 13. This is your New York State child and dependent
care credit (see instructions) .... **14** | 120.

Part-year New York State residents

15 Enter the amount from Form IT-203, line 40 .... **15** |
If line 15 is equal to or more than line 14, stop. You do not have excess credit.
If line 15 is less than line 14, continue on line 16 below.

16 Subtract line 15 from line 14. This is your excess child and dependent care credit .... **16** |

17 Enter the amount from Form IT-203-ATT, line 29 (If you are not required to file Form IT-203-ATT, leave
blank and continue on line 18 below.) .... **17** |
If line 17 is equal to or more than line 16, stop. Do not continue with this worksheet. Enter the line 16 amount
on Form IT-203-ATT, line 30.
If line 17 is less than line 16, enter the line 16 amount on Form IT-203-ATT, line 30, and continue on line 18 below.

18 Subtract line 17 from line 16. This is your remaining excess child and dependent care credit .... **18** |

19 Enter the amount from line 19, Column D, of the
Part-year resident income allocation worksheet
in the instructions for Form IT-203 .... **19** |

20 Enter the amount from line 19, Column A, of the
Part-year resident income allocation worksheet
in the instructions for Form IT-203 .... **20** |

21 Divide line 19 by line 20 (round the result to the fourth decimal place).
This amount cannot exceed 100% (1.0000) .... **21** |

22 Multiply line 18 by line 21. Enter the result here and on Form IT-203-ATT, line 9. This is the
refundable portion of your New York State part-year resident child and dependent care credit. .... **22** |

New York City child and dependent care credit

If you were a resident of New York City at any time during the tax year and your federal adjusted gross income
is $30,000 or less (see Note under New York City credit on page 1 of the instructions) and you listed a child under
4 years old as of December 31, on line 3, complete line 23 and see page 4 of the instructions.

23 Enter the portion of the total expenses from line 3a that was paid for children under 4 years old .... **23** |

IT-201 filers:

24 Refundable New York City child and dependent care credit (from Worksheet 1, line 7 or line 13) .... **24** |
25 Add lines 14 and 24; also enter this amount on Form IT-201, line 64 .... **25** |

26 Part-year New York City resident nonrefundable New York City child and dependent care credit
(from Worksheet 1, line 8); also enter this amount on Form IT-201-ATT, line 9a .... **26** |

IT-203 filers:

27 Nonrefundable portion of your part-year New York City resident New York City child and dependent
care credit (from Worksheet 1, line 8); also enter this amount on Form IT-203, line 52b .... **27** |

28 Refundable portion of your part-year New York City resident New York City child and dependent
care credit (from Worksheet 1, line 13); also enter this amount on Form IT-203-ATT, line 9a .... **28** |

Part-year New York City resident filers only:

29 Enter the amount from Worksheet 1, line 10 .... **29** |
30 Enter the amount from Worksheet 1, line 11 .... **30** |

Statement 1 - Form IT-201-D - Subtraction Adjustments

Class Code	Description	Amount
	State/local/foreign taxes	$ 8,590
	Total	$ 8,590

| Form **IT-201** | **New York College Tuition Addition and Subtraction Worksheet** | **2013** |

Name | Taxpayer Identification Number

Marcus J Molinaro

College Choice Tuition Savings Deduction and Earnings Distributions Worksheet

1.	Contributions to New York State College Choice Tuition Savings Program (From federal screen 1099Q)	1.	2,400.
2.	Contributions entered from a partnership	2.	
3.	Total contributions limited to maximum allowed (Added into lines 4 and 5 of next worksheet)	3.	2,400.
4.	Distributions included on federal Form 1040, line 21	4.	
5.	Add lines 3 and 4. This is your 2013 subtraction modification.	5.	2,400.

College Choice Tuition Savings Distribution Worksheet

1.	2013 and prior years' nonqualified withdrawals from your account(s)	1.	
2.	Distributions entered from a partnership	2.	
3.	Total 2013 and prior years' nonqualified withdrawals from your account(s)	3.	
4.	Total 2013 and prior years' contributions to your account(s)	4.	13,400.
5.	Total 2013 and prior years' subtraction modifications	5.	13,400.
6.	Subtract line 5 from line 4	6.	
7.	Total prior years' addition modifications	7.	
8.	Add lines 6 and 7	8.	
9.	Subtract line 8 from line 3. This is your 2013 addition modification.	9.	

Form **IT-201/203**	**New York Subtraction Adjustment Limitation Worksheet**	**2013**

Name	Taxpayer Identification Number
Marcus J Molinaro	▉

Part I - Long-term Care Adjustment

1.	Amount of long-term care premiums included on federal Schedule A, line 1	1. _____
2.	Amount from federal Schedule A, line 1	2. _____
3.	Divide line 1 by line 2 and carry the result to four decimal places	3. _____
4.	Amount from federal Schedule A, line 4	4. _____
5.	Multiply line 4 by line 3 and enter on line 4 below	5. _____

Part II - State, Local, and Foreign Income Taxes and Other Subtraction Adjustments

1.	Federal itemized deductions	1. 34,492.
2.	Amount of state, local, foreign income taxes or general sales tax from federal Schedule A, lines 5 and 8	2. 8,590.
3.	Other subtraction adjustments	3. _____
4.	Enter the amount of the Long-Term Care adjustment from Part I, line 5	4. _____
5.	Add lines 2, 3, and 4. Enter the total on Form IT-201-D or IT-203-D line 9	5. 8,590.

| Form **IT-201/203** | **New York State Tax Computation Worksheets**
(For taxpayers with adjusted gross income or taxable income greater than tax table thresholds) | **2013** |

| Name | Taxpayer Identification Number |

Marcus J Molinaro

New York State Tax Rate Schedule and Computation Worksheets

Form: **Form IT-201**

Tax Rate Schedule: (*Also calculates for worksheets)

If adjusted gross Income </= $102,900

1.	New York adjusted gross income (Calculates on worksheets when AGI is greater than $102,900)	1. **138,201.**
2.	Taxable income	2. **111,299.**
3.	Tax on line 2 based on filing status	3. **6,707.**

Tax Computations Worksheets 1, 5, 8:

If AGI > $102,900 but </= MFJ/QW ($2,058,550), Single/MFS ($1,029,250), HoH ($1,543,900)

Taxable income </= MFJ/QW ($154,350), Single/MFS ($205,850), HoH ($257,300)

1.	New York adjusted gross income	1.	138,201.
2.	Taxable income	2.	111,299.
3.	Multiply In 2 by MFJ/QW 6.45%, Single/MFS/HoH 6.65%	3.	7,401.
	(If AGI >/= $152,900 enter on line 9 and skip lines 4-8)		
4.	Tax calculated on line 2 based on rate schedule*	4.	6,707.
5.	Subtract line 4 from line 3	5.	694.
6.	Excess of line 1 over $102,900	6.	35,301.
7.	Divide line 6 by $50,000	7.	0.7060
8.	Multiply line 5 by line 7	8.	490.
9.	Add lines 4 and 8	9.	7,197.

