| For office use only     |   |                      | Claim for Real Property Tax Credit for Homeowners and Rente   |  |   |  |                 |                |  |                   | 2001                      | IT.                    | _              | 214    |
|-------------------------|---|----------------------|---|--|---|--|-----------------|----------------|--|-------------------|---------------------------|------------------------|----------------|--------|
|                         |   | print or type        |   | ant: You must er<br>st name and middle |   | al security number(s)<br>Your last name (for a joi   |                 |                |  | <b>▼</b> \        | our social secu           |                        |                | . 14   |
|                         |   | or print o           | Spouse  | e's first name and mi                  | iddle initial   | Spouse's last name   |                 |                |  | ▼ 5               | Spouse's social           | security number        |                |        |
|                         |   | Attach label, c      | Mailing   | address (number an                     | d street or rural ro                                    | Dute)  |                 | Apartment      | number   | NY S              | tate county               | of residence           |                |        |
|                         |   | Attach               | City, villa   | age or post office                     |   | State  |                 | ZIP code       |  | Qualif<br>differe | ying social sent from abo | security number<br>ve  | if             |        |
|                         |   |                      | Addres  | s of New York res                      | sidence that <b>q</b>                                   | ualifies you for this o  | redit, if diffe | erent from al  | oove   |                   |                           |                        |                |        |
|                         |   |                      | City, vi  | llage or post offi                     | се  | State  |                 | ZIP code       |  |                   |                           |                        |                |        |
| 1                       | 」   | w York               | State re  | esident for all of                     | 2001?   | NY   |                 |                |  | _<br>▶            | . 1                       | Yes                    |                | No 🔙   |
| 2                       | Did you occupy  | y the sa             | ıme resi  | dence for at leas                      | st six months   | during 2001?   |                 |                |  |                   | . 2                       | Yes                    |                | No     |
| 3                       | Did you own re  | eal prop             | erty with   | n a current mark                       | et value of m   | nore than \$85,000 d   | uring 2001      | ?              |  |                   | 3                         | Yes                    |                | No     |
| 4                       | Can vou be cla  | aimed a              | s a dep   | endent on anoth                        | er taxpaver's   | s 2001 federal returr  | 1?              |                |  |                   | 4                         | Yes                    |                | No 🗔   |
|                         |   |                      |   |  |   | 3 or 4, stop; yo   |                 |                |  |                   |                           | .00                    |                |        |
| 5                       | -   | -                    |   | =                                      |   | ce completely exempted in the completely exempted in the completely tax credit claim in the completely exempted in the completely |                 |                |  |                   | . 5                       | Yes                    |                | No 🗔   |
|                         | (II you checker   | u ies, y             | ou must i   | анаст ап ехрапан                       | ion to your real  | i property tax credit ciai   | iii, 366 iii3ii | uctions)       |  |                   |                           |                        |                |        |
|                         |   |                      | -   | -                                      |   | are filing Form IT-2   |                 |                |  |                   | 6                         |                        |                |        |
| 7                       | -   |                      |   |  |   | r your spouse, if this<br>security number in the   |                 |                |  |                   | 7                         | Yes                    |                | No 🔙   |
| 8                       | Did you own or  | r pay re             | nt for yo   | our residence du                       | ring 2001?  |  |                 |                |  |                   | 8                         | Own                    | R <sup>,</sup> | ent    |
| Com                     | plete Sched   | lule A               | or B,   | and Schedu                             | le C, on tl   | he back before   | continu         | ing.           |  |                   |                           |                        |                | $\Box$ |
| 9                       | Did you enter a   | an amo               | unt for t   | ne exemption or                        | n line 21 of tr   | nis claim?   |                 |                |  |                   | 9                         | Yes                    | _              | No [   |
|                         |   |                      |   |  |   | amount from line 26  | 3               |                |  |                   | 10                        |                        | _].            |        |
|                         |   | -                    | oss income from line 35 (If more than \$18,000, <b>stop;</b> ify. If "0" or less, leave lines 12 and 13 blank.) |  |   |  |                 |                | 0 0  |                   | Be sure                   | to                     |                |        |
|                         | you do not  | quamy                | . 11 0 0  | i iess, ieave iirie                    | 3 12 and 13   | Diatrik.)  | · <u> </u>      |                |  |                   | 」<br>]                    | sign and               |                |        |
| 12                      | Enter from the table below the rate that applies to your household gross income |                      |   |  |   |  |                 |                | this form. For direct deposit information, see |                   |                           |                        |                |        |
|                         | \$.01 to \$3,000 .035   |                      |   | Your rate is:                          | <b>If the amount on line 11 is:</b> \$9,001 to \$11,000 |  | Your r          |                |  |                   | =                         | s 36a throu            |                |        |
|                         | \$3,001 t<br>\$5,001 t  | to \$5,0<br>to \$7,0 | 00  | .040<br>.045                           | \$11  | ,001 to \$11,000<br>,001 to \$14,000<br>,001 to \$18,000   | .00             | 55<br>60<br>65 |  |                   | iiie                      | the bac                | _              | oc on  |
| 13                      | \$7,001 t<br>Multiply line 11   |                      |   | .050                                   |   |  |                 |                |  |                   | 13                        |                        |                |        |
| 14                      | Subtract line 13  | 3 from I             | ine 10. (   | (If line 13 is more t                  | han line 10, <b>st</b> e                                | op; no credit is allowed   | f.)             |                |  |                   | 14                        |                        | ٦.             |        |
| 15                      | If you entered  | an amo               | unt on I  | ine 21, enter 25°                      | % of line 14;   | or, if no entry was r  | made on li      | ne 21,         |  |                   |                           |                        | $\frac{1}{2}$  |        |
|                         | enter 50% of  | f line 14            | l   |  | •••••   |  |                 |                |  | ····· <b>&gt;</b> | 15                        |                        |                |        |
| 16                      | Credit limitation   | n (see in            | struction   | s; enter amount fro                    | om table)   |  |                 |                |  |                   | 16                        |                        |                |        |
| 17                      |   |                      |   |  |   | nis is the credit for yo   |                 |                |  |                   |                           | -                      | $\overline{1}$ |        |
| • Tran                  |   |                      |   |  |   | <ol><li>see instructions.)</li><li>line 37, or to Form</li></ol>   |                 |                |  |                   | 17<br>to your re          | eturn.                 | _]•            |        |
| <ul><li>If yo</li></ul> | u are not filing  | g a Nev              | York S  | State income ta                        | x return, ma  | il this form to: STA   | TE PROCE        | SSING CENT     | ER, PO BO                                      | OX 6100           | 00, ALBAN                 | Y NY 12261- <u>000</u> |                | —      |
| 18                      |   |                      |   | nt to discuss this                     |   | the paid preparer lis  | ted below.      | (Mark the Yes  |  |                   | uctions)                  | ∎Yes ∟                 | <u>」</u>       | No L   |
|                         | Prepare   | ı s sıgna            | ıure  |  | ▼ Preparer's  | SSN or PTIN  |                 |                | Your signa                                     | ature             |                           |                        |                |        |
|                         | arer's<br>only  | ame (or              | yours, if se  | elf-employed)                          | • Employer  | identification numbe   | <u>-</u>        | Sign           | Spouse's                                       | signatu           | re (if joint cla          | im)                    |                |        |
| Addres                  | SS  |                      |   |  | Date  | Mark "X" if  |                 | here           | Date   |                   | Daytime p                 | ohone number (         | optio          | nal)   |
|                         |   |                      |   |  |   | self-employ  | ea 🔲 📗          |                |  |                   | 1( )                      |                        |                |        |

