Income Worksheet for 9999 STAR Benefit

(1/21)

Contact name		Telephone nu	mber		Email address				
Location of property									
Street address									
City or town				ZIP cod	e	Property key			
						XXXXXXX			
9999 income information									
Eligibility for a 9999 STAR exemption or					•	00	1 .1		
All owners – and any owner's spouse wh or would have been, reported on your inc							below that	were,	
Do not provide copies of tax returns unle						,			
Attach additional sheets if necessary.									
	Person 1		Person 2		Pe	son 3 Person		son 4	
Name (print)									
Social Security number									
Date of birth									
Owner	☐ Yes	☐ No	Yes	☐ No	☐ Yes	s □ No	☐ Yes	☐ No	
Non-Owner spouse	☐ Yes	☐ No	Yes	☐ No	☐ Yes	s □ No	☐ Yes	☐ No	
Is the property your primary residence?	☐ Yes	☐ No	☐ Yes	☐ No	☐ Yes	s □ No	☐ Yes	☐ No	
1 9999 wages, salary, and tips									
2 9999 taxable interest income and dividends									
3 9999 unemployment compensation									
4 9999 annual pensions and annuities (excluding IRA distributions)									
5 9999 annual Social Security benefits (including Medicare premiums)									
6 9999 taxable IRA distributions									
7 9999 other income									
Certification I (we) certify that all of the above information	on is correct u	nder pena	Ity of law. E	ach owne	er and resid	lent spouse	must sign	and date.	
Signature:									
Date:									
For Office Use Only: RP-5310-WS									

518-435-8634 Fax:

Mail: NYS TAX DEPARTMENT

ORPTS STAR RESOLUTION UNIT-WS

W A HARRIMAN CAMPUS **ALBANY NY 12227-0801**

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