Tax Computation Worksheets 2, 6, 9:

If AGI: MFJ/QW (>$154,350 but </= $2,058,550), Single/MFS (>$205,850, but </= $1,029,250), HoH (>$257,300 but </= $1,543,900)

Taxable income > MFJ/QW ($154,350 but not >$308,750), Single/MFS ($205,850), HoH ($257,300)

1.	New York adjusted gross income	1.	
2.	Taxable income	2.	
3.	Multiply In 2 by MFJ/QW 6.65%, Single/MFS/HoH 6.85%	3.	
	(If AGI >/= MFJ/QW ($204,350), Single/MFS ($255,850), HoH ($307,300) enter on line 11 and skip lines 4-10)		
4.	Tax calculated on line 2 based on rate schedule*	4.	
5.	Subtract line 4 from line 3	5.	
6.	Enter: MFJ/QW $652, Single/MFS $480, HoH $695	6.	
7.	Subtract line 6 from line 5	7.	
8.	Excess of line 1 > MFJ/QW ($154,350), Single/MFS ($205,850), HoH ($257,300)	8.	
9.	Divide line 8 by $50,000	9.	
10.	Multiply line 7 by line 9	10.	
11.	Add lines 4, 6, and 10	11.	

Tax Computation Worksheets 3, 7, 10:

If AGI > MFJ/QW ($308,750 but </= $2,058,550), Single/MFS ($1,029,250), HoH ($1,543,900)

Taxable income > MFJ/QW ($308,750)

1.	New York adjusted gross income	1.	
2.	Taxable income	2.	
3.	Multiply In 2 by MFJ/QW 6.85%, Single/MFS/HoH 8.82%	3.	
	(If AGI >/= MFJ/QW ($358,750), Single/MFS ($1,079,250), HoH ($1,593,900) enter on line 11 and skip lines 4-10)		
4.	Tax calculated on line 2 based on rate schedule*	4.	
5.	Subtract line 4 from line 3	5.	
6.	Enter: MFJ/QW $961, Single/MFS if Taxable </=$205,850 enter $480, >$205,850 enter $892 HoH if Taxable </=$257,300 enter $695, >$257,300 enter $1209	6.	
7.	Subtract line 6 from line 5	7.	
8.	Excess of line 1 > MFJ/QW ($308,750), Single/MFS ($1,029,250), HoH ($1,543,900)	8.	
9.	Divide line 8 by $50,000	9.	
10.	Multiply line 7 by line 9	10.	
11.	Add lines 4, 6, and 10	11.	

Tax Computation Worksheet 4: If AGI> MFJ/QW $2,058,550

1.	New York adjusted gross income	1.	
2.	Taxable income	2.	
3.	Multiply line 2 by 8.82%	3.	
	(If AGI >/= $2,108,550 enter on line 11 and skip lines 4-10)		
4.	Tax calculated on line 2 based on rate schedule*	4.	
5.	Subtract line 4 from line 3	5.	
6.	Enter: If Taxable income </= $154,350 enter $652, If > $154,300 but </= $308,750 enter $961, if > $308,750 enter $1578	6.	
7.	Subtract line 6 from line 5 (if less than zero, enter 0)	7.	
8.	Excess of line 1 over $2,058,550	8.	
9.	Divide line 8 by $50,000	9.	
10.	Multiply line 7 by line 9	10.	
11.	Add lines 4, 6, and 10	11.	

Filing Status: (Used for this calculation) .... **4-Head of household**

| Form **IT-201** | New York Two Year Comparison Report | **2012 & 2013** |

Name **Marcus J Molinaro**   Tp SSN

			2012	2013	Differences
Income	1. Wages	1.	135,234.	140,601.	5,367.
	2. Interest and dividends	2.			
	3. State tax refund	3.		1,117.	1,117.
	4. Alimony received	4.			
	5. Business income or loss	5.			
	6. Capital gain or loss	6.			
	7. Other gains or losses	7.			
	8. Taxable amount of IRA distributions	8.			
	9. Taxable amount of pensions and annuities	9.			
	10. Rent, royalty, partnership, S corporation and trust income	10.			
	11. Farm income or loss	11.			
	12. Unemployment	12.			
	13. Social security	13.			
	14. Other income	14.			
	15. **Total income**	15.	135,234.	141,718.	6,484.
	16. Total adjustments to income	16.			
	17. **Federal adjusted gross income**	17.	135,234.	141,718.	6,484.
Adjustments	18. Non-New York municipal income	18.			
	19. Public employee 414(h) retirement contributions	19.			
	20. Tuition and other additions	20.			
	21. **Total New York additions to income**	21.			
	22. State tax refund	22.		1,117.	1,117.
	23. Pensions of New York, local and federal governments	23.			
	24. Social security and Railroad Tier I	24.			
	25. US obligations	25.			
	26. Pension exclusion	26.			
	27. Tuition and other subtractions	27.	2,400.	2,400.	
	28. **Total New York subtractions from income**	28.	2,400.	3,517.	1,117.
	29. **New York adjusted gross income**	29.	132,834.	138,201.	5,367.
Deduction	30. Standard or itemized deduction	30.	20,893.	25,902.	5,009.
	31. Exemptions	31.	1,000.	1,000.	
	32. **New York taxable income**	32.	110,941.	111,299.	358.
Tax Computation	33. New York State tax	33.	7,146.	7,197.	51.
	34. New York household and other nonrefundable credits	34.			
	35. Other New York State taxes	35.			
	36. New York City resident tax	36.			
	37. New York City household credit	37.			
	38. Other New York City taxes	38.			
	39. New York City nonrefundable credits	39.			
	40. Yonkers taxes	40.			
	41. Use tax	41.	70.	74.	4.
	42. Voluntary gifts or contributions	42.			
	43. **Total taxes, gifts and contributions**	43.	7,216.	7,271.	55.
	44. New York State child and dependent care credit	44.	120.	120.	
	45. New York State earned income credit	45.			
	46. Real property tax credit	46.			
	47. All other refundable credits	47.			
	48. Total New York State income tax withheld	48.	8,263.	8,590.	327.
	49. Total New York City income tax withheld	49.			
	50. Total Yonkers income tax withheld	50.			
	51. Estimated tax payments	51.			
	52. Other payments	52.			
	53. **Total payments and refundable credits**	53.	8,383.	8,710.	327.
	54. Tax due or -refund	54.	-1,167.	-1,439.	-272.
	55. Penalties and interest	55.			
	56. **Net tax due or -refund**	56.	-1,167.	-1,439.	-272.
	57. Effective tax rate	57.	7 %	7 %	

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Form **1040** Department of the Treasury—Internal Revenue Service   (99)
U.S. Individual Income Tax Return **2013** OMB No. 1545-0074 | IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2013, or other tax year beginning _____ , 2013, ending _____ , 20 ___   See separate instructions.