IT-214 (2001) (back) Schedule A - To be completed by homeowners. Enter the amounts you and all qualified members of your household paid during 2001. Real property taxes (including school district taxes) 20 Special assessments ..... 21 The amount of taxes not paid due to the exemption for persons 65 or older under section 467 of the Schedule B - To be completed by renters. Enter the amount of rent constituting real property taxes paid during 2001. If your residence was 100% exempt from real property taxes, stop; you do not qualify for this credit. Enter the total rent you and all members of your household paid during 2001 ...... If line 23 includes charges for: heat, gas, and electricity 20% of line 23 none of the above 25 Adjusted rent (Subtract line 24 from line 23. If monthly average is over \$450, stop; you do not qualify for this credit.) 26 Enter 25% of line 25 here and on line 10. (If over \$1,350, stop; you do not qualify for this credit.) Schedule C - To be completed by homeowners and renters. Enter the household gross income of all household members. List below the name, social security number, and the year of birth of everyone, including yourself, who lived in your household in 2001. (Attach additional sheets if necessary.) Enter the total number of household members in the boxes ... Year of birth Your name Social security number Spouse's name (if married) Household member's name Household member's name Household member's name Enter the total of all amounts, even if not taxable, that you, your spouse (if married), and the above household members received during 2001. 28 Federal adjusted gross income (from Form 1040A, line 19; Form 1040EZ, line 4; or Form 1040, line 33) If you do not have to file a federal return, see Household gross income on the front page of the instructions for this form Social security payments not included on line 28 30 Pensions and annuities not included on lines 28 through 31 ..... 32 Cash public assistance and relief..... 33 33 34 Other income ...... Household gross income (add lines 28 through 34). Enter this amount here, and on line 11,

sent directly to your bank account, complete a, b, and c below (see instructions).

a Routing number

b Type: 
Checking

c Account number

Direct deposit: If you are not attaching this claim to your income tax return, and want your credit (from line 17)