

New York State Department of Taxation and Finance

# **Claim for QEZE Credit for Real Property Taxes**

Tax Law - Section 15

| See Form IT-606-I, I                            | nstructions fo   | r Forn  | n IT-606  | , for   | assistanc    | e.                      |                      | All filers | enter ta      | x perio      | od:                |
|---|--|---------|-----------|---------|--------------|-------------------------|----------------------|------------|---------------|--------------|--------------------|
| File this claim with                            |  | T 204   | 17 202    | IT 4    |              | 005                     | beginning            |            |               | en           | ding               |
| File this claim with<br>Name(s) as shown on you |  | 1-201,  | , 11-203, | 11-4    | 204, Of 11-2 | 205.                    |                      |            | Taxpayer      | identifi     | cation number      |
|   | _  |         |           |         |              |                         |                      |            |               |              |                    |
| Name of empire zone (E2                         | <u>(</u> )   |         |           |         |              |                         |                      |            |               |              |                    |
| Name of qualified empire                        | me of qualified empire zone enterprise (QEZE) business |         |           |         |              |                         |                      |            | EIN of Q      | EZE          |                    |
|   |  |         |           |         |              |                         |                      |            |               |              |                    |
| Mark an <b>X</b> in the box                     | r if you are a   | Clean   | Energy    | Ent     | ternrise (C  | FF) (see instructi      | (ons)                |            |               |              | Γ                  |
|   | an you are a   | Clean   | Lifergy   |         | leipiise (C  |                         | 0115)                |            |               |              | I                  |
| Mark an <b>X</b> in the box                     |  |         |           |         |              |                         |                      |            |               |              |                    |
| s operations on rea<br>prownfield site clean    |  |         |           |         |              |                         |                      |            |               |              | ٦                  |
| nowrifield site clear                           | up agreemer  | il exec | uteu pri  |         | o January    | 1, 2000                 |                      |            |               |              | L                  |
| Section 1 — Fe                                  | or QEZEs   | firs    | t certi   | ifie    | d prior      | to April 1, 2           | 2005 (see Imp        | ortant     | inform        | ation        | in the instruction |
| Date (mm-dd-yyyy) of fi                         | rst certificatio                                       | on by E | Empire S  | Stat    | e Developr   | nent <i>(attach cor</i> | pies of all Certific | ates of    | Eligibilit    | v).          |                    |
|   |  | -       |           |         |              |                         |                      |            |               | <b>,</b> ,,, |                    |
| Schedule A — En<br>Part 1 — Empire zo           |  |         |           |         |              |                         | • •                  | all F7s    | for the c     | urrent       | tax year and the   |
| ive-year base period                            |  |         |           |         |              |                         |                      |            |               |              |                    |
| Current tax year<br>employment numbe            |  |         | ch 31     | June 30 |              | September 30            | December 31          |            | Total         |              |                    |
| Number of full-time within all EZs              | employees  |         |           |         |              |                         |                      |            |               |              |                    |
| 1 Current tax year                              | employmen  | numb    | per withi | n al    | ll EZs (do n | ot round; see insti     | ructions)            |            |               | 1.           |                    |
| Base period                                     | Tax yea  | r       | Maria     | ~ ~     |              | 0                       | Duralizat            |            | <b>T</b> .(.) |              | ]                  |
| employment no.                                  | ending (mm   | /уууу)  | March     | 31      | June 30      | September 30            | December 31          |            | Total         |              | 1                  |
| Number in<br>base year one                      |  |         |           |         |              |                         |                      |            |               |              |                    |
| Number in<br>base year two                      |  |         |           |         |              |                         |                      |            |               |              | -                  |
| Number in<br>base year three                    |  |         |           |         |              |                         |                      |            |               |              |                    |
| Number in<br>base year four                     |  |         |           |         |              |                         |                      |            |               |              |                    |
| Number in<br>base year five                     |  |         |           |         |              |                         |                      |            |               |              |                    |
| Total number of full-                           |  |         |           |         |              | e period                | <br>ons)             |            |               | 2.           |                    |
|   |  |         |           |         |              |                         | 2001                 |            |               |              |                    |



**IT-606** 

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**Part 2** — **New York State employment outside all EZs** — Computation of the employment number inside New York State and outside all EZs (whether or not you are certified in all of those EZs) for the current tax year and the five-year base period (*see instructions*).

