

FAMILY INDEPENDENCE ADMINISTRATION

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POLICY BULLETIN #04-200-OPE

NYSNIP REAL PROPERTY TAX CREDIT NOTICE (W-516G)

Date:	Subtopic(s):							
November 18, 2004		Forms						
	The	of their wall on hadden in to inform a staff of the						
This procedure can now be accessed on the	The purpose of this policy bulletin is to inform staff of the							
FIAweb.	•	of the New York State Nutrition Incentive Program Or Credit Notice (W-516G), which is similar to the Real						
	(NYSNIP) Tax Credit Notice (W-516G), which is similar to the Real Property Tax Credit Notice (W-516E). The difference is that the W-516G is designed only for food stamp participants enrolled in the NYSNIP and identifies the questions on the Claim for Real Property Tax Credit for Homeowners and Renters (IT-214) form that must be completed by the participant. The W-516G , along with the IT-214 , will be mailed to participants. In an effort to assist NYSNIP participants in applying for the real property tax credit, MIS will use information from WMS to partially pre-fill the IT-214 . However since all of the information required to complete the form is not available in WMS, the W-516G lists the number of each question on the IT-214 that must be completed. The W-516G also advises the participants to sign the IT-214 and							
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		will be mailed to participants.						
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Participants should The W-516G also advises the participants to sign the IT-214 and								
contact a tax preparer if	mail it to the "State Processing Center, P.O. Box 61000, Albany, NY							
they have questions about the real property	12261-0001." Participants are advised in the W-516G to contact a							
tax credit.	qualified tax preparer if they have questions regarding the real							
	property tax	credit and not to contact the Food Stamp Centers.						
	Effective Imn	nediately						
	Attachments	s:						
■ Please use Print on	W-516G	NYSNIP Real Property Tax Credit Notice (11/18/04)						
Demand to obtain copies	W-516G (S)	NYSNIP Real Property Tax Credit Notice (Spanish)						
of forms.	11 0100 (0)	(11/18/04)						
	IT-214	Claim for Real Property Tax Credit for Homeowners						
		and Renters						

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 2 at the prompt followed by 765 or send an e-mail to *FIA Call Center*

Form	W-516G
11/18	/04



New York State Nutrition Incentive Program (NYSNIP) Real Property Tax Credit Notice

Dear Sir/Madam:

Our records indicate that you have lived at the same address for at least six (6) months. Therefore, you may be eligible to receive a New York State Real Property Tax Credit of up to \$75.00 for your household (if anyone in your household is age 65 or older, it may be more than \$75.00).

THE MONEY YOU RECEIVE FROM THIS CREDIT IS YOURS TO KEEP. You do not have to inform your Food Stamp Center when you receive the credit. There will be no change in your Food Stamp Benefits because of it.

To help you apply for the credit, we have enclosed a computerized Real Property Tax Credit (Form IT-214) which we have partially completed using information from our files. Since you are enrolled in the New York State Nutrition Incentive Program (NYSNIP), other information required to complete the IT-214 is no longer available to us and therefore must be provided by you.

Please provide information for question numbers 10, 14, 15, 17, 22, 23, 24 and 25 on the IT-214 which we are unable to complete for you. You must provide the information asked for in these questions in order to determine if you qualify for this credit.

In order to receive your credit, you and your spouse must sign and date the enclosed form, on the bottom of page 1, in the areas marked "Sign here." You must mail the **form** to: **State Processing Center**, **P.O. Box 61000**, **Albany**, **NY 12261-0001**.

The Department of Taxation and Finance will review the form and determine whether or not you are eligible for the credit. PLEASE DO NOT CONTACT YOUR FOOD STAMP CENTER

You are responsible for the accuracy of the information that we have provided on the enclosed Form IT-214 on your behalf regarding your residency, whether you can be claimed on another taxpayer's federal return and the information concerning all of your household members. If we failed to list any individual who is a member of your household, please add the name(s) to the list on page 2 of the enclosed Form IT-214. Attach additional sheets, if necessary.

Do not sign the form if any of the financial information is incorrect. You should instead seek the assistance of a qualified tax preparer and/or file a regular Form IT-214 if you are eligible for the credit. Visit the IRS Web site at www.irs.gov/efile for details on filing an income tax return without paying a qualified tax preparer for help.

