

### Department of Taxation and Finance

# Claim for New York City School Tax Credit

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Your first name	MI	Your last name (for a	combine	ed claim, enter spouse's nam	ne on line below)	You	r date of birth (mmddyyyy)	Your so	ocial security number	
Spouse's first name	MI	Spouse's last name	е			Spo	use's date of birth (mmddyyyy)	Spouse's social security number		
Mailing address (number and str	reet or	PO box)					Apartment number		ust enter your date(s) of nd social security number(s)	
							above.			
City, village, or post office			State	ZIP code Country (if not United States)			ited States)	NYS county of residence while living in NY City		
Address of New York City resident	ence t	hat <b>qualifies</b> you fo	r this cr	edit, if different from abo	ove				Apartment number	
City			State	ZIP code	Decedent [	Тахр	ayer's date of death (mmddyy)	/y) S	spouse's date of death (mmddyyyy)	
			NY		information					
York County (Manhattan), Richmond County (Staten Island), or Queens. If you did not live in any of these counties for all or part of the year, stop; you do not qualify for this credit. Type of claim – mark an X in one box (see instructions) Married filing a combined claim (complete lines 1, 2, and 5) Married filing a combined claim (complete lines 1, 2, and 5) Qualifying widow(er) with dependent child (complete lines 1, 2, and 5) 1 Can you be claimed as a dependent on another taxpayer's 2017 federal return? If you marked an X in box a, c, or d above, and marked the Yes box at line 1, stop; you do not qualify for the credit. All other filers continue with line 2. 2 Enter, in the box to the right, the number of months during 2017 that you lived in New York City (see Note above; also see instructions) No months If you marked an X in box b above, continue with line 3. All other filers continue with line 5. 3 Can your spouse be claimed as a dependent on another taxpayer's 2017 federal return? Yes No If you marked an X in the Yes box at both lines 1 and 3, stop; you do not qualify for this										
credit. All other file 4 Enter, in the box to th New York City (se	ne rig	ht, the number	of mo		=			4	months	
<ul> <li>Mark one refund ch</li> <li>Direct deposit (see it</li> <li>If the funds for your r</li> <li>6a Account type:</li> <li>6b Routing number</li> </ul>	efun	ctions): Complet	e the	ount outside the U.  Personal savings	our refund	de n <i>X</i>	posited directly to you in this box (see instru	ır ban		
Third-party designee? (see instr.)  Yes No E-mai		nee's name			Desig (	nee )	's phone number		Personal identification number (PIN)	
Tes   No		ofo w Description	NIVTOT	RIN NYTPRIN						
▼ Paid preparer must co (see instructions)	ompi	ete ▼ Preparer's	NYIPE	excl. code	ı ı [[		▼ Taxpayer(s	s) mus	st sign here ▼	
Preparer's signature		Prepar	er's prir	nted name	<del>'                                    </del>	You	ur signature			
Ethnik and A 15 15				December 1970			Vana assuration			
Firm's name (or yours, if self-en	nploye	ed)		Preparer's PTIN or SS	5N	You	ur occupation			
Address			Employer identification	Employer identification number Sp			pouse's signature and occupation (if joint claim)			
			Date		Date Daytime phone number			ime phone number )		
E-mail:			I	E-mail:						
				<u> </u>						

See mailing instructions on back.



For office use only

## When and where to file Form NYC-210

File your claim as soon as you can after January 1, 2018.

Mail your claim to:

NYS TAX PROCESSING PO BOX 15192 ALBANY NY 12212-5192

#### Private delivery services

If you choose, you may use a private delivery service, instead of the U.S. Postal Service, to mail in your form and tax payment. However, if, at a later date, you need to establish the date you filed or paid your tax, you cannot use the date recorded by a private delivery service unless you used a delivery service that has been designated by the U.S. Secretary of the Treasury or the Commissioner of Taxation and Finance. (Currently designated delivery services are listed in Publication 55, Designated Private Delivery Services. See Need help? for information on obtaining forms and publications.) If you have used a designated private delivery service and need to establish the date you filed your form, contact that private delivery service for instructions on how to obtain written proof of the date your form was given to the delivery service for delivery. See Publication 55 for where to send the form covered by these instructions.

## **Privacy notification**

New York State Law requires all government agencies that maintain a system of records to provide notification of the legal authority for any request for personal information, the principal purpose(s) for which the information is to be collected, and where it will be maintained. To view this information, visit our website, or, if you do not have Internet access, call and request Publication 54, *Privacy Notification*. See *Need help?* for the Web address and telephone number.

## Need help?



Visit our website at www.tax.ny.gov

- get information and manage your taxes online
- check for new online services and features



#### Telephone assistance

Automated income tax refund status: (518) 457-5149 **Personal Income Tax** Information Center: (518) 457-5181

To order forms and publications: (518) 457-5431



Text Telephone (TTY) Hotline (for persons with hearing and speech disabilities using a TTY): If you have access to a TTY, contact us at (518) 485-5082. If you do not own a TTY, check with independent living centers or community action programs to find out where machines are available for public use.



Persons with disabilities: In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, call the information center