|   | rrent tax year<br>ployment number                          | March 31       | June 30         | September 30    | December 31       | Total  |    |  |
|---|--|----------------|-----------------|-----------------|-------------------|--------|----|--|
|   | mber of full-time employees<br>ide NYS and outside all EZs |                |                 |                 |                   |        |    |  |
| 4 | Current tax year employment                                | t number insid | le New York Sta | ate and outside | all EZs (do not i | round) | 4. |  |

| Base period<br>employment no. | Tax year<br>ending (mm-yyyy) | March 31    | June 30       | September 30        | December 31     | Total |    |
|-------------------------------|------------------------------|-------------|---------------|---------------------|-----------------|-------|----|
| Number in<br>base year one    |                              |             |               |                     |                 |       |    |
| Number in<br>base year two    |                              |             |               |                     |                 |       |    |
| Number in<br>base year three  |                              |             |               |                     |                 |       |    |
| Number in<br>base year four   |                              |             |               |                     |                 |       |    |
| Number in<br>base year five   |                              |             |               |                     |                 |       |    |
| Total number of full-tim      | ne employees inside          | New York St | tate and outs | side all EZs in the | base period     |       |    |
| 5 Base period emp             | oloyment number i            | nside New ` | York State a  | and outside all E   | Zs (do not roun | d)    | 5. |

#### Schedule B — Computation of test year employment number within the EZs in which you are certified

| Test year (mm-yyyy)<br>to                    | March 31        | June 30         | September 30      | December 31       | Total |    |
|--|-----------------|-----------------|-------------------|-------------------|-------|----|
| Number of full-time employees within the EZs |                 |                 |                   |                   |       |    |
| 7 Test year employment numb                  | er within the E | Zs in which you | u are certified ( | see instructions) |       | 7. |

#### Schedule C — Employment increase factor (see instructions)

| 8  | Current tax year employment number within the EZs in which you are certified (see instructions)               | 8.  |      |  |
|----|---|-----|------|--|
| 9  | Test year employment number within the EZs in which you are certified (from line 7)                           | 9.  |      |  |
| 10 | Subtract line 9 from line 8   | 10. |      |  |
| 11 | Divide line 10 by line 9 (round the result to the fourth decimal place; if line 9 is                          |     |      |  |
|    | zero and line 8 is greater than zero, enter 1 here)   |     |      |  |
| 12 | Divide line 10 by 100 (round the result to the fourth decimal place) 12.                                      |     | <br> |  |
| 13 | Employment increase factor (enter the greater of line 11 or 12, but not more than 1.0; also enter on line 15) | 13. | •    |  |



No

# Schedule D — Computation of QEZE credit for real property taxes for QEZEs first certified prior to April 1, 2005

| 14 | Tax year of the business tax benefit period; benefit period factor (from table below)              | 14. |   | • |
|----|--|-----|---|---|
| 15 | Employment increase factor (from line 13)  | 15. | • |   |
| 16 | Eligible real property taxes (see instructions)  | 16. | • |   |
| 17 | Multiply line 14 by line 15 by line 16   | 17. | • |   |
| 18 | Recapture of QEZE credit for real property taxes (from Worksheet A on page 5 of instructions)      | 18. | • |   |
|    | Partners, shareholders, and beneficiaries, see instructions.                                       |     |   |   |
| 19 | Net recapture of QEZE credit for real property taxes (subtract line 17 from line 18. If line 17 is |     |   |   |
|    | greater than line 18, skip line 19 and continue on line 20; see instructions)                      | 19. | • |   |
| 20 | QEZE credit for real property taxes after recapture (subtract line 18 from line 17)                | 20. | • |   |
| 21 |  | 21. | • |   |
| 22 |  | 22. | • |   |
| 23 | Partners, shareholders, and beneficiaries, see instructions  |     | • |   |
| 24 | Total QEZE credit for real property taxes (add lines 22 and 23)                                    |     | • |   |
|    | · · · · · /  | ·   | [ |   |

Fiduciaries — Include the line 24 amount on the *Total* line of Schedule E, column C.

Partnerships — Enter the line 24 amount and code 166 on Form IT-204, line 147.