Your first name and initial: **Marcus J** Last name: **Molinaro**   Your social security number ▆▆▆▆▆▆

If a joint return, spouse's first name and initial: _____ Last name: _____

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

▲ Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).
Red Hook   **NY**   **12571**

Foreign country name _____ Foreign province/state/county _____ Foreign postal code _____

Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund.
☐ You ☐ Spouse

Filing Status
Check only one box.

1 ☐ Single
2 ☐ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☒ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶ _____
5 ☐ Qualifying widow(er) with dependent child

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a
b ☐ Spouse

| Boxes checked on 6a and 6b | **1** |

c Dependents:

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qual. for child tax credit (see instr.)
▆▆▆▆ Molinaro	▆▆▆▆	Daughter	☒

No. of children on 6c who:
• lived with you **1**
• did not live with you due to divorce or separation (see instructions) _____
Dependents on 6c not entered above _____
Add numbers on lines above ▶ **2**

If more than four dependents, see instructions and check here ▶ ☐

d Total number of exemptions claimed

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	**7** 140,601
8a	Taxable interest. Attach Schedule B if required	**8a**
b	Tax-exempt interest. **Do not** include on line 8a **8b**	
9a	Ordinary dividends. Attach Schedule B if required	**9a**
b	Qualified dividends **9b**	
10	Taxable refunds, credits, or offsets of state and local income taxes	**10** 1,117
11	Alimony received	**11**
12	Business income or (loss). Attach Schedule C or C-EZ	**12**
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐	**13**
14	Other gains or (losses). Attach Form 4797	**14**
15a	IRA distributions **15a** b Taxable amount	**15b**
16a	Pensions and annuities **16a** b Taxable amount	**16b**
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	**17**
18	Farm income or (loss). Attach Schedule F	**18**
19	Unemployment compensation	**19**
20a	Social security benefits **20a** b Taxable amount	**20b**
21	Other income. List type and amount	**21**
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	**22** 141,718

Adjusted Gross Income

23	Educator expenses	**23**
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	**24**
25	Health savings account deduction. Attach Form 8889	**25**
26	Moving expenses. Attach Form 3903	**26**
27	Deductible part of self-employment tax. Attach Schedule SE	**27**
28	Self-employed SEP, SIMPLE, and qualified plans	**28**
29	Self-employed health insurance deduction	**29**
30	Penalty on early withdrawal of savings	**30**
31a	Alimony paid b Recipient's SSN ▶ _____	**31a**
32	IRA deduction	**32**
33	Student loan interest deduction	**33**
34	Tuition and fees. Attach Form 8917	**34**
35	Domestic production activities deduction. Attach Form 8903	**35**
36	Add lines 23 through 35	**36**
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶	**37** 141,718

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

Form **1040** (2013)

Form 1040 (2013)   Marcus J Molinaro

Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	141,718
	39a	Check if: ☐ You were born before January 2, 1949, ☐ Blind. ☐ Spouse was born before January 2, 1949, ☐ Blind. } Total boxes checked ► 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ► 39b ☐		
Standard Deduction for—	40	Itemized deductions (from Schedule A) or your **standard deduction** (see left margin)	40	34,492
• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.	41	Subtract line 40 from line 38	41	107,226
	42	Exemptions. If line 38 is $150,000 or less, multiply $3,900 by the number on line 6d. Otherwise, see instructions	42	7,800
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	99,426
	44	Tax (see instr.). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐	44	19,359
• All others: Single or Married filing separately, $6,100 Married filing jointly or Qualifying widow(er), $12,200 Head of household, $8,950	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45 ►	46	19,359
	47	Foreign tax credit. Attach Form 1116 if required	47	
	48	Credit for child and dependent care expenses. Attach Form 2441	48	600
	49	Education credits from Form 8863, line 19	49	
	50	Retirement savings contributions credit. Attach Form 8880	50	
	51	Child tax credit. Attach Schedule 8812, if required	51	
	52	Residential energy credits. Attach Form 5695	52	
	53	Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐	53	
	54	Add lines 47 through 53. These are your **total credits**	54	600
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ►	55	18,759
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59a	Household employment taxes from Schedule H	59a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	59b	
	60	Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instructions; enter code(s)	60	
	61	Add lines 55 through 60. This is your **total tax** ►	61	18,759
Payments	62	Federal income tax withheld from Forms W-2 and 1099	62	22,058
	63	2013 estimated tax payments and amount applied from 2012 return	63	
If you have a qualifying child, attach Schedule EIC.	64a	Earned income credit (EIC)	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Schedule 8812	65	
	66	American opportunity credit from Form 8863, line 8	66	
	67	Reserved	67	
	68	Amount paid with request for extension to file	68	
	69	Excess social security and tier 1 RRTA tax withheld	69	
	70	Credit for federal tax on fuels. Attach Form 4136	70	
	71	Credits from Form: a ☐ 2439 b ☐ Reserved c ☐ 8885 d ☐	71	
	72	Add lines 62, 63, 64a, and 65 through 71. These are your **total payments** ►	72	22,058
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you **overpaid**	73	3,299
	74a	Amount of line 73 you want **refunded to you.** If Form 8888 is attached, check here ► ☐	74a	3,299
Direct deposit? See instructions.	► b	Routing number [black] ► c Type: ☒ Checking ☐ Savings		
	► d	Account number [black]		
	75	Amount of line 73 you want applied to your 2014 estimated tax ► 75		
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions ►	76	
	77	Estimated tax penalty (see instructions) 77		

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

Designee's name ► Mark S.O'Sullivan CPA   Personal identification number (PIN) ►   Phone no. ►

Sign Here
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instr. Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		County Executive	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-emp	PTIN
Mark S.O'Sullivan CPA		03/03/14		

Firm's name ► Sedore & Company, C.P.A.'s, P.C.   Firm's EIN ►
Firm's address ► 2678 South Road, Suite 101   Phone no.
Poughkeepsie   NY 12601-5254

Form **1040** (2013)

DAA

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SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service   (99)

Itemized Deductions

▶ Information about Schedule A and its separate instructions is at www.irs.gov/schedulea.

