

# Claim for New York City School Tax Credit Tax Law - Section 606(ggg) NYC-210

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You	u <b>r</b> first name	MI	Your last name (for a <b>combined claim</b> , enter spouse's name on line b			ne on line below)	You	r date of birth (mmddyyyy)	Your Social Security number		
Spouse's first name MI Spouse's last name				ne	9			ouse's date of birth (mmddyyyy)	Spouse's Social Security number		
Mai	Mailing address (number and street or PO Box)							Apartment number  You must enter your date(s) of birth and Social Security number(s) above.			
City, village, or post office State					ZIP code Country			NYS county of	residence while living in NY City		
Add	Address of New York City residence that <b>qualifies</b> you for this credit, if different from above									Apartment number	
City	M.			State	ZIP code	I	Tavr	payer's date of death (mmddyy)	(v) Snouse	's date of death (mmddyyyy)	
				NY	211 0000	Decedent information	Tun	ayor o date or dodar (minday)	(y) Operation	and or doddin (minidayyyy)	
/ork County (Manhattan), Richmond County (Staten Island), or Queens. If you did not live in any of these counties for all or part of he year, stop; you do not qualify for this credit.  Type of claim - mark an X in one box (see instructions)  Barried filing a combined claim (complete lines 1, 2, and 5)  Married filing a combined claim (complete lines 1 through 5)  Can you be claimed as a dependent on another taxpayer's 2024 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.  Enter, in the box to the right, the number of months during 2024 that you lived in New York City (see Note above; also see instructions)  If you marked an X in box b above, continue with line 3. All other filers continue with line 5.  Can your spouse be claimed as a dependent on another taxpayer's 2024 federal return?  If you marked an X in box b above, continue with line 3. All other filers continue with line 5.  Can your spouse be claimed as a dependent on another taxpayer's 2024 federal return?  If you marked an X in box b above, continue with line 3. All other filers continue with line 5.  Can your spouse be claimed as a dependent on another taxpayer's 2024 federal return?  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 filers continue with line 4.  Enter, in the box to the right, the number of months during 2024 your spouse lived in  New York City (see Note above; also see instructions)  Married but filing a separate claim (complete lines 1, 2, and 5)  Qualifying surviving spouse (you marked tall into filers 1, 2, and 5)  Qualifying surviving spouse (Qualifying surviving spouse (you marked tall of the conditions (complete lines 1, 2, and 5)  Qualifying surviving spouse (Qualifying surviving spouse (you marked talm (complete lines 1, 2, and 5)  Qualifying surviving spouse (Qualifying surviving spouse (you marked talm (complete lines 1, 2, and 5)  Pour lin											
5	Mark one refund ch	lark one refund choice (see instructions): direct deposit (fill in line 6) - or - paper check									
6	-	irect deposit (see instructions): Complete the following to have your refund deposited directly to your bank account.									
	If the funds for your refund would go to an account outside the U.S., mark an <b>X</b> in this box (see instructions)										
	6a Account type:		ersonal hecking -	or -	Personal savings	- or -		Business checking -	or -	Business savings	
	<b>6b</b> Routing number	6b Routing number 6c Account number									
	Third-party Print designee's name Designee's phone number Personal identification										
designee? (see instr.)											
Ye	es No Email:										
•	Paid preparer must co (see instructions)	ompl	ete ▼ Preparer'	s NYTPF	RIN NYTPRIN excl. code			▼ Taxpayer(s	s) must si	gn here ▼	
Pre	parer's signature		Prepa	arer's prir	nted name		Yo	ur signature			
Firn	m's name <i>(or yours, if self-en</i>	nploye	d)		Preparer's PTIN or SS	SN .	Your occupation				
Address Employer						n number	Spouse's signature and occupation (if joint claim)				
					Date		Da	te	Daytime pl	none number	
Em	ail:							nail:	[( )		
⊏(I)	all.		Email:								
					See mailing instru	ctions on b	acl	<.			



For office use only

## When and where to file Form NYC-210

File your claim as soon as you can after January 1, 2025.

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(s) 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
Corporation Tax Information Center: 518-485-6027
To order forms and publications: 518-457-5431
Text Telephone (TTY) or TDD Dial 7-1-1 for the equipment users New York Relay Service