All others — Enter the line 24 amount and code 166 on Form IT-201-ATT, line 12, or Form IT-203-ATT, line 12.

| Benefit period factor table*   |                       |  |  |  |  |  |  |  |
|--------------------------------|-----------------------|--|--|--|--|--|--|--|
| Tax year of the benefit period | Benefit period factor |  |  |  |  |  |  |  |
| 1 - 10                         | 1.0                   |  |  |  |  |  |  |  |
| 11                             | .8                    |  |  |  |  |  |  |  |
| 12                             | .6                    |  |  |  |  |  |  |  |
| 13                             | .4                    |  |  |  |  |  |  |  |
| 14                             | .2                    |  |  |  |  |  |  |  |
| 15                             | 0                     |  |  |  |  |  |  |  |

\* The QEZE credit for real property taxes is generally available for up to 14 years for taxpayers that continue to qualify.

Find the tax year of your business tax benefit period. Enter the benefit period factor for that year (from the table on the left) on line 14.

# Schedule E — Beneficiary's and fiduciary's share of credit

| A<br>Beneficiary's name<br>(same as on Form IT-205, Schedule C) | <b>B</b><br>Identifying number | <b>C</b><br>Share of QEZE credit for<br>real property taxes | D<br>Share of recapture of QEZE<br>credit for real property taxes |
|---|--------------------------------|---|---|
| Total   |                                |   | •   |
|   |                                |   |   |
|   |                                | · · · ·   | •   |
| Fiduciary   |                                |   |   |



# Schedule F — Related entities

List the names and employer identification numbers of any related business entities. Attach additional sheets if necessary. Use the definition of related persons in the instructions to determine if an entity is related.

| Employer identification number |
|--------------------------------|
|                                |
|                                |
|                                |
|                                |
|                                |
|                                |
|                                |

# Schedule G — Valid business purpose for QEZEs first certified prior to August 1, 2002 (see instructions)

If you are claiming that the QEZE was formed for a valid business purpose, mark an **X** in the box and attach a notarized statement describing in detail how the QEZE meets the valid business purpose test.



# Claim for QEZE Credit for Real Property Taxes

# Section 2 — For QEZEs first certified on or after April 1, 2005 (see Important information in the instructions)

Note: You must file all pages (1 through 8) with your return. All taxpayers must complete the information above Section 1 on page 1 and then complete either Section 1 (pages 1 through 4) or Section 2 (pages 5 through 8). Do not complete both sections.

| File this claim with                            |                              | T 201 IT 202                   |                         | l filers enter tax       | <b>period</b> beginning    | en  | ding                |
|---|------------------------------|--------------------------------|-------------------------|--------------------------|----------------------------|---|---------------------|
| File this claim with<br>Name(s) as shown on you |                              | 11-201,11-203                  | , 11-204, Of 11-2       | 205.                     |                            | Taxpayer identifie  | cation number       |
|   |                              |                                |                         |                          |                            |   |                     |
| Name of empire zones (EZ):                      | Indicate whether e           | each zone is a deve            | lopment zone (DZ) or    | investment zone (IZ) (   | attach additional sheets i | f necessary).   |                     |
| Name of qualified empire                        | EIN of QEZE                  |                                |                         |                          |                            |   |                     |
|   |                              |                                |                         |                          |                            |   |                     |
| Date (mm-dd-yyyy) of fir                        | st certificatio              | on by Empire                   | State Developr          | nent <i>(attach copi</i> | es of all Certificat       | tes of Eligibility)                                       |                     |
| Tax year of the busin                           | ess tax bene                 | efit period (en                | ter a year betwee       | en 1 and 10)             |                            |   |                     |
| Schedule H — Em                                 | ployment                     | test for QE                    | ZEs first cert          | tified on or af          | ter April 1, 20            | 005   |                     |
|   |                              |                                |                         |                          |                            | n all EZs for the current<br>ed in all of those zones     |                     |
| Current tax year employment numbe               | r                            | March 31                       | June 30                 | September 30             | December 31                | Total   |                     |
| Number of full-time e within all EZs            | employees                    |                                |                         |                          |                            |   |                     |
| 25 Current tax year                             | employmen                    | t number with                  | in all EZs <i>(do n</i> | ot round; see insti      | ructions)                  |   |                     |
|   | 1                            |                                |                         | 1                        | I                          | 1   | 1                   |
| Base period<br>employment no.                   | Tax yea<br>ending <i>(mm</i> | March                          | 31 June 30              | September 30             | December 31                | Total   |                     |
| Number in<br>base year one                      |                              |                                |                         |                          |                            |   |                     |
| Number in<br>base year two                      |                              |                                |                         |                          |                            |   |                     |
| Number in<br>base year three                    |                              |                                |                         |                          |                            |   |                     |
| Number in<br>base year four                     |                              |                                |                         |                          |                            |   |                     |
| Total number of full-                           | time employe                 | ees within all                 | EZs in the base         | e period                 |                            |   | 1                   |
| 26 Base period emp                              | oloyment nui                 | mber within a                  | ll EZs (do not ro       | und; see instructio      | ons)                       | 26.   |                     |
| 27 Does the amour                               | t on line 25                 | exceed line 2                  | 6? (see instructi       | ons)                     | Yes                        | No  |                     |
|   |                              |                                |                         | • •                      |                            | <b>(ceed</b> the employment<br>dit for real property taxe |                     |
|   |                              | yment — Co<br>see instructions |                         | e employment n           | umber in New`              | York State for the curre                                  | nt tax year and the |
| Current tax year employment numbe               |                              | March 31                       | June 30                 | September 30             | December 31                | Total   |                     |
| Number of full-time                             | employees                    |                                |                         |                          |                            |   |                     |