▶ Attach to Form 1040.

OMB No. 1545-0074

2013

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

Marcus J Molinaro

Your social security number

Medical and Dental Expenses		Caution. Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1		
	2	Enter amount from Form 1040, line 38 [2]			
	3	Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1949, multiply line 2 by 7.5% (.075) instead	3		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	
Taxes You Paid	5	State and local (check only one box):	5	8,590	
		a [X] Income taxes, or			
		b [ ] General sales taxes			
	6	Real estate taxes (see instructions)	6	7,420	
	7	Personal property taxes	7		
	8	Other taxes. List type and amount ▶	8		
	9	Add lines 5 through 8		9	16,010
Interest You Paid Note. Your mortgage interest deduction may be limited (see instructions).	10	Home mortgage interest and points reported to you on Form 1098	10	16,982	
	11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶	11		
	12	Points not reported to you on Form 1098. See instructions for special rules	12		
	13	Mortgage insurance premiums (see instructions)	13		
	14	Investment interest. Attach Form 4952 if required. (See instructions.)	14		
	15	Add lines 10 through 14		15	16,982
Gifts to Charity If you made a gift and got a benefit for it, see instructions.	16	Gifts by cash or check. If you made any gift of $250 or more, see instructions	16	1,500	
	17	Other than by cash or check. If any gift of $250 or more, see instructions. You must attach Form 8283 if over $500	17		
	18	Carryover from prior year	18		
	19	Add lines 16 through 18		19	1,500
Casualty and Theft Losses	20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)		20	
Job Expenses and Certain Miscellaneous Deductions	21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21		
	22	Tax preparation fees	22		
	23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23		
	24	Add lines 21 through 23	24		
	25	Enter amount from Form 1040, line 38 [25]			
	26	Multiply line 25 by 2% (.02)	26		
	27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-		27	
Other Miscellaneous Deductions	28	Other—from list in instructions. List type and amount ▶		28	
Total Itemized Deductions	29	Is Form 1040, line 38, over $150,000?		29	34,492
		[X] No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.			
		[ ] Yes. Your deduction may be limited. See the Itemized Deductions Worksheet in the instructions to figure the amount to enter.			
	30	If you elect to itemize deductions even though they are less than your standard deduction, check here ▶ [ ]			

For Paperwork Reduction Act Notice, see Form 1040 instructions.

DAA

Schedule A (Form 1040) 2013

Form **2441**

Child and Dependent Care Expenses

▶ Attach to Form 1040, Form 1040A, or Form 1040NR.

▶ Information about Form 2441 and its separate instructions is at www.irs.gov/form2441.

| 1040 |
| 1040A |
| 1040NR |
| 2441 |
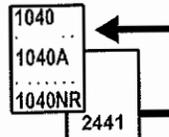
OMB No. 1545-0074

2013

Attachment
Sequence No. **21**

Department of the Treasury
Internal Revenue Service   (99)

Name(s) shown on return

Marcus J Molinaro

Your social security number ███████

Part I — Persons or Organizations Who Provided the Care –You **must** complete this part.

(If you have more than two care providers, see the instructions.)

1	(a) Care provider's name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Amount paid (see instructions)
	Bobbie Coston	██████████	██████████	8,805

| Did you receive dependent care benefits? | No ───────▶ Complete only Part II below. |
| | Yes ───────▶ Complete Part III on the back next. |

Caution. If the care was provided in your home, you may owe employment taxes. If you do, you cannot file Form 1040A. For details, see the instructions for Form 1040, line 59a, or Form 1040NR, line 58a.

Part II — Credit for Child and Dependent Care Expenses

2   Information about your **qualifying person(s)**. If you have more than two qualifying persons, see the instructions.

(a) Qualifying person's name		(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2013 for the person listed in column (a)
First	Last		
██████████	Molinaro	██████████	8,805

3 Add the amounts in column (c) of line 2. **Do not** enter more than $3,000 for one qualifying person or $6,000 for two or more persons. If you completed Part III, enter the amount from line 31	**3**		3,000
4 Enter your earned income. See instructions	**4**		140,601
5 If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions); **all others,** enter the amount from line 4	**5**		140,601
6 Enter the **smallest** of line 3, 4, or 5	**6**		3,000
7 Enter the amount from Form 1040, line 38; Form 1040A, line 22; or Form 1040NR, line 37	**7**	141,718	

8   Enter on line 8 the decimal amount shown below that applies to the amount on line 7

If line 7 is:			If line 7 is:		
Over	But not over	Decimal amount is	Over	But not over	Decimal amount is
$0 – 15,000		.35	$29,000 – 31,000		.27
15,000 – 17,000		.34	31,000 – 33,000		.26
17,000 – 19,000		.33	33,000 – 35,000		.25
19,000 – 21,000		.32	35,000 – 37,000		.24
21,000 – 23,000		.31	37,000 – 39,000		.23
23,000 – 25,000		.30	39,000 – 41,000		.22
25,000 – 27,000		.29	41,000 – 43,000		.21
27,000 – 29,000		.28	43,000 – No limit		.20

8   X   .20

9 Multiply line 6 by the decimal amount on line 8. If you paid 2012 expenses in 2013, see the instructions	**9**		600
10 Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions	**10**	19,359	
11 Credit for child and dependent care expenses. Enter the smaller of line 9 or line 10 here and on Form 1040, line 48; Form 1040A, line 29; or Form 1040NR, line 46	**11**		600

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

Form **2441** (2013)

DAA

| Form **1040** | **General Sales Tax Deduction Worksheet** | **2013** |

Name as shown on return
Marcus J Molinaro

Taxpayer Identification Number

| State of | Locality of |
| New York | Dutchess County |

General Sales Tax from IRS Tables

1. Enter the amount of adjusted gross income (AGI) from Form 1040, Line 37 .... **1.** _141,718_
2. Add the nontaxable amounts from Form 1040, lines 8b, 15a, 16a, 20a (Exclude rollovers and tax-free Sec. 1035 exchanges) **2.** _____
3. Add the following nontaxable items: nontaxable combat pay, public assistance, veteran's benefits, and workers' compensation.
   Also include any amounts which increase spendable income, such as the refundable portion of refundable tax credits
   received in 2013 .... **3.** _____
4. Add lines 1 through 3, this is income for general sales tax table purposes .... **4.** _141,718_
5. Enter the amount from the sales tax table in the Schedule A instructions. .... **5.** _741_
   Part-year residents, complete lines 6 - 8; Full-year residents skip lines 6 - 8
   and enter the amount from line 5 on line 9
6. Enter the number of days of residence in state .... **6.** _____
7. Total days in year .... **7.** _365_
8. Divide line 6 by line 7 (rounded to at least 3 decimal places) .... **8.** _____
9. Multiply line 5 by line 8, this is the deductible general sales tax using the IRS table. **9.** _741_

