



PRINT OR TYPE ▼

Enter 2-character special condition code if applicable. (See instructions):

First names and initials of employee and spouse:		Last name:		Name Change <input type="checkbox"/>		<input type="checkbox"/> AMENDED RETURN	
Home address (number and street):		Apt. no.:		Address Change <input type="checkbox"/>		TAXPAYER'S EMAIL ADDRESS	
City and State:		Zip Code:		Country (if not US)		EMPLOYEE'S SOCIAL SECURITY NUMBER	
NYC Department or Agency where employed:		Employee ▼		Spouse ▼		SPOUSE'S SOCIAL SECURITY NUMBER	
Daytime telephone number:		<input type="text"/> - <input type="text"/> - <input type="text"/>					

1 - FILING STATUS

A. <input type="checkbox"/> MARRIED FILING JOINTLY OR SURVIVING SPOUSE		Note: If you file a joint Federal tax return but elect to exclude a spouse's income, see the special computation Schedule A on the back of this form and use Filing Status C.	B. <input type="checkbox"/> HEAD OF HOUSEHOLD		C. <input type="checkbox"/> SINGLE OR MARRIED FILING SEPARATELY	
A. NUMBER OF MONTHS EMPLOYED IN 2021 EMPLOYEE: _____ SPOUSE: _____			B. DATE RETIRED FROM NYC SERVICE EMPLOYEE: _____ - _____ - _____ SPOUSE: _____ - _____ - _____		C. <input type="checkbox"/> CHECK BOX IF YOU AND YOUR SPOUSE ARE BOTH SUBJECT TO SECTION 1127.	

A. Payment	Amount being paid electronically with this return	A.	Payment Amount
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2 - 1127 LIABILITY CALCULATION

All the information you will need to complete this 1127 form comes directly from your NYS Income Tax Return. For your convenience, we have listed where on your State tax return you can find this information depending on whether you filed a NYS Resident Income Tax Return (NYS IT-201) or a NYS Non-Resident and Part-Year Resident Income Tax Return (NYS IT-203).

Line	Where do I get the amount?	Amount
1	NYS Taxable Income. See instructions. ♦ NYS IT-201, line 37 ♦ NYS IT-203, line 36	Note: If you file a joint Federal tax return but elect to exclude a spouse's income, see the special computation Schedule A on the back of this form and use Filing Status C.
2	Section 1127 liability plus Other New York City Taxes, if any. See instructions. ♦ Page 2 liability rate schedules ♦ NYS IT-201, line 51	
3	New York City School tax and other credits ♦ See Page 2, Schedule B and Instructions	
4	New York City 1127 amount withheld ♦ Form 1127.2	
5	Balance Due ♦ If line 2 is greater than the sum of lines 3 and 4, enter balance due	
6	Refund ♦ If line 2 is less than the sum of lines 3 and 4, enter refund amount (not to exceed the amount on line 4). (See instr.)	

3 - CERTIFICATION

I hereby certify that this return, including any accompanying rider, is, to the best of my knowledge and belief, true, correct and complete.

I authorize the Department of Finance to discuss this return with the preparer listed below. (see instructions)YES

SIGN HERE: _____ DATE _____

SIGNATURE OF PREPARER OTHER THAN TAXPAYER	EIN OR SSN OR PTIN	DATE	PREPARER'S EMAIL ADDRESS
PREPARER'S PRINTED NAME	ADDRESS	CITY	STATE ZIP CODE

ATTACH A COMPLETE COPY OF YOUR NEW YORK STATE INCOME TAX RETURN INCLUDING ALL SCHEDULES • PAYMENT MUST BE MADE IN U.S. DOLLARS, DRAWN ON A U.S. BANK.