(continued on page 6)

in NYS



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| Base period<br>employment no.   | Tax year<br>ending (mm-yyyy)  | March 31   | June 30   | September 30  | December 31      | F           | Total        |             |        |
|---|---|--|---|---|------------------|-------------|--------------|-------------|--------|
| Number in<br>base year one  |   |  |   |   |                  |             |              |             |        |
| Number in<br>base year two  |   |  |   |   |                  |             |              |             |        |
| Number in<br>base year three  |   |  |   |   |                  |             |              |             |        |
| Number in<br>base year four   |   |  |   |   |                  |             |              |             |        |
|   | time employees in ployment number i   |  |   |   |                  |             |              | 9.          |        |
|   | nt on line 28 <b>excee</b>  | <b>d</b> the amou  | nt on line 2  | 9? (see instructio  | ons)             | Ye          | s 📃          | No          |        |
| 0 Does the amou   |   |  |   |   |                  |             |              |             |        |
| If the employ   | ment number inside<br>State for the base p  |  |   | •   | · · ·            |             |              |             | number |
| If the employ<br>in New York S  | ment number inside  | eriod (line 2  | 29), <b>stop;</b> y   | ou are not eligit   | ble for the QEZE |             |              |             | number |
| If the employ<br>in New York S<br>Schedule I — Co   | ment number inside<br>State for the base p  | eriod (line 2<br>t <b>new emp</b>  | 29), stop; y  | ou are not eligib   | s)               | E credit fo | r real prope | erty taxes. | number |
| If the employ<br>in New York S<br>Schedule I — Co<br>1 Current year en<br>2 Base year empl  | ment number inside<br>State for the base p<br>mputation of net  | eriod (line 2<br>t <b>new emp</b><br>in the EZs in<br>in which you                                     | 29), <b>stop;</b> y<br><b>bloyment</b><br>n which you<br>u are certifi                        | ou are not eligit<br>(see instruction:<br>u are certified<br>ed                   | ble for the QEZE | E credit fo | r real prope | erty taxes. | number |
| If the employ<br>in New York S<br>Schedule I — Co<br>1 Current year en<br>2 Base year employ<br>3 Net new employ  | ment number inside<br>State for the base p<br>mputation of net<br>nployment number i<br>oyment in the EZs   | eriod (line 2<br>t <b>new emp</b><br>in the EZs in<br>in which you<br>32 from 31)                      | 29), <b>stop;</b> y<br><b>bloyment</b><br>n which you<br>u are certifi                        | ou are not eligit<br>(see instruction)<br>u are certified<br>ed                   | ole for the QEZE | E credit fo | r real prope | erty taxes. | number |
| If the employ<br>in New York S<br>Schedule I — Co<br>1 Current year en<br>2 Base year employ<br>3 Net new employ<br>Schedule J — De                                   | ment number inside<br>State for the base p<br>mputation of net<br>nployment number i<br>oyment in the EZs<br>yment (subtract line 3                                       | eriod (line 2<br>t <b>new emp</b><br>in the EZs in<br>in which you<br>32 from 31)                      | 29), stop; y<br>ployment<br>n which you<br>u are certifi<br>ployment                          | ou are not eligit<br>(see instruction)<br>u are certified<br>ed                   | or               | E credit fo | r real prope | erty taxes. | number |
| If the employ<br>in New York S<br>ichedule I — Co<br>Current year employ<br>Base year employ<br>Net new employ<br>Cichedule J — De<br>Net new employ<br>1 to 10       | ment number inside<br>State for the base p<br>mputation of net<br>nployment number<br>oyment in the EZs<br>ment (subtract line 3<br>evelopment zone<br>ees (from line 33) | eriod (line 2<br>t <b>new emp</b><br>in the EZs in<br>in which you<br>32 from 31)<br>e <b>(DZ) emp</b> | 29), stop; y<br>ployment<br>n which you<br>u are certifi<br>ployment<br>DZ em<br>0.25         | ou are not eligit<br>(see instruction:<br>u are certified<br>ed<br>increase facto | or               | E credit fo | r real prope | erty taxes. | number |
| If the employ<br>in New York S<br>ichedule I — Co<br>Contemporation<br>Base year employ<br>Net new employ<br>ichedule J — De<br>Net new employ<br>1 to 10<br>11 to 49 | ment number inside<br>State for the base p<br>mputation of net<br>opment number i<br>oyment in the EZs<br>ment (subtract line 3<br>evelopment zone<br>ees (from line 33)  | eriod (line 2<br>t <b>new emp</b><br>in the EZs in<br>in which you<br>32 from 31)                      | 29), stop; y<br>ployment<br>n which you<br>u are certifi<br>ployment<br>DZ em<br>0.25<br>0.50 | ou are not eligit<br>(see instruction:<br>u are certified<br>ed<br>increase facto | or               | E credit fo | r real prope | erty taxes. | number |