Local Sales Tax Using IRS Tables

10. Enter the amount from the sales tax table in the Schedule A instructions. .... **10.** _741_
11. If you are a resident of Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Louisiana, Missouri
    New York State, North Carolina, South Carolina, Tennessee, Utah, Virginia, or West Virginia, enter
    the amount from the applicable Optional Local Sales Tax Table in the Schedule A instructions. ..... **11.** _____
12. Enter the local general sales tax rate (exclude statewide local sales tax rate) .... **12.** _4.12500_
13. Enter the state general sales tax rate (include statewide local sales tax rate) .... **13.** _4.0000_
14. Divide line 12 by line 13 (rounded to at least 3 decimal places) .... **14.** _1.031_
15. If you entered an amount on line 11, multiply line 11 by line 12. This is the local sales tax
    using the optional local sales tax tables.
    Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18
    and enter the amount from line 15 on line 19
    If you did not enter an amount on line 11, multiply line 10 by line 14. This is the local sales tax **15.** _764_
    using the optional state and certain local sales tax tables.
    Part-year residents, complete lines 16 - 18; Full-year residents skip lines 16 - 18
    and enter the amount from line 15 on line 19
16. Enter the number of days of residence in locality .... **16.** _____
17. Total days in year .... **17.** _365_
18. Divide line 16 by line 17 (rounded to at least 3 decimal places) .... **18.** _____
19. Multiply line 15 by line 18. This is the deductible general local sales tax using the IRS tables. **19.** _764_

General Sales Tax Summary

20. Enter the sum of line 9 from all General Sales Tax Deduction Worksheets .... **20.** _741_
21. Enter the sum of line 19 from all General Sales Tax Deduction Worksheets .... **21.** _764_
22. Add lines 20 and 21, this is the total General Sales taxes using the tables .... **22.** _1,505_
23. Enter the actual state and local general sales taxes paid .... **23.** _____
24. Enter the greater of line 22 or line 23 .... **24.** _1,505_
25. Enter the state and local taxes paid on specified items (major purchases) .... **25.** _____
26. Add lines 24 and 25, this is the deductible General Sales tax .... **26.** _1,505_
27. Enter total state and local income taxes paid .... **27.** _8,590_

Enter the greater of line 26 or 27 on Schedule A, line 5. If line 26 is greater, mark Schedule A, line 5b. If line 27 is greater, mark Schedule A, line 5a.

| Form **1040** | **Qualified Tuition Program Contribution Worksheet** | **2013** |

Name

Marcus J Molinaro

Taxpayer Identification Number

State Qualified Tuition Program Beneficiary Summary

Beneficiary SSN	Beneficiary First Name	Beneficiary Last Name	Current Year Contribution
		MOLINARO	1,200
		Molinaro	1,200

Private Qualified Tuition Program Beneficiary Summary

Beneficiary SSN	Beneficiary First Name	Beneficiary Last Name	Current Year Contribution

Form **1040**	QTP/ESA Basis Worksheet	**2013**

Name

Taxpayer Identification Number

Marcus J Molinaro

Payer's/Trustee's name .... **New York College Plus**

Account type .... **State QTP**

Account number _____

Beneficiary first name ....

Beneficiary last name **MOLINARO**

Worksheet for Determining QTP/ESA Basis Amounts

1.	Basis in QTP/ESA as of December 31, 2012	1. 10,100
2.	Enter QTP/ESA contributions for 2013	2. 1,200
3.	Add lines 1 and 2	3. 11,300
4.	Enter distributions from this QTP/ESA during 2013	4.
5.	Subtract Line 4 from Line 3	5. 11,300
6.	Other increases or decreases to basis	6.
7.	Basis in your QTP or ESA as of December 31, 2013	7. 11,300

| Form **1040** | QTP/ESA Basis Worksheet | **2013** |

Name

Marcus J Molinaro

Taxpayer Identification Number

Payer's/Trustee's name .... **New York College savings Plus**

Account type .... **State QTP**

Account number

Beneficiary first name ....

Beneficiary last name **Molinaro**

Worksheet for Determining QTP/ESA Basis Amounts

1.	Basis in QTP/ESA as of December 31, 2012	1. 3,800
2.	Enter QTP/ESA contributions for 2013	2. 1,200
3.	Add lines 1 and 2	3. 5,000
4.	Enter distributions from this QTP/ESA during 2013	4.
5.	Subtract Line 4 from Line 3	5. 5,000
6.	Other increases or decreases to basis	6.
7.	Basis in your QTP or ESA as of December 31, 2013	7. 5,000

Form **1040**		Nonrefundable Personal Credit Limitation Worksheet		**2013**

Name	Marcus J Molinaro	Taxpayer Identification Number	

Amounts from tax return

a.	Regular tax (Form 1040, line 44)	a. 19,359	g.	CTC, line 11 wrk, line 12	g.	m.	Form 8834, line 23	m.	
b.	AMT (Form 1040, line 45)	b.	h.	Child tax cr (Form 1040, line 51)	h.	n.	Form 8859, line 3	n.	
c.	Foreign tax cr (Form 1040, line 47)	c.	i.	Form 5695, line 30	i.	o.	Form 8910, line 15	o.	
d.	Child care cr (Form 1040, line 48)	d. 600	j.	Form 5695, line 15	j.	p.	Form 8936, line 23	p.	
e.	Education cr (Form 1040, line 49)	e.	k.	Form 8396, line 9	k.	q.	Form 8834, line 30	q.	
f.	Retirement cr (Form 1040, line 50)	f.	l.	Elderly cr (Sch R, line 22)	l.	r.	Form 3800, line 38	r.	
						s.	Form 8839, line 16	s.	

		Form 2441	Schedule R	Form 8880	Form 5695, Part II	Form 5695, Part I
1.	Total tax available	1. 19,359				
2.	Other nonrefundable personal credits allowed	2.				
3.	Limitation based on tax liability, line 1 minus line 2	3. 19,359				
4.	Amount from line 3 reported on	4. F2441, ln 10				
5.	Code(s) for tax amount(s) from above	5. a b				
6.	Code(s) for credit amount(s) from above	6. c				

		Form 8834, Sec C	Form 8910, Part III	Form 8911, Part III	Form 8936, Part III	Form 8396
1.	Total tax available	1.				
2.	Other nonrefundable personal credits allowed	2.				
3.	Limitation based on tax liability, line 1 minus line 2	3.				
4.	Amount from line 3 reported on	4.				
5.	Code(s) for tax amount(s) from above	5.				
6.	Code(s) for credit amount(s) from above	6.				