ALL RETURNS EXCEPT REFUND RETURNS
NYC DEPARTMENT OF FINANCE
SECTION 1127
P.O. BOX 5564
BINGHAMTON, NY 13902-5564

REMITTANCES
PAY ONLINE WITH FORM NYC-200V AT NYC.GOV/ESERVICES
OR
Mail Payment and Form NYC-200V ONLY to:
NYC DEPARTMENT OF FINANCE
P.O. BOX 3933
NEW YORK, NY 10008-3933

RETURNS CLAIMING REFUNDS
NYC DEPARTMENT OF FINANCE
SECTION 1127
P.O. BOX 5563
BINGHAMTON, NY 13902-5563

SCHEDULE A Schedule for Married Filing Jointly for State Purposes and Separately for 1127 Purposes (Spouse is not a NYC mayoral agency employee)

Line		Amount
1	NYS Adjusted Gross Income	♦ NYS IT-201, line 33; NYS IT-203, line 32.
2	Non NYC Employee Income	♦ Enter all income, additions and subtractions attributable to the non NYC employee
3	Net NYS Gross Income	♦ Line 1 less Line 2
4	Compute limitation percentage	Line 3: \$ = % Line 1: \$ Part-year employees must prorate standard deduction and dependent exemption amounts based on number of months employed by NYC.
5	Check only one box:	<input type="checkbox"/> Standard Deduction: \$8,000. OR <input type="checkbox"/> Itemized deduction: \$ X % = (See instructions) amount from IT 201, line 34 amount from IT 203, line 33
6	New York Dependent Exemption from NYS return. No exemption is allowed for employee or spouse. (If married filing separately for Section 1127 purposes, apply the limitation percentage from line 4).	♦ NYS IT-201, line 36; NYS IT-203, line 35.
7	Total Deductions and Exemptions	♦ Line 5 + line 6
8	Allocated New York State Taxable Income	♦ Line 3 less line 7. Enter on Page 1, line 1.

SCHEDULE B Nonrefundable credits

Line	Where do I get the amount?	Amount
A1.	NYC School Tax Credit (fixed amount)	♦ See Instructions. *See below.
A2.	NYC School Tax Credit (rate reduction amount)	♦ See Instructions
B.	UBT Paid Credit	♦ See Instructions
C.	NYC household credit	♦ from IT-201 Instructions NYC table 4, 5 or 6
D.	NYC Claim of Right Credit	♦ from Form IT-201-ATT, line 16 or IT-203-ATT, line 15 (attach Form IT-257)
E.	NYC Earned Income Credit	♦ (attach IT-215)
F.	Other NYC taxes	♦ See Instructions
G.	NYC Child and Dependent Care Credit	♦ See Instructions (attach IT-216)
H.	Total of lines A1 - G	♦ enter on page 1, line 3

*Enter income used to calculate eligibility for credit on Line A1: _____

NEW YORK CITY 1127 LIABILITY RATES	Table A - Married filing jointly or surviving spouse					
	If Form NYC-1127, line 1 is:					
	OVER	BUT NOT OVER	THE LIABILITY IS:			
	\$ 0	\$ 21,600	\$ 665	plus	3.078%	of Form 1127, line 1
	\$ 21,600	\$ 45,000	\$ 1,545	plus	3.762%	of the excess over \$ 21,600
	\$ 45,000	\$ 90,000	\$ 3,264	plus	3.819%	of the excess over \$ 45,000
	\$ 90,000			plus	3.876%	of the excess over \$ 90,000
	Table B - Head of household					
	If Form NYC-1127, line 1 is:					
	OVER	BUT NOT OVER	THE LIABILITY IS:			
\$ 0	\$ 14,400	\$ 443	plus	3.078%	of Form 1127, line 1	
\$ 14,400	\$ 30,000	\$ 1,030	plus	3.762%	of the excess over \$ 14,400	
\$ 30,000	\$ 60,000	\$ 2,176	plus	3.819%	of the excess over \$ 30,000	
\$ 60,000			plus	3.876%	of the excess over \$ 60,000	
Table C - Single or married filing separately						
If Form NYC-1127, line 1 is:						
OVER	BUT NOT OVER	THE LIABILITY IS:				
\$ 0	\$ 12,000	\$ 369	plus	3.078%	of Form 1127, line 1	
\$ 12,000	\$ 25,000	\$ 858	plus	3.762%	of the excess over \$ 12,000	
\$ 25,000	\$ 50,000	\$ 1,813	plus	3.819%	of the excess over \$ 25,000	
\$ 50,000			plus	3.876%	of the excess over \$ 50,000	