# Schedule K — Employee information (see instructions)

Enter name, social security number, employee's zone location, and wage and benefit information for all new employees included in the *Net new employment* number on line 33 upon which this claim is based. Attach additional sheets if necessary.

| A<br>Employee's name   | B<br>Employee's social<br>security number | C<br>Employee's zone<br>location (see instructions) | D<br>Total wages, health ber<br>and retirement benef |     | E<br>Eligible wages, health be<br>and retirement bene<br>included in column<br>(enter no more than \$4<br>per employee) | fits<br>D |
|--|---|---|--|-----|---|-----------|
|  |   |   |  |     |   |           |
|  |   |   |  |     |   |           |
|  |   |   |  |     |   |           |
| Column E total from additional she   | et(s) attached, if any                    |   |  |     |   |           |
| <b>35</b> Total eligible wages, health ben amounts from additional sheets) | •   |   |  | 35. |   |           |



### Schedule L — Computation of credit for QEZEs certified in development zones (DZs) (see instructions)

| 36 | Eligible wages, health benefits, and retirement benefits from line 35                                   | 36. |     |
|----|---|-----|-----|
| 37 | 25% (.25) factor  |     | .25 |
| 38 | DZ employment increase factor from line 34  | 38. |     |
| 39 | QEZE credit for real property taxes for QEZEs certified in DZs (multiply line 36 by line 37 by line 38) | 39. |     |

# Schedule M — Computation of QEZE credit for real property taxes for manufacturers and QEZEs certified only in an investment zone (IZ) (see instructions)

| 40 | Eligible wages, health benefits, and retirement benefits from line 35 |     |     |
|----|---|-----|-----|
| 41 | 25% (.25) factor  | 41. | .25 |
| 42 | QEZE credit for real property taxes (multiply line 40 by line 41)     | 42. |     |