		Form 8839	Form 8859	Form 8801
1.	Total tax available	1.		
2.	Other nonrefundable personal credits allowed	2.		
3.	Limitation based on tax liability, line 1 minus line 2	3.		
4.	Amount from line 3 reported on	4.		
5.	Code(s) for tax amount(s) from above	5.		
6.	Code(s) for credit amount(s) from above	6.		

Form 8863, Line 19

1. Enter the amount from Form 8863, line 18 _____
2. Enter the amount from Form 8863, line 9 _____
3. Add lines 1 and 2 _____
4. Enter the amount from Form 1040, line 46 _____

5. Enter the total of code(s) c, d, and l from above _____
6. Subtract line 5 from line 4 _____
7. Enter the smaller of line 3 or line 6 here and on Form 8863, line 19 _____

Form **1040**		Tax Refund Worksheets		**2013**

Name: Marcus J Molinaro

Taxpayer Identification Number: ███████

		2012	2011	2010
1.	State and local tax refunds	**1.** 1,117		
2a.	State and local tax refunds with no tax benefit derived due to AMT	**2a.**		
2b.	Sales tax benefit reduction	**2b.**		
3.	Net state and local tax refunds. Subtract lines 2a and 2b from line 1	**3.** 1,117		
4.	Total itemized deductions from Schedule A	**4.** 29,156		
5.	Standard deduction	**5.** 8,700		
6.	Subtract line 5 from line 4. If result is zero or less, **STOP** here. The amount on line 3 is not taxable	**6.** 20,456		
7.	Enter the smaller of line 3 or line 6	**7.** 1,117		
8.	Taxable income (If taxable income is negative amount, enter that amount in brackets. Adjust taxable income for any NOL carryover.)	**8.** 98,478		
9.	Enter the following amount to include on Form 1040, line 10:	**9.** 1,117		

If line 8 is:
- 0 or more, enter the amount from line 7.
- A negative amount, add lines 7 and 8 and enter net amount, but not less than zero.

Tax Refund Worksheet for Itemized Deduction Limitation

		2012 *	2011 *	2010 *
1.	State and local tax refunds subject to phase-out	**1.**		
2a.	State and local tax refunds with no tax benefit derived due to AMT	**2a.**		
2b.	Sales tax benefit reduction	**2b.**		
3.	Net state and local tax refunds. Subtract lines 2a and 2b from line 1	**3.**		
	Itemized deductions before state and local tax refunds:			
4.	Adjusted gross income	**4.**		
5.	AGI threshold	**5.**		
6.	Line 4 minus line 5	**6.**		
7.	Itemized deductions before phase-out	**7.**		
8.	Itemized deductions subject to phase-out	**8.**		
9.	Multiply line 6 by 3% (.03)	**9.**		
10.	Multiply line 8 by 80% (.80)	**10.**		
11.	Phase-out (smaller of line 9 or line 10 (times 1/3 for 20XX))	**11.**		
12.	Allowable itemized deductions (line 7 minus line 11)	**12.**		
	Itemized deductions adjusted for state and local tax refund:			
13.	Adjusted itemized deductions before phase-out (line 7 minus line 3)	**13.**		
14.	Adjusted itemized deductions subject to phase-out (line 8 minus line 3)	**14.**		
15.	Multiply line 14 by 80% (.80)	**15.**		
16.	Adjusted phase-out (smaller of line 9 or 15 (times 1/3 for 20XX))	**16.**		
17.	Adjusted itemized deductions allowed (line 13 minus line 16)	**17.**		
18.	Standard deduction	**18.**		
19.	Enter the larger of line 17 or line 18	**19.**		
20.	Taxable refund to be reported on Form 1040, line 10 (line 12 minus line 19)	**20.**		

* Schedule A limitation did not apply for 2010, 2011 and 2012, due to the Economic Growth and Tax Relief Reconciliation Act of 2001.

Form **1040**	Tax Refund Worksheet - 2013 State and Local Refunds	**2014**

Name

Taxpayer Identification Number

Marcus J Molinaro

NY

1.	2013 payments paid in 2014	1.	
2.	2013 extension paid in 2014	2.	
3.	2013 additional payment paid in 2014	3.	
4.	Total 2013 payments paid in 2014 (sum of lines 1 through 3)	4.	
5.	Total payments on the 2013 return	5.	8,590
6.	Total 2013 overpayment/refund	6.	1,393
7.	2013 refund attributable to tax paid in 2014 (line 4 divided by line 5 multiplied by line 6)	7.	
8.	2013 state/local tax refund attributable to tax paid in 2013 (line 6 minus line 7)	8.	1,393

1.	2013 payments paid in 2014	1.	
2.	2013 extension paid in 2014	2.	
3.	2013 additional payment paid in 2014	3.	
4.	Total 2013 payments paid in 2014 (sum of lines 1 through 3)	4.	
5.	Total payments on the 2013 return	5.	
6.	Total 2013 overpayment/refund	6.	
7.	2013 refund attributable to tax paid in 2014 (line 4 divided by line 5 multiplied by line 6)	7.	
8.	2013 state/local tax refund attributable to tax paid in 2013 (line 6 minus line 7)	8.	

1.	2013 payments paid in 2014	1.	
2.	2013 extension paid in 2014	2.	
3.	2013 additional payment paid in 2014	3.	
4.	Total 2013 payments paid in 2014 (sum of lines 1 through 3)	4.	
5.	Total payments on the 2013 return	5.	
6.	Total 2013 overpayment/refund	6.	
7.	2013 refund attributable to tax paid in 2014 (line 4 divided by line 5 multiplied by line 6)	7.	
8.	2013 state/local tax refund attributable to tax paid in 2013 (line 6 minus line 7)	8.	

1.	2013 payments paid in 2014	1.	
2.	2013 extension paid in 2014	2.	
3.	2013 additional payment paid in 2014	3.	
4.	Total 2013 payments paid in 2014 (sum of lines 1 through 3)	4.	
5.	Total payments on the 2013 return	5.	
6.	Total 2013 overpayment/refund	6.	
7.	2013 refund attributable to tax paid in 2014 (line 4 divided by line 5 multiplied by line 6)	7.	
8.	2013 state/local tax refund attributable to tax paid in 2013 (line 6 minus line 7)	8.	

