

Jaroslav P and Emilia E Lausz

[REDACTED]

[REDACTED]

2023 New York State Nonresident Income Tax Return

Following documents are enclosed:

- Form IT-203 for 2024 (4 pages)
- Form 4852 for [REDACTED] p. (1 page)

USPS CERTIFIED MAIL – RETURN RECEIPT - #7021 0950 0000 2077 3951

Mailed on April 15, 2024 to the following address:

STATE PROCESSING CENTER

PO BOX 61000

ALBANY, NY 12261-0001

JK.

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Department of Taxation and Finance

Nonresident and Part-Year Resident Income Tax Return

New York State • New York City • Yonkers • MCTMT

For the year January 1, 2023, through December 31, 2023, or fiscal year beginning

IT-203

23

and ending

For help completing your return, see the instructions, Form IT-203-I.

Your first name and middle initial Jaroslaw P		Your last name (for a joint return, enter spouse's name on line below) Lausz		Your date of birth (mmddyyyy) [REDACTED]	Your Social Security number [REDACTED]
Spouse's first name and middle initial Emilia E		Spouse's last name Lausz		Spouse's date of birth (mmddyyyy) [REDACTED]	Spouse's Social Security number [REDACTED]
Mailing address (see instructions) (number and street or PO Box) [REDACTED]				Apartment number	New York State county of residence NR
City, village, or post office [REDACTED]		State PA	ZIP code [REDACTED]	Country	School district name NR
Taxpayer's permanent home address (see instructions) (no. and street or rural route) [REDACTED]				Apartment no.	City, village, or post office
				School district code number	[REDACTED]
State	ZIP code	Country		Decedent information	Taxpayer's date of death
					Spouse's date of death

- A Filing status** (mark an X in one box):
- ① Single
 - ② Married filing joint return (enter both spouses' Social Security numbers above)
 - ③ Married filing separate return (enter both spouses' Social Security numbers 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
- D1** Did you have a financial account located in a foreign country? Yes No

- D2** (1) Did you or your spouse maintain living quarters in Yonkers for any part of 2023? Yes No
If Yes:
- (2) Number of months you lived in Yonkers in 2023 ... [REDACTED]
- (3) Number of months your spouse lived in Yonkers in 2023 ... [REDACTED]
If No:
- (4) Did you or your spouse work in Yonkers while not living in Yonkers for any part of 2023 ... Yes No

- E New York City part-year residents only** (This includes the Bronx, Brooklyn, Manhattan, Queens, and Staten Island)
- (1) Number of months you lived in NY City in 2023 [REDACTED]
- (2) Number of months your spouse lived in NY City in 2023 [REDACTED]

F Enter your 2-character special condition code(s) if applicable [REDACTED] [REDACTED]

- G New York State part-year residents**
- Enter the date you moved into or out of NYS (mmddyyyy) [REDACTED]
- On the last day of the tax year (mark an X in one box):
- 1) Lived in NYS
 - 2) Lived outside NYS; received income from NYS sources during nonresident period
 - 3) Lived outside NYS; received no income from NYS sources during nonresident period

H Did you or your spouse maintain living quarters in NYS in 2023? Yes No
(If Yes, complete Form IT-203-B)

I Dependent information

First name and middle initial	Last name	Relationship	Social Security number	Date of birth (mmddyyyy)

If more than 6 dependents, mark an X in the box.



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For office use only

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Enter your Social Security number
XXXXXXXXXX