Form	W-516G	(S)
11/18	/04	



Fecha:	
Número del Caso:	
Nombre del Caso:	
Centro:	
	·

Programa de Incentivo de Alimentación del Estado de Nueva York (New York State Nutrition Incentive Program – NYSNIP) Aviso de Crédito en los Impuestos de Bienes Raíces

Estimado(a) Sr.(a):

Nuestros archivos indican que usted ha vivido en la misma dirección por lo menos seis (6) meses y por lo tanto, usted puede tener derecho a recibir un Crédito en los Impuestos de Bienes Raíces del Estado de Nueva York (New York State Real Property Tax Credit) de hasta \$75.00 para su hogar (si alguien en su hogar tiene 65 años de edad o más, el crédito puede ser más de \$75.00).

<u>EL DINERO QUE USTED RECIBA DE ESTE CRÉDITO ES PARA QUE SE QUEDE CON EL</u>. Usted no tiene que informarle a su Centro de Cupones para Alimentos cuando reciba el crédito. No habrá cambio alguno en sus beneficios de Cupones para Alimentos a causa de dicho crédito.

Para ayudarle a solicitar este crédito, hemos adjuntado un Formulario generado por el sistema sobre el Crédito en los Impuestos de Bienes Raíces (computerized Real Property Tax Credit Form IT-214) y lo hemos llenado parcialmente con la información en nuestros archivos. Debido a que usted está inscrito en el Programa de Incentivo de Alimentación del Estado de Nueva York (NYSNIP), debe proporcionarnos otros datos que no están disponibles para completar el formulario IT-214.

Por favor proporcione la información correspondiente a las preguntas 10, 14, 15, 17, 22, 23, 24 y 25 del fornulario IT-214 cuyos datos no podemos completar sin su ayuda. Usted debe proveer la información que le estamos preguntando para determinar si usted califica para este crédito.

Para poder recibir su crédito, usted y su cónyuge tendrán que firmar y fechar el formulario adjunto al pie de la página 1, en las secciones marcadas con una "Firme aquí". Envíe por correo el formulario a: State Processing Center, P.O. Box 61000, Albany, NY 12261-0001.

El Departamento de Impuestos y Finanzas evaluará el formulario y determinará si usted tiene derecho al crédito. POR FAVOR NO SE COMUNIQUE CON SU CENTRO DE CUPONES PARA ALIMENTOS.

Es su responsabilidad cerciorarse de la exactitud de los datos que hemos provisto en el formulario IT-214 respecto a su domicilio, si puede ser reclamado en la declaración de impuestos de otro contribuyente, y los datos acerca de los miembros de su hogar. Si no hemos mencionado a algún miembro de su hogar, favor de añadir el nombre en la lista al revés del formulario IT-214 adjunto. No firme el formulario si algún dato financiero no está correcto. En éste caso, busque la ayuda de un profesional en la preparación de declaraciones de impuestos y/o presente un formulario IT-214 si usted tiene derecho al crédito. Visite la página de internet del IRS en www.irs.gov/efile para obtener más detalles respecto a como presentar una declaración de impuestos sin tener que acudir y pagarle a un profesional en éste campo.

No llene este formulario si usted ya ha registrado un formulario IT-214 para el año 2004.

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		•						1 -	2004	2		Г-2	<u>'</u> 1		
type		Important: You must enter your social security number(s) in the boxes to the right. Your first name and middle initial Your last name (for a joint claim, enter spouse's name on line below)					▼ You	ur social	security nu	_		-			
i o i										$+$ \perp	+				
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<u> </u>										+	+				
label,	Current ma	ailing address (num	nber and stree	et or rural route)		Apartment n	umber	NY Sta	NY State county of residence •						
Attach label, or print or type	City, village	e, or post office		State	Ž	ZIP code		Qualifyi differen		ial secur above	ity numl	per if			
	Street add	Iress of New York	k residence	e that qualifies you for	this credit, if	f different fro	m above	<u> </u>							
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	City, villaç	ge, or post office	е	State NY	2	ZIP code									
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				ue of more than \$85,0					3.	Ye	es	N	lo		
Can you be cla	med as a d	ependent on an	nother tax	payer's 2004 federal r	return?			_	4.	Ye	es	N	lo		
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Did you live in a	ι nursing ho	me, public hous	sing, or of	ther residence comple	etely exemp	oted from re	al proper	ty					_		
taxes in 200/	₊? (If you marl	ked Yes, you must	ι attach an ε	explanation to your real pro	operty tax cred	lit claim; see ir	nstructions.))▶	5.	Ye	es	N	lo		
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January 1, 20	05? (If you m	narked Yes , enter o	qualifying s	social security number in	the box abov	ve line 1; see	instruction	s.) 📗	7.	Ye	es	N	lo		
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Enter household									•••	 ,		-			
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ne amount on li	ne 11 is:	Your rate is:	If the a	amount on line 11 is:	: Your I	rate is:				es 35a					
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\$3,001 to \$5, \$5,001 to \$7,		.040 .045		11,001 to \$14,000 14,001 to \$18,000	.060. 360.				-	• • • • • • • • • • • • • • • • • • • •	•				
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enter 50% of	line 14							▶	15.	<u> </u>					
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IT-214 (2004) (back)