# Schedule N — QEZE credit for real property taxes (see instructions)

|    |  |     | <br>_ |  |
|----|--|-----|-------|--|
| 43 | QEZE credit from line 39 or line 42  | 43. | •     |  |
| 44 | Capital investment amount (from line 55 or line 58)  | 44. | •     |  |
| 45 | Enter the greater of line 43 or line 44  | 45. | •     |  |
| 46 | Eligible real property taxes (attach documentation)  | 46. | •     |  |
|    |  | 47. | •     |  |
| 48 | Recapture of QEZE credit for real property taxes (see instructions)                                | 48. | •     |  |
| 49 | Net recapture of QEZE credit for real property taxes (Subtract line 47 from line 48. If line 47 is |     |       |  |
|    | greater than line 48, skip line 49 and continue on line 50, see instructions.)                     | 49. | •     |  |
| 50 | QEZE credit for real property taxes after recapture (subtract line 48 from line 47)                | 50. | .[    |  |
| 51 | Partners, shareholders, and beneficiaries, see instructions  | 51. | •     |  |
| 52 | Total QEZE credit for real property taxes (add lines 50 and 51)                                    | 52. | •     |  |
|    |  |     |       |  |

Fiduciaries — Include the line 52 amount on the *Total* line of Schedule O, column C.

Partnerships — Enter the line 52 amount and code 166 on Form IT-204, line 147.

All others — Enter the line 52 amount and code 166 on Form IT-201-ATT, line 12, or Form IT-203-ATT, line 12.

# Schedule O — Beneficiary's and fiduciary's share of credit

| A<br>Beneficiary's name<br>(same as on Form IT-205, Schedule C) | B<br>Identifying number | <b>C</b><br>Share of QEZE credit for<br>real property taxes | D<br>Share of recapture of QEZE<br>credit for real property taxes |  |  |
|---|-------------------------|---|---|--|--|
| Total   |                         |   |   |  |  |
|   |                         |   |   |  |  |
|   |                         |   | ·•  |  |  |
| Fiduciary   |                         | •   | •   |  |  |



# Schedule P — Related entities

List the names and employer identification numbers of any related business entities. Attach additional sheets if necessary. Use the definition of related persons in the instructions to determine if an entity is related.

| Name | Employer identification number |
|------|--------------------------------|
|      |                                |
|      |                                |
|      |                                |
|      |                                |
|      |                                |
|      |                                |
|      |                                |

# Schedule Q — Capital investment amount (complete only Part 1 or Part 2)

# Part 1 — Capital investment amount for QEZEs certified in DZs (see instructions)

| A<br>Address of property             | B<br>Name of zone<br><i>(if applicable)</i> | CDCost or other<br>basis (see instructions)Multiply column C<br>by 10% (0.1) |  |  |  |  |  | E<br>Percentage of physical<br>occupancy and use<br>(see instructions) | F<br>Multiply column D<br>by column E |
|--------------------------------------|---|--|--|--|--|--|--|--|---------------------------------------|
|                                      |   |  |  |  |  |  |  |  |                                       |
|                                      |   |  |  |  |  |  |  |  |                                       |
|                                      |   |  |  |  |  |  |  |  |                                       |
|                                      |   |  |  |  |  |  |  |  |                                       |
|                                      |   |  |  |  |  |  |  |  |                                       |
| 53 Total (add amounts from column    | 53.   |  |  |  |  |  |  |  |                                       |
| 54 Enter column F total from ad      |   |  |  |  |  |  |  |  |                                       |
| 55 Total (add lines 53 and 54; enter | 55.   |  |  |  |  |  |  |  |                                       |

# Part 2 — Capital investment amount for QEZEs certified only in IZs or for manufacturers (see instructions)

|    | A<br>Address of property                                 | B<br>Name of zone<br>(if applicable) | C<br>Cost or other<br>basis | D<br>Multiply column C<br>by 10% (0.1) | E<br>Percentage of physical<br>occupancy and use | F<br>Percent c<br>column C (<br>instruction | see | G<br>Multiply column D<br>by the greater of<br>column E or F |  |
|----|--|--------------------------------------|-----------------------------|--|--|---|-----|--|--|
|    |  |                                      |                             |  |  |   |     |  |  |
|    |  |                                      |                             |  |  |   |     |  |  |
|    |  |                                      |                             |  |  |   |     |  |  |
|    |  |                                      |                             |  |  |   |     |  |  |
|    |  |                                      |                             |  |  |   |     |  |  |
|    |  |                                      |                             |  |  |   |     |  |  |
| 56 | 6 Total (add column G amounts)                           |                                      |                             |  |  |   |     |  |  |
| 57 |  |                                      |                             |  |  |   |     |  |  |
| 58 | 8 Total (add lines 56 and 57; enter here and on line 44) |                                      |                             |  |  |   |     |  |  |