Federal income and adjustments

Federal amount
Whole dollars only

New York State amount
Whole dollars only

1	Wages, salaries, tips, etc.	1	0.00	1	0.00
2	Taxable interest income	2	0.00	2	0.00
3	Ordinary dividends	3	0.00	3	0.00
4	Taxable refunds, credits, or offsets of state and local income taxes (also enter on line 24)	4	0.00	4	0.00
5	Alimony received	5	0.00	5	0.00
6	Business income or loss (submit a copy of federal Sch. C, Form 1040)	6	0.00	6	0.00
7	Capital gain or loss (if required, submit a copy of federal Sch. D, Form 1040)	7	0.00	7	0.00
8	Other gains or losses (submit a copy of federal Form 4797)	8	0.00	8	0.00
9	Taxable amount of IRA distributions. Beneficiaries: mark X in box <input type="checkbox"/>	9	0.00	9	0.00
10	Taxable amount of pensions/annuities. Beneficiaries: mark X in box <input type="checkbox"/>	10	0.00	10	0.00
11	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (submit a copy of federal Schedule E, Form 1040)	11	.00	11	0.00
12	Rental real estate included in line 11 (federal amount) 12. <input type="text" value="0.00"/>		0.00		
13	Farm income or loss (submit a copy of federal Sch. F, Form 1040)	13	0.00	13	0.00
14	Unemployment compensation.....	14	1512.00	14	1512.00
15	Taxable amount of Social Security benefits (also enter on line 26)	15	0.00	15	0.00
16	Other income Identify:	16	0.00	16	0.00
17	Add lines 1 through 11 and 13 through 16	17	1512.00	17	1512.00
18	Total federal adjustments to income Identify:	18	0.00	18	0.00
19	Federal adjusted gross income (subtract line 18 from line 17) ..	19	1512.00	19	1512.00

New York additions

20	Interest income on state and local bonds and obligations (but not those of New York State or its localities)	20	0.00	20	0.00
21	Public employee 414(h) retirement contributions	21	0.00	21	0.00
22	Other (Form IT-225, line 9)	22	0.00	22	0.00
23	Add lines 19 through 22	23	1512.00	23	1512.00

New York subtractions

24	Taxable refunds, credits, or offsets of state and local income taxes (from line 4)	24	0.00	24	0.00
25	Pensions of NYS and local governments and the federal government	25	0.00	25	0.00
26	Taxable amount of Social Security benefits (from line 15)	26	0.00	26	0.00
27	Interest income on U.S. government bonds	27	0.00	27	0.00
28	Pension and annuity income exclusion	28	0.00	28	0.00
29	Other (Form IT-225, line 18)	29	0.00	29	0.00
30	Add lines 24 through 29	30	0.00	30	0.00
31	New York adjusted gross income (subtract line 30 from line 23) ..	31	1512.00	31	1512.00

32 Enter the amount from line 31, **Federal amount** column **32** 1512.00



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Name(s) as shown on page 1
Jaroslaw P and Emilia E Lausz

Enter your Social Security number

Standard deduction or itemized deduction

33 Enter your **standard deduction** or your **itemized deduction** (from Form IT-196).

Mark an X in the appropriate box: ... **Standard** - or - **Itemized**

33	16050.00
34	.00
35	000.00
36	0.00

Tax computation, credits, and other taxes

37	0.00
38	0.00
39	0.00
40	0.00
41	0.00
42	0.00
43	0.00

44 Base tax (subtract line 43 from line 42; if line 43 is more than line 42, leave blank) 44 0.00

45 Income percentage New York State amount from line 31 .00 ÷ Federal amount from line 31 .00 = 45 Round result to 4 decimal places

46	0.00
47	0.00
48	0.00
49	0.00
50	0.00

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

51	.00
52	.00
52a	.00
52b	.00
52c	.00
52d	.00
52e	.00
52f	.00
53	.00
54	.00

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

See instructions to compute the MCTMT for each zone.

55	0.00
56	0.00
57	0.00
58	0.00

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Enter your Social Security number

59 Enter amount from line 58 **59** 0.00

Payments and refundable credits

60 Part-year NYC school tax credit (fixed amount) (also complete E on front)	60	0.00
60a NYC school tax credit (rate reduction amount)	60a	0.00
61 Other refundable credits (Form IT-203-ATT, line 17)	61	0.00
62 Total New York State tax withheld	62	5077.00
63 Total New York City tax withheld	63	0.00
64 Total Yonkers tax withheld	64	0.00
65 Total estimated tax payments/amount paid with Form IT-370	65	0.00
66 Total payments and refundable credits (add lines 60 through 65)	66	5077.00

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

67 Amount overpaid (if line 66 is more than line 59, subtract line 59 from line 66)	67	5077.00
68 Amount of line 67 available for refund (subtract line 69 from line 67)	68	5077.00
TIP: Use this amount to check your refund status online.		
68a Amount of line 68 that you want to deposit into a NYS 529 account (Form IT-195, line 4) (also submit Form IT-195)	68a	0.00
68b Total refund after NYS 529 account deposit (subtract line 68a from line 68)	68b	5077.00

Mark one refund choice: direct deposit to checking or savings account (fill in line 73) - or - paper check

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

69 Amount of line 67 that you want applied to your 2024 estimated tax (see instructions)	69	.00
70 Amount you owe (if line 66 is less than line 59, subtract line 66 from line 59). To pay by electronic funds withdrawal, mark an X in the box <input type="checkbox"/> and fill in lines 73 and 74. If you pay by check or money order you must complete Form IT-201-V and mail it with your return.....	70	.00
71 Estimated tax penalty (include this amount on line 70, or reduce the overpayment on line 67)	71	.00
72 Other penalties and interest	72	.00

See instructions for the proper assembly of your return.

