For	office use only	_	State Department			Homeown	ers and F	?enters		$\langle - \rangle$					
				roperty Tax Credit for Homeowners and Renters and Renters transfer to the rest. For a joint claim, use both name lines.						<u> 1998</u>	y	17	-2	1	4
Please enter your first Your first name and middle in				Your last name (for a joint claim, enter spouse's name on line below)					▼ Y	our socia	security	number	$\overline{\Box}$	1	$\overline{}$
Spouse's first name an			s first name and midd	niddle initial Spouse's last name				▼ S	pouse's s	social se	curity numbe	r		_  	
			address (number an	umber and street or rural route)			Apartment number			tate cou	inty of	residence			
	Attach label,	City, villa	City, village or post office State ZIP code							fying so		curity numb	er if		
		Address	Address of New York residence that <b>qualifies</b> you for this credit, if different from above								П	$\top$	$\overline{}$		
		City, vill	age or post office	е	State		ZIP code				<u>                                     </u>	<u> </u>			
		] [			NY										
1	Were you a New York	State res	dent for all of 19	98?						1		Yes	] N	No [	
2	Did you occupy the sa	ame reside	ence for at least s	six months	during 1998?					2		Yes	] N	No	
3	If you owned real prop	perty, was	the current mark	et value of	your real proper	ty more than	\$85,000? .		•	3		Yes		No	
4	Can you be claimed a	ıs a depen	dent on another	taxpayer's	1998 federal retu	ırn?				4		Yes	۱	No [	
	you checked a sha					-	-								
5	Did you live in a nursin (If you checked Yes, y	-	_							5		Yes	] 1	1o	
6	Including yourself, how	-	-		=					6					
7	Were any of the hous December 31, 1998					-				7		Yes	] N	lo [	
8	Did you own or pay re	ent for vou	r residence durin	na 1998? .						8	(	Own	Re	nt [	
Co	mplete Schedule												1		
9	Did you enter an amo	unt for the	exemption on lin	ne 20 of th	is claim?					9		Yes	]	10 [	
10	Homeowners: enter a					25				10		<u> </u>	<u> </u>		<u> </u>
11	9					<b>1</b> 1			0 0		_				
	you do not qualify	7. II O OI	less, leave lines	12 and 13	Diarik)	····· • ···				 		e sure n and c			
12		Enter from the table below the rate that applies to your household gross income									_	his forn			
	\$.01 to \$3,0		Your rate is: .035	<b>If the amount on line 11</b> \$9,001 to \$11,000			ate is:				•				
	\$3,001 to \$5,0 \$3,001 to \$5,0 \$5,001 to \$7,0 \$7,001 to \$9,0	00 00	.035 .040 .045 .050	\$11,	001 to \$11,000 001 to \$14,000 001 to \$18,000	.00	60							г	1
13										13		<u> </u>	<u> </u>		<u> </u>
14	Subtract line 13 from	line 10. (If	line 13 is more tha	an line 10, <b>st</b>	t <b>op</b> ; no credit is allow	wed.)				14					
15	If you entered an amount on line 20, enter 25% of line 14 <b>or</b> , if no entry was made on line 20, enter 50% of line 14											ÍТ			
	enter 50% of line 14	4								15		<u> </u>	<b>∐</b> •		
	Credit limitation (see in			•					)	16					<u> </u>
17	Enter the amount from than one member of					•	,			17			Π.		
• If	ansfer the amount on you are not filing a Ne	line 17 of w York St	this form to Fo	orm IT-200 return, ma	, line 36, or to Fo ill this form to: S	orm IT-201, I	ine 59. Atta	ch Form	IT-214	-			12261	-000	)1.
