

Reconciliation of Estimated Income Tax Account

Name as shown on Form IT-201, Form IT-203, or Form IT-205				Identification number (SSN or EIN)				
Mailing address (number and street or rural route)			5	Spouse's social security number				
City, village or post office	State ZIP code Your fax number for reply							
1 Enter the amount in your estimated tax account a			t, Fo		1			
	Date	Deposit serial number		Amount	-			
2 Credit from previous year			2		_			
3 Payment		S	3					
4 Payment		S	4					
5 Payment		S	5					
6 Payment		S	6					
7 Add lines 2 through 6 enter here and see instructions								

IT-2105.1 (2000) (back)

Instructions

New for 2000 — You can now check your balance and reconcile your estimated tax account by accessing our Web site at *www.tax.state.ny.us* and clicking on the Online Services tab

Use this form **only** if your records disagree with the amount on Form IT-2105-S, Statement of Estimated Income Tax Account, that you received with your estimated tax packet, Form IT-2105. You may fax or mail your completed form to the Account Reconciliation Unit as follows.

Fax to: (518) 457-2249 or mail to: NYS Tax Department, Estimated Tax Unit, Building 8, Room 539, W A Harriman Campus, Albany, NY 12227.

Be sure to include the deposit serial numbers of each payment to allow for proper crediting. Be advised that your account will include all payments made before the date indicated on your Form IT-2105-S, Statement of Estimated Income Tax Account.

Enter the name and social security number(s) as they will appear on your 2000 Form IT-201. Resident Income Tax Return, or Form IT-203. Nonresident and Part-Year Resident Income Tax Return. Provide both social security numbers if you are married filing jointly or married filing separately.

If you are filing Form IT-205, Fiduciary Income Tax Return, enter the name and employer identification number of the estate or trust as it will appear on the 2000 return.

Line instructions

Line 2 — Enter the amount of your previous income tax overpayment that was credited to your current estimated tax account, as finally determined. If there was an adjustment to your previous tax return, the amount requested may differ from the amount actually credited. You should have received a notice of adjusted credit to advise you of the proper amount.

Lines 3 through 6 — Enter the date, deposit serial number and amount of each payment you made. The **deposit serial number** is a 7-digit number preceded by the letter *S*, and it appears on the face of your canceled check or money order. If you paid by money order, contact the issuing agent for this information.

Line 7 — If line 7 is the **same** as line 1, your records agree with ours; claim the line 1 amount as estimated tax paid on Form IT-201, line 64, Form IT-203, line 60, or Form IT-205, line 29. If line 7 is **different** from line 1, fax or mail this completed form **immediately** as instructed above. We will review our records and reply to you in time for you to file your return, provided we receive your Form IT-2105.1 by April 1.

Privacy notification

The right of the Commissioner of Taxation and Finance and the Department of Taxation and Finance to collect and maintain personal information, including mandatory disclosure of social security numbers in the manner required by tax regulations, instructions, and forms, is found in Articles 22, 26, 26-A, 26-B, 30, 30-A, and 30-B of the Tax Law; Article 2-E of the General City Law; and 42 USC 405(c)(2)(C)(i).

The Tax Department uses this information primarily to determine and administer tax liabilities due the state and city of New York and the city of Yonkers. We also use this information for certain tax offset and exchange of tax information programs authorized by law, and for any other purpose authorized

Information concerning quarterly wages paid to employees and identified by unique random identifying code numbers to preserve the privacy of the employees' names and social security numbers is provided to certain state agencies, for research purposes to evaluate the effectiveness of certain employment and training programs.

Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.

This information is maintained by the Director of the Registration and Data Services Bureau, NYS Tax Department, Building 8 Room 338, W A Harriman Campus, Albany NY 12227; telephone 1 800 225-5829. From areas outside the U.S. and outside Canada, call (518) 485-6800.