

Department of Taxation and Finance Claim for Real Property Tax Credit For Homeowners and Renters

IT-214

Step 1 – Enter identifying information

Your first name	MI	Your last name (for a	a ioint claim	enter spouse's name	e on line below)	You	ur date of birth (mmddyyyy)	Your soc	ial security number	_	
	1	(****	- ,								
Spouse's first name	MI	Spouse's last name	Spouse's last name				ouse's date of birth (mmddyyyy)	Spouse's social security number			
Current mailing address (number	Current mailing address (number and street or PO box) Apartment number						Apartment number	New York State county of residence			
City, village, or post office			State	ZIP code	Country (if n	ot Un	nited States)				
Street address of New York res	idence	e that qualifies you t	for this cred	it, if different from	above		Apartment number		ust enter date(s) of birt		
								above	,	'	
City, village, or rural route			Stat		ZIP code			_			
			N'	Y							
Step 2 - Determine elig	ibilit	y (For lines 1 thro	ough 6, ma	ark an X in the a	ppropriate bo	ox.)					
4 Mara vari a Navi Vari	. 04-	to resident for a	II of 2040	20					□ Vaa □ Na □		
1 Were you a New York	(Sta	te resident for a	11 01 20 10	٠٢				1	Yes No		
2 Did you occupy the same residence for at least six months during 2016?											
					_				. 103 . 140		
-	If you marked an <i>X</i> in the <i>No</i> box on line 1 or 2, stop ; you do not qualify for this credit. 3 Did you own real property with a current market value of more than \$85,000 during 2016?										
,					, , , , , , , , ,		3				
4 Can you be claimed as a dependent on another taxpayer's 2016 federal return?											
5 Did you reside in public	5 Did you reside in public housing, or other residence completely exempted from real property taxes in 2016? (see instr.) 5 Yes No										
If you marked an X in	If you marked an X in the Yes box on line 3, 4, or 5, stop ; you do not qualify for this credit.										
6 Did you live in a nursing home during 2016? (If you mark an X in the Yes box, see instructions.)							6	Yes No			
7 Complete below for the	he qu	ualifying househ	old mem	ber 65 or olde	r (see instruc	tion	s).				
A – First name	Last name B – Social security nur			mber C – Date of birth							
									(mmddyyyy)		
					_						
8 Complete below for a	III ho	usehold membe	ers not ind	cluded on line	7 (submit ad	ditio	nal sheets if needed; s	ee instrud			
A – First name			Last name			B - Social security num		C – Date of birth (mmddyyyy)			
					<u> </u>						

Step 3 – Determine household gross income
Enter the total of all amounts, even if not taxable, that you, your spouse (if married), and all other household members received during 2016.

9			ed gross income hold members do not have to file a federal return, see instructions		
			.00		
10	New York S	State	10	.00	
11	Social secu	11	.00		
12	Supplemen	12	.00		
13	Pensions a	13	.00		
14	Cash publi	14	.00		
15	Other inco	15	.00		
16	16 Household gross income (add lines 9 through 15; see instructions)				.00
		-	nore than \$18,000, stop; you do not qualify for this credit.		
17	Enter rate	from	Table 1 (see instructions)	17	
18	18 Multiply line 16 by line 17				.00
Sto.	n 4 Comp		real property tax		
	-				
	Renters only	19	Enter the total amount of rent you and all members of your household paid during 2016. (Do not include any subsidized part of your rental charge.)	19	.00
		20	Adjusted rent – If line 19 includes charges for: heat, gas, electricity, furnishings, and board		
			none of the above	20	.00
		21	3 , , , , , -	21	.00
		22	If line 21 is more than \$450, stop ; you do not qualify for this credit. Multiply line 20 by 25% (.25); enter here and on line 28	22	.00
Но	meowners	23	Real property taxes paid during 2016 (see instructions)	23	.00
	only		Special assessments		
		24	·		.00
		25	Add lines 23 and 24	25	.00
		26	Exemption for homeowners 65 and over (optional - see instructions)	26	.00
		27	Add lines 25 and 26: enter here and on line 28	27	.00

Step 5 - Compute credit amount				
28 Renters: Enter amount from line 22. Home If line 28 is zero or less, stop; no credit is	e 27 (see instructions)	28	.00.	
29 Enter amount from line 18			29	.00
If line 29 is equal to or more than line 28, 30 Subtract line 29 from line 28			20	
				.00
31 Multiply line 30 by 50% (.5) (However, if you a			.00	
32 Credit limit (see instructions; enter amount from	,		32	.00
33 Enter the amount from line 32 or 31, which (If more than one member of your household is	•	33	.00	
 If you are filing this claim with your New Enter the line 33 amount on Form IT-20 		n:		
If you are not filing this claim with a Ne	w York State income tax retur	n (see instructions):		
Mark one refund choice: direct de	eposit (fill in line 34) - or -	paper check		
_				
Step 6 – Enter account information for direc	t deposit (see instructions)			
If the funds for your refund would go to an acco	unt outside the U.S. mark an X	in this how (see instructions)		
34 Direct deposit (see instructions): Complete t				
34a Account type: Personal checking	- or - Personal savings -	or - Business checking	- or -	Business savings
34b Routing number				
34b Routing number	34c Account numb	oer L		
Third-party Print designee's name	Des	signee's phone number	Per	rsonal identification
designee? (see instr.)	()		number (PIN)
Yes No E-mail:	/TDDIN NVTDDIN			
▼ Paid preparer must complete ▼ Preparer's N' (see instructions)	excl. code	▼ Taxpayer(s)	must sign h	nere ▼
Preparer's signature Preparer'	s printed name	Your signature		
Firm's name (or yours, if self-employed)	Preparer's PTIN or SSN	Your occupation		
Address	Employer identification number	Spouse's signature and occupation (if joint claim)		
	Date	Date	Daytime phone	number
E-mail:		E-mail:	. ,	

- If you are filing a NYS income tax return, submit this form with your return.
- If you are not filing a NYS income tax return, mail this form to:

NYS TAX PROCESSING, PO BOX 15192, ALBANY NY 12212-5192.