1.	2013 payments paid in 2014	1.	
2.	2013 extension paid in 2014	2.	
3.	2013 additional payment paid in 2014	3.	
4.	Total 2013 payments paid in 2014 (sum of lines 1 through 3)	4.	
5.	Total payments on the 2013 return	5.	
6.	Total 2013 overpayment/refund	6.	
7.	2013 refund attributable to tax paid in 2014 (line 4 divided by line 5 multiplied by line 6)	7.	
8.	2013 state/local tax refund attributable to tax paid in 2013 (line 6 minus line 7)	8.	

Total of ALL 2013 state/local tax refunds attributable to tax paid in 2014 (sum of lines 7)

Total of ALL 2013 state/local tax refunds attributable to tax paid in 2013 (sum of lines 8; for 2014 Tax Refund Wrk) 1,393

Dutchess County

Form W-2, Box 12

Description		Amount
Cost of group term life insurance coverage over 50,000	$	97
Cost of employer-sponsored health coverage		20,239
Total	$	20,336

Dutchess County

Form W-2, Box 14 - Other

Description		Amount
CAR	$	1,170
Total	$	1,170

Schedule A, Line 5 - State and Local Taxes

Description	Amount
State Withholding on W-2s	$ 8,590
Total Income Taxes*	8,590
General Sales Tax	1,505
Total Sales Taxes	1,505

*Income taxes are being deducted

Schedule A, Line 6 - Real Estate Taxes

Description	Amount
Real Estate Taxes	$ 7,420
Total	$ 7,420

Schedule A, Line 10 - Home Mortgage Interest & Points From Form 1098

Description	Amount
Bank of America	$ 11,503
Ulster Savings Bank	5,479
Total	$ 16,982

Schedule A, Line 13 - Qualified Mortgage Insurance Premiums

	Description	Amount
1.	Qualified mortgage insurance premiums paid in 2013: Schedule A (Form 1098)	1,531
	Total qualified mortgage insurance premiums paid in 2013	$ 1,531
2.	Adjusted gross income	141,718
3.	Phase-out threshold ($100,000; $50,000 if MFS)	100,000
4.	AGI in excess of phase-out threshold (Line 2 minus Line 3) (Increased to the next multiple of $1,000; $500 if MFS)	42,000
5.	Phase-out percentage (enter result as decimal) (Line 4 divided by $10,000; $5,000 if MFS)	1.0000
6.	Phase-out amount (Line 1 multiplied by Line 5)	1,531
7.	Qualified mortgage insurance premiums deduction (Line 1 minus Line 6)	$ 0

Schedule A, Line 16 - Charitable Contributions by Cash or Check

Description	Amount
Miscellaneous	$ 1,500
Total	$ 1,500

Form 2441, Line 4 - Taxpayer's Earned Income

Description	Amount
Wages	$ 140,601
Total	$ 140,601

Amount Allocated to Tax Paid in the Following Year

Description	Amount
NY	
1. 2012 payment paid in 2013	$ 0
2. 2012 extension paid in 2013	0
3. 2012 additional payment paid in 2013	0
4. Total 2012 payments paid in 2013(sum of lines 1 through 3)	0
5. Total payments on the 2012 return	8,263
6. Total 2012 overpayment/refund	1,117
7. 2012 refund attributable to tax paid in 2013 (Line 4 divided by line 5 multiplied by line 6)	$ 0
8. State/local tax refund (line 6 minus line 7)	$ 1,117

Form **1040**		**Salaries & Wages Report**		**2013**

Name
Marcus J Molinaro

Taxpayer Identification Number

T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	Dutchess County	140,601	22,058	113,700
B				
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
Taxpayer Spouse Totals		140,601	22,058	113,700

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A	7,049	140,601	2,039				1,170
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer Spouse Totals	7,049	140,601	2,039				1,170

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A	NY	140,601	8,590			
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
Taxpayer Spouse Totals		140,601	8,590			

| Form **1040** | Two Year Comparison Report - Page 1 | | **2012 & 2013** |

Name
Marcus J Molinaro

Taxpayer Identification Number [redacted]

			2012	2013	Differences
	Filing Status		HH	HH	
	Dependents claimed		1	1	
	1. Salaries and wages	1.	135,234	140,601	5,367
	2. Interest income	2.			
	3. Tax exempt interest income	3.			
	4. Dividend income	4.			
	5. Qualified dividend income	5.			
	6. Taxable state/local refunds	6.		1,117	1,117
	7. Alimony received	7.			
I	8. Business income/loss	8.			
n	9. Capital gain/loss	9.			
c	10. Other gains/losses	10.			
o	11. Taxable IRA distributions	11.			
m	12. Taxable pensions	12.			
e	13. Rent and royalty income including farm rental	13.			
	14. Partnership/S corp income	14.			
	15. Estate or trust income	15.			
	16. Farm income/loss	16.			
	17. Unemployment compensation	17.			
	18. Taxable social security	18.			
	19. Other income	19.			
	20. **Total income**	20.	135,234	141,718	6,484
A	21. Moving expenses	21.			
d	22. Deductible part of self-employment tax	22.			
j	23. SEP/SIMPLE/Qualified plans deductions	23.			
u	24. SE health insurance	24.			
s	25. Forfeited interest	25.			
t	26. Alimony paid	26.			
m	27. IRA deductions	27.			
e	28. Student loan interest	28.			
n	29. Other adjustments	29.			
t s	30. Adjusted gross income	30.	135,234	141,718	6,484
D	31. Medical	31.			
	32. Taxes	32.	15,408	16,010	602
e	33. Interest	33.	12,148	16,982	4,834
d	34. Contributions	34.	1,600	1,500	-100
u	35. Casualty losses	35.			
c	36. Miscellaneous expenses	36.			
t	37. **Allowable itemized deductions**	37.	29,156	34,492	5,336
i	38. Standard deduction	38.	8,700	8,950	250
o			Itemized	Itemized	
n	39. Deduction taken	39.	29,156	34,492	5,336
s	40. Subtract line 39 from line 30	40.	106,078	107,226	1,148
	41. Exemptions	41.	7,600	7,800	200
	42. Taxable income	42.	98,478	99,426	948