73 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

73a Account type: Personal checking - or - Personal savings - or - Business checking - or - Business savings

73b Routing number 73c Account number

74 Electronic funds withdrawal Date Amount .00

Third-party designee? (see instr.) Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Print designee's name	Designee's phone number ()	Personal identification number (PIN)
Email:			

▼ Paid preparer must complete ▼ (see instructions)		Preparer's NYTPRN	NYTPRN excl. code
Preparer's signature		Preparer's printed name	
Firm's name (or yours, if self-employed)		Preparer's PTIN or SSN	
Address		Employer identification number	
Email:		Date	

▼ Taxpayer(s) must sign here ▼	
Your signature <i>J. Lause</i>	
Your occupation Carpenter	
Spouse's signature and occupation (if joint return) <i>[Signature]</i> Assistant Controller	
Date <i>04.15.2024</i>	Daytime phone number ()
Email:	

See instructions for where to mail your return.



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Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040, 1040-SR, or 1040-X.

Attachment
Sequence No. 04

▶ Go to www.irs.gov/Form4852 for the latest information.

You must take the following steps before filing Form 4852

- Attempt to get your Form W-2, Form W-2c, or Form 1099-R (original or corrected) from your employer or payer before contacting the IRS or filing Form 4852.
- If you don't receive the missing or corrected form from your employer or payer by the end of February, you may call the IRS at 800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment. You must also provide your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS will also send you a Form 4852. If you don't receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you to file with your return.

1 Name(s) shown on return Jaroslaw P Lausz	2 Your social security number [REDACTED]
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3 Address
[REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2022
I have been unable to obtain (or have received an incorrect) Form W-2 **OR** Form 1099-R.
I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code [REDACTED]	6 Employer's or payer's TIN (if known) [REDACTED]
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7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation <u>0</u>	f State income tax withheld <u>5076.61</u>
b Social security wages <u>0</u>	(Name of state) . <u>New York</u>
c Medicare wages and tips <u>0</u>	g Local income tax withheld _____
d Social security tips _____	(Name of locality) _____
e Federal income tax withheld <u>9211.59</u>	h Social security tax withheld <u>5990.82</u>
	i Medicare tax withheld <u>1401.08</u>

8 Form 1099-R. Enter distributions from pensions, annuities, retirement or profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution _____	f Federal income tax withheld _____
b Taxable amount _____	g State income tax withheld _____
c Taxable amount not determined <input type="checkbox"/>	(Name of state) . _____
d Total distribution <input type="checkbox"/>	h Local income tax withheld _____
e Capital gain (included on line 8b) _____	(Name of locality) _____
	i Employee contributions _____
	j Distribution codes _____

9 How did you determine the amounts on lines 7 and 8 above? The amounts provided by the Payer under "Wages" are incorrect. The amounts listed do not qualify as "Wages" as defined in IRC Sections 3401 (a) and 3121 (a).

10 Explain your efforts to obtain Form W-2, Form 1099-R (original or corrected), or Form W-2c, Corrected Wage and Tax Statement. None.

General Instructions

Section references are to the Internal Revenue Code.
Future developments. For the latest information about developments related to Form 4852, such as legislation enacted after it was published, go to www.irs.gov/Form4852.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R (original or corrected) and is completed by you or your representatives when (a) your employer or payer doesn't issue you a Form W-2 or Form 1099-R, or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return before any supporting forms or schedules.

You should always attempt to get your Form W-2, Form W-2c, or Form 1099-R (original or corrected) from your employer or payer before contacting the IRS or filing Form 4852. If you don't receive the missing or corrected form from your employer or payer by the end of February, you may call the IRS at 800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment. You must also provide your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS will also send you a Form 4852. If you don't receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

J.K.