



Income for STAR Purposes Worksheet

To be used by individuals not required to file a federal or New York State income tax return.

Name of owner(s)					
Location of propertyStreet address			City/town		
Village (if any)			School district		
	Works	heet for STAR Income			
			Tax year		
Enter the amounts below that vinearest whole dollar).	would have been reported if	f you were required to file a	federal or state income tax return (round to the		
1 Total wages, salaries, and tip	1				
2 Taxable interest income and	2.				
3 Unemployment compensation			3		
4 Total pensions and annuities	. Do not include IRA distrib	utions (attach Form 1099)	4		
5 Social security benefits (attach Form 1099)			5		
			6		
7 Add lines 1 through 6			7		
8 Adjustments to income (list ty	8				
9 Subtract line 8 from line 7. The	his is your STAR income .		9		
(we) certify that all of the above eturn. All ow ners must sign ar		that I am (we are) not requi	red to file a federal or New York State income tax		
Signature	Date	Signature	Date		
Signature	Date	Signature	Date		



School Tax Relief (STAR) Exemption; Optional Income Verification Program

Dear Property Owner,

If you are a senior citizen applying for the Enhanced STAR exemption, you must demonstrate that the combined income of all of the owners of the property, and of any owner's spouse who resides on the premises, is no greater than the income standard for the applicable income tax year. You may do this in one of two ways:

Option 1: Traditional method. Submit a copy of your income tax return(s) for the appropriate income tax year to the Assessor with your STAR application by the application deadline each year. If you choose this option, do not complete this form.

Option 2: STAR Income Verification Program: Supply your Social Security Number(s) and authorize the New York State Department of Taxation and Finance to verify your income eligibility each year, instead of submitting an application and copy of your tax return(s) to the Assessor every year. To choose this option, you must complete this form and submit it to the Assessor along with a traditional STAR application and the necessary New York State income tax return(s) by the application deadline for the year in which you choose this option. For more information about this option and the Privacy Act notification, please see the back of this page.

To participate in the STAR income verification program, complete the following:

Loc	LOCATION OF PROPERTY				
Street address	Village (if any)				
City/town	School district				
Tax map number or section/block/lot					
(Property identification (see tax bill or assessment roll)				

AUTHORIZATION

I (we) hereby authorize the New York State Department of Taxation and Finance to annually verify, using my (our) Social Security Number(s) supplied below, whether my (our) income is greater than the applicable annual income standard for purposes of the Enhanced STAR exemption.

_	Please Print				
_	First Name	M.I.	Last Name	Social Security Number	Signature
1					
2					
3			17.		
4					

Important: This authorization must be signed by all of the owners of the property, and by any owner's spouse who resides on the premises. Attach additional sheets if necessary.