| Form **1040** | Two Year Comparison Report - Page 2 | **2012 & 2013** |

Name
Marcus J Molinaro

Taxpayer Identification Number

			2012	2013	Differences
	43.	Taxable income from 2YR page 1, line 42	98,478	99,426	948
	44.	Tax on taxable income	19,264	19,359	95
	45.	Alternative minimum tax			
	46.	Child care credit	600	600	
	47.	Education credits			
	48.	Retirement savings credit			
T	49.	Child tax credit			
a	50.	General business credit			
x	51.	Other credits			
	52.	Total credits	600	600	
C	53.	Net tax liability	18,664	18,759	95
o	54.	Self-employment taxes			
m	55.	Other taxes			
p	56.	Total tax	18,664	18,759	95
u	57.	Income tax withheld	21,499	22,058	559
t	58.	Estimated tax payments			
a	59.	Earned income credit			
t	60.	Additional Child tax credit			
i	61.	Other refundable tax credits			
o	62.	Other payments			
n	63.	Total payments	21,499	22,058	559
	64.	Tax due/-refund	-2,835	-3,299	-464
	65.	Penalties and interest			
	66.	Net tax due/-refund	-2,835	-3,299	-464
	67.	Refund applied to estimated tax payments			
	68.	Refund received	-2,835	-3,299	-464
	69.	Marginal tax rate	25.0%	25.0%	
	70.	Effective tax rate	19%	19%	

| Form **1040** | Tax Return History Report - Page 1 | | **2013** |

| Name | Marcus J Molinaro | | Taxpayer Identification Number | |

				2012	2013	2014 Projected
Filing Status				HH	HH	HH
Salaries and wages				135,234	140,601	140,601
Interest income						
Dividend income						[1]
Business income/loss						
Capital gains/losses						
Other gains/losses						
IRA distributions, pensions, annuities						
Rent, royalty, farm rental income						
Partnership/S corp income						[2]
Estate or trust income						[2]
Farm income/loss						
Other income/loss					1,117	
Total income				135,234	141,718	140,601
Total adjustments						
Adjusted gross income				135,234	141,718	140,601
Allowable itemized deductions				29,156	34,492	34,492
Standard deduction				8,700	8,950	9,100
Itemized or standard deduction taken				29,156	34,492	34,492
Exemptions				7,600	7,800	7,900
Taxable income				98,478	99,426	98,209

1 Combined with Interest income on the Federal Tax Projection Worksheet   2 Combined with Rent, royalty, farm rental income on the Federal Tax Projection Worksheet as Schedule E income/loss

Total income

Adjusted gross income

Itemized or standard deduction taken
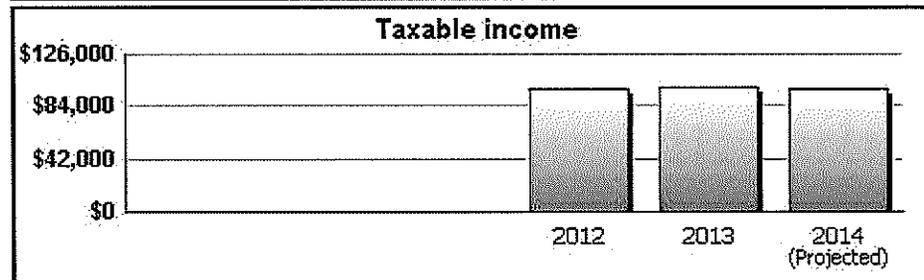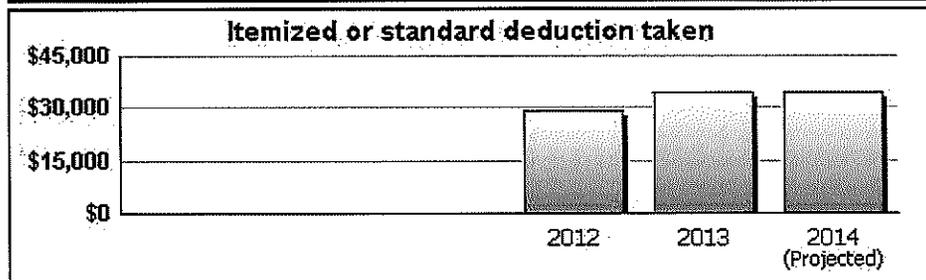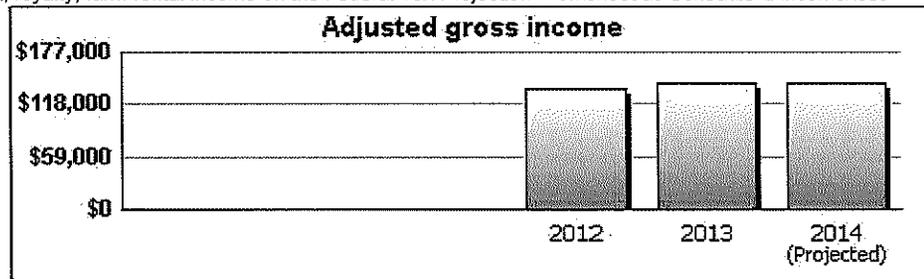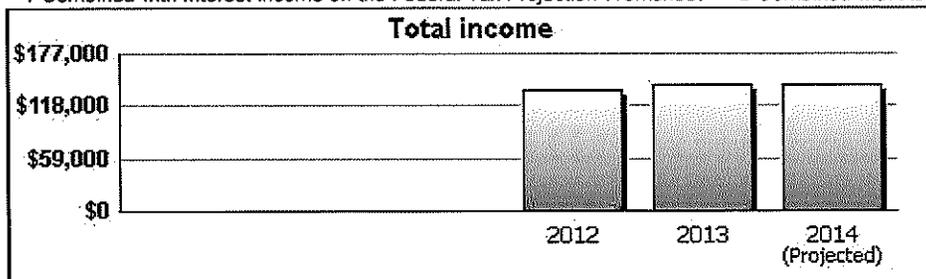
Taxable income

| Form **1040** | | Tax Return History Report - Page 2 | | **2013** |

| Name | Marcus J Molinaro | | Taxpayer Identification Number | |

				2012	2013	2014 Projected
Taxable income				98,478	99,426	98,209
Tax on taxable income				19,264	19,359	18,965
Alternative minimum tax						
Total credits				600	600	600
Net tax liability				18,664	18,759	18,365
Self-employment taxes						
Other taxes						
Total tax				18,664	18,759	18,365
Income tax withheld				21,499	22,058	22,058
Estimated tax payments						
Other payments						
Total payments				21,499	22,058	22,058
Total due/-refund				-2,835	-3,299	-3,693
Penalties and interest						
Net tax due/-refund				-2,835	-3,299	-3,693
Refund applied to estimated tax payments						
Refund received				-2,835	-3,299	
Marginal tax rate	%	%	%	25.0%	25.0%	25.0%
Effective tax rate	%	%	%	19%	19%	19%

Total credits

Total tax

Total payments

Marginal tax rate