	or direct deposit inform	•		ough 35c c	Mark "X" if self-		Your signature	<del></del>							
Pr	eparer's				employed	Sian	_		t alai						
	se Only	r yours, if self-	employed) F	Preparer's so	cial security number	Sign Here	Spouse's sign								
Add	dress		E	mployer ider	ntification number		Date	Daytim (	ne phon <b>\</b>	e numbe	er (optio	nal)			

IT-214 (1998) (ba	<sup>nck)</sup> To be completed by homeowners. <i>Enter the amour</i>	nte vou :	nc	l al	,												
	qualified members of your household paid during		71 I C	an	•				_		1	$\overline{}$	<u> </u>	$\overline{}$	$\neg$	_	
18 Real property taxes (including school district taxes)										8		_ ;		ᆜ		L	
19 Special asses	sments								1	9							
•	f taxes not paid due to the exemption for persons 65 or older under								_		一	_;	一	一	$\equiv$		
Real Property Tax Law (veterans' tax exemption does not qualify). This entry is optional (see instructions)												_;	ᆜ	<u> </u>	_ ∙	느	<u> </u>
21 Real property	taxes paid (add lines 18 through 20). Enter here and on line 10								_2	1		<u> </u>					
	To be completed by renters. Enter the amount of ree was 100% exempt from real property taxes, stop; you								erty	ta	xes	; pa	aid	dur	ing	19	98
22 Enter the tota	rent you and all members of your household paid during 1998								2	2							
23 If line 22 incl	udes charges for:	Enter:										_,					
heat, gas, el	ine																
heat, gas, electricity and furnishings											_						
heat <b>or</b> heat and gas										23							
none of the	above	0							_	<u> </u>	一	<u>-</u> ;	二	一	╡:	E	_
24 Adjusted rent	(Subtract line 23 from line 22. If monthly average is over \$450, <b>stop</b> ; you do	not qualify fo	or th	s cre	edit.)				2	4		_ ;	$\perp$	$\perp$		L	
<b>25</b> Enter 25% of	line 24 here and on line 10. (If over \$1,350, stop; you do not qualify for t	this credit )							_ 2	5		$\Box$		T	$\neg$ .		
-		,										<u>_ ,</u>	一	<u> </u>		_	
Schedule C - I	o be completed by homeowners and renters. Enter th	ne nouse	no	a g	iros	ss i	ncc	ome	of	all	no	use	no!	id m	ıem	ber	S.
	name, social security number, and the year of birth of everyone, in						-		_	=							
household i	n 1998. (Attach additional sheets if necessary.) Enter the total number of hou	isehold mer	mbe	rs ir	n the	e bo	xes		2	6							
Your name					ī	Soci	al se	curity	num	ber		$\overline{}$	1 T	T	ear of	birth	_
							+		+				Ц	1	9		
Spouse's name (if m	arried)					Ι.	1					Т	1	1	9		П
Household member'	s name						I		Ш	Щ	<u></u>	<u>_</u>	4	<u></u>		<u> </u>	<u> </u>
							+		+					1	9		
Household member'	s name				I	i I						一	1	1	9	$\equiv$	<u> </u>
Household member'	s name						T					<u> </u>	4	<u> </u>	9	<u> </u>	
	, <del>.</del>						+		- 1					1	9		
Enter the total of	all amounts, even if not taxable, that you, your spouse (if marri								emk	ers	rec	eive	ed d	lurin	g 19	98.	
27	,		or F	orm '	1040	), line	e <i>33)</i>			F							
If you do not have to file a federal return, see <i>Household gross income</i> on the front page of the instructions for this form										27		Į					
	on the north page of the motioners for this form								_		$\overline{}$	_;	一	一	$\exists$		
28	New York State additions to federal adjusted gross income								2	8		_ ;	$\perp$			L	
29	Social security payments not included on line 27								2	9							
		• • •		• • •					<u>э</u> г		<u>-                                    </u>	ᅼ	<del>_</del>	ᆗ・			
30								3	0		_,						
28							3										
	Pensions and annuities not included on lines 27 through 30								_	İ		<u>- '</u>	<u>_</u> _	$\pm$	╡.		 T
32	Cash public assistance and relief								3	2		_ ;				느	<u> </u>
33	Other income								3	3		Į					
34 Household gross income (add lines 27 through 33). Enter this amount here, and on line 11,											$\equiv$		一	一	_		Ė
rounded to the nearest whole dollar												_;	$\perp$	$\perp$	_].	L	
	it: If you are <b>not</b> attaching this claim to your income tax return, and	-	cre	dit (	fron	n lin	e 17	)									
sent directly	to your bank account, complete a, b, and c below (see instructions).																
_	a Routing number • b	Туре: •		Ch	neck	kina	•		s	avin	ngs						
						J					-						
		1 1 1	1	- 1	- 1	- 1											