



Instructions for Form NYC-210 Claim for City of New York School Tax Credit

NYC-210-I

General information

Who qualifies

To claim the city of New York school tax credit, you must have lived in the city of New York for all or part of 2002. However, you cannot claim this credit if you can be claimed as a dependent on another taxpayer's federal return. If you qualify for the credit, we will compute the amount of credit for you and send it to you.

Purpose of form

If you qualify for the city of New York school tax credit and are **not** filing a return on Form IT-100, IT-200, IT-201, or IT-203 for 2002, use Form NYC-210 to claim your city of New York school tax credit; we will compute the amount of your credit and send it to you. If you are filing a tax return, you will claim and compute your credit on your return (we will compute the credit for IT-100 filers); do not file Form NYC-210.

Filling in your claim form

If you received a peel-off label, remove it from the address sheet in your envelope and place it in the name and address box at the top of your claim. Check the label to make sure the information on it is complete and correct.

If your name or your spouse's name or your address is wrong, cross it out and make the corrections directly on the label. Space for each name on the label is limited to 36 characters. Do not correct the label if it is correct except for some missing final characters.

If you do not have a peel-off label, please keep your name and address entries within the space provided. For example, your first name and middle initial should not go past the vertical line separating them from your last name, and your last name should start to the right of the vertical line. Similarly, your mailing address, ZIP code, etc., should be kept within the boxes provided.

You must enter your social security number(s) in the boxes to the right of the name and address box. Be sure your social security numbers are in the same order as your names.

Enter the county of residence in New York City that qualifies you for the credit: Kings County (Brooklyn), Bronx, New York County (Manhattan), Richmond County (Staten Island) or Queens. Married taxpayers enter both social security numbers. On the bottom line of the name and address box, enter the address where you lived in New York City in 2002 if it is different from your mailing address. If not, enter the word **same** on this line.

Deceased individuals - Enter the name of the deceased individual and, in the boxes provided, list the date of death in month, day, and last 2 digits of year order.

Please print (using a blue or black ballpoint pen; no pencils please) or type all **X** marks and numbers in the boxes or spaces provided. Write your numbers and **X** marks like this:

1	2	3	4	5	6	7	8	9	0	X
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Line instructions

Line 1

Show what type of claim you are filing by marking an **X** in only **one** box. For help with determining what type of claim you are filing see below.

Single - You are single if you are unmarried or separated from your spouse by a divorce or separate maintenance decree and you do not qualify as a surviving spouse (see below). If you are single, compute your credit using lines 1 through 3 and line 6 (if applicable).

Married - You are married if, on the last day of 2002, you were married and living together as husband and wife, or you were married and living apart, but not legally separated under a decree of divorce or separate maintenance.

You are also considered married if your spouse died during 2002.

Should you file a combined claim or should you file a separate claim?

Generally, married taxpayers should file a combined claim by checking box b and using lines 2 through 5 and, if applicable, line 6. One check made out to both spouses will be sent for a combined claim. If one spouse on a combined claim is not eligible for the credit because he or she can be claimed as a dependent on another taxpayer's federal return or because they did not live in New York City at all during 2002, a check for the credit of the eligible spouse will be issued in both spouses' names.

Married taxpayers who want separate checks for each spouse's credit amount must file separate claims checking box c and using lines 2 and 3 and, if applicable, line 6.

Surviving spouse - You are a surviving spouse if you meet **all** of the following conditions:

- your spouse died in 2000 or 2001, and you did not remarry in 2000, 2001, or 2002; and
- you have a child, adopted child, stepchild, or foster child who lived in your home for all of 2002 and you could have claimed the child as a dependent if you filed a federal return (temporary absences, such as for school, vacation, or medical care count as time lived in your home); and
- you paid over half of the expenses of keeping up your home.

Complete lines 1 through 3 and line 6 (if applicable) if you are a surviving spouse.

Line 3

Enter in the boxes the number of months **you** lived in New York City in 2002. In determining the number of months, count any period of more than one-half month as a full month. Do not count any period of one-half month or less.

*Example: You lived in the city of New York from November 16 to December 31, 2002. You would not count November as a month lived in New York City, but you would count December. Therefore, you would enter **01** on line 3.*

*Since you lived in the city of New York for less than **10** months, you would enter **0** in the first box and the number of actual months in the second box. If you lived in the city of New York for ten, eleven, or twelve months of the year, you would enter the actual number of months (10, 11, or 12).*

Line 5

Enter in the boxes the number of months **your spouse** lived in New York City during 2002. If your spouse died during 2002 and lived in New York City from January 1, 2002, until time of death, enter 12 on line 5. If your spouse moved into or out of New York City prior to his or her death, enter on line 5 the number of months he or she lived in New York City during 2002.

The chart below will help you estimate the amount of your refund.