Sch	nedule A — To be completed by homeowners. Enter the amounts you and all qualified members of your household paid during 2004.	Г					
18	Real property taxes (including school district taxes)	18.					
			TÍ		Т		Т
	Special assessments	19.	<u></u> ,				
20	The amount of taxes not paid due to the exemption for persons 65 or older under section 467 of the				\Box		T
	Real Property Tax Law (veterans' tax exemption does not qualify). This entry is optional (see instructions)	▶ 20.	 ;			·	_
21	Real property taxes paid (add lines 18 through 20). Enter here and on line 10	▶ 21.	<u> </u>		Ш		
	redule B — To be completed by renters. Enter the amount of rent constituting real p	operty ta	axes p	aid d	uring	ı 20	04.
f yo	our residence was 100% exempt from real property taxes, stop ; you do not qualify for this credit.	Г					_
22	Enter the total rent you and all members of your household paid during 2004	22.					
	If line 22 includes charges for: Enter on line 23:		,				
	heat, gas, electricity, furnishings, and board 50% of line 22						
	heat, gas, electricity, and furnishings				\top		_
	heat or heat and gas	23.					
	none of the above 0		-		\equiv		Ξ
24	Adjusted rent (Subtract line 23 from line 22. If monthly average is over \$450, stop; you do not qualify for this credit.)	24.	┈,				
25	Enter 25% of line 24 here and on line 10. (If over \$1,350, stop; you do not qualify for this credit.)	▶ 25.				•	
Sch	nedule C — To be completed by homeowners and renters. Enter the household gross in	come of :	all hou	isehol	ld me	mh	ore
			110u	301101	a me		<i>51</i> 0
26	List below the name, social security number, and the year of birth of everyone, including yourself, who lived in						
⁄our r	household in 2004. (Attach additional sheets if necessary.) Enter the total number of household members in the boxename Social se	es 26. curity number			Year	of bir	th
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nous	se's name (if married)						_
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House	ehold member's name				_	_	_
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Ente	r the total of all amounts, even if not taxable, that you, your spouse (if married), and the above househ	old memb	ers rece	∍ived d	uring	200	4.
	27 Federal adjusted gross income (from Form 1040A line 34: Form 1040F7 line 4: or Form 1040 line 36) If you do not have to file a	_					
	(from Form 1040A, line 21; Form 1040EZ, line 4; or Form 1040, line 36) 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.					
		21.				,	_
	28 New York State additions to federal adjusted gross income	28.					
							Ŧ
	29 Social security payments not included on line 27	29.				, 🖳	
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	30 Supplemental security income payments (SSI)	30.	ш,			,	
					\Box		Т
	28 New York State additions to federal adjusted gross income	31.	<u> </u>			٠	_
	32 Cash public assistance and relief	32.					
			 ;				H
	33 Other income	33.				,	
34	Household gross income (add lines 27 through 33). Enter this amount here, and on line 11,				$\overline{}$		
	rounded to the nearest whole dollar	▶ 34.					
35	Direct deposit: If you are not attaching this claim to your income tax return, and want your						
	credit (from line 17) sent directly to your bank account, complete a, b, and c below (see instructions).						
		_					
	a Routing number b Type: Checking Checking	Savi	ngs				
	■ c Account number ●						