Number of months of New York City residence	Single, or married filing a separate claim	Married filing a combined claim, or surviving spouse
1	\$ 5.21	\$ 10.42
2	10.42	20.83
3	15.63	31.25
4	20.83	41.67
5	26.04	52.08
6	31.25	62.50
7	36.46	72.92
8	41.67	83.33
9	46.88	93.75
10	52.08	104.17
11	57.29	114.58
12	62.50	125.00

Line 6 - Direct deposit

Complete lines 6a through 6c if you want us to deposit your refund directly into your bank account.

On line 6a, enter the routing number shown on the checks issued by your bank (see sample check on this page). The routing number **must** be nine digits. If the first two digits are not 01 through 12, or 21 through 32, the direct deposit will be rejected and a check sent instead. On the sample check on this page, the routing number is 090090099. Your check may state that it is payable through a bank different from the one where you have your checking account. If so, do not use the routing number on that check. Instead, contact your bank for the correct routing number to enter on this line.

On line 6b, check the box for the type of account, checking or savings.

On line 6c enter your account number shown on your checks (see sample check on this page). The account number can be up to 17 characters (both numbers and letters). Include hyphens but omit spaces and special symbols. Enter the number from left to right and leave any unused boxes blank. On the sample check on this page, the number is 1357902468.

Any refund that you may be entitled to will be reflected in your bank statement.

JOHN SMITH
MARY SMITH
999 Maple Street
Someplace NY 10000

1234
15-0000/0000

_____ 20 _____

PAY TO THE ORDER OF _____

_____ DOLLARS

SOME BANK
Someplace, NY 10000

For _____

Routing number (line 6a): 090090099
Account number (line 6c): 1357902468

Note: The routing and account numbers may appear in different places on your check.

Third-party designee

If you want to authorize a friend, family member, or any other person (third-party designee) you choose to discuss your claim with the New York State Tax Department, check the *Yes* box in the *Third-party designee* area of your claim. Also, enter the designee's name, phone number, and any five numbers the designee chooses as his or her personal identification number (PIN). If you want to authorize the paid preparer who signed your claim to discuss it with the Tax Department, just enter *Preparer* in the space for the designee's name. You do not have to provide the other information requested.

If you check the *Yes* box, you (and your spouse, if filing a combined claim) are authorizing the Tax Department to discuss with the designee any questions that may arise during the processing of your claim. You are also authorizing the designee to:

- give the Tax Department any information that is missing from your claim,
- call the Tax Department for information about the processing of your claim or the status of your refund, and
- respond to certain Tax Department notices that you shared with the designee about math errors, offsets, and claim preparation. The notices will not be sent to the designee.

You are not authorizing the designee to receive any refund check, bind you to anything (including any additional tax liability), or otherwise represent you before the Tax Department. If you want the designee to perform those services for you, you must file Form POA-1, *Power of Attorney*, making that designation with the Tax Department. Copies of statutory tax notices or documents (such as a *Notice of Deficiency*) will only be sent to your designee if you file Form POA-1.

The third-party designee authorization cannot be revoked. However, the authorization will automatically end on the due date (without regard to extensions) for filing your 2003 claim. For most taxpayers the due date will be April 15, 2004.

Make sure you receive your refund

Every year about 40,000 refund checks are returned to the Tax Department, largely because of mailing address problems. Many of these checks eventually reach their owners, but many others never do, despite our best efforts.

You can receive your refund check without delay. Please remember these important points:

- Make sure you enter your social security number(s) at the top of your claim.
- We mail the refund to the mailing address shown on this claim form.
- Don't assume that we already have your correct address. Check it.
- Make sure the address is **complete** - include *c/o* if necessary, and P.O. box and apartment numbers, if any.
- If you're moving, notify the U.S. Postal Service of the new address.
- If you use a computer, make sure your software is printing your address properly.
- Make sure everything is legible.
- If someone else is preparing your claim make sure they have your correct address.

Need help?



Telephone assistance is available from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday.

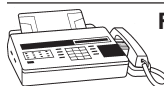
For tax information: 1 800 225-5829

To order forms and publications: 1 800 462-8100

Refund status: (electronically filed) 1 800 353-0708
(direct deposit) 1 800 321-3213
(all others) 1 800 443-3200

(Automated service for refund status is available 24 hours a day, 7 days a week.)

From areas outside the U.S. and outside Canada: (518) 485-6800



Fax-on-demand forms: Forms are available 24 hours a day, 7 days a week.

1 800 748-3676



Internet access: www.tax.state.ny.us (for forms, publications, your refund status, to check your estimated tax account, and other information)



Hotline for the hearing and speech impaired: 1 800 634-2110 from 8 a.m. to 5:55 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), 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, please call 1 800 225-5829.



If you need to write, address your letter to:
NYS TAX DEPARTMENT
TAXPAYER CONTACT CENTER
W A HARRIMAN CAMPUS
ALBANY NY 12227