Please Note: Recent legislation requires all taxpayers filing this form to attach a retention certificate issued by Empire State Development.

See TSB-M-09(5)C, (4)I, Legislative Changes to the Empire Zones Program, for details.

Form IT-603, Claim for EZ Investment Tax Credit and EZ Employment Incentive Credit, continues below.

# Claim for EZ Investment Tax Credit and EZ Employment Incentive Credit 

Tax Law - Sections 606(j) and 606(j-1)

2008 calendar-year filers, mark an $X$ in the box: Other filers must enter tax period: beginning $\square$ ending

File this claim with your personal income tax return, Form IT-201, IT-203, IT-204, or IT-205.
See Form IT-603-I, Instructions for Form IT-603, for assistance in completing this form.

| Name(s) as shown on your return |
| :--- |
| Name of empire zone (EZ) |

Taxpayer identification number
$\square$

## Schedule A — EZ investment tax credit (EZ-ITC)

## Property located in EZ on which EZ-ITC is claimed

| A Itemized description of property | B <br> Principal use | C Date acquired | D <br> Life (years) | E Investment credit base |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Column E total ................ |  |  |

1 Total EZ-ITC for personal income tax (multiply the total of column E by 8\% (.08); see instructions)

1. $\square$ . $\square$

## Schedule B — EZ employment incentive credit (EZ-EIC)

Part 1 - Eligibility for EZ-EIC (employment information)

|  | A | B | C | D | E | F | G | H |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A Information in conjunction with Schedule B, Part 2, line A | Year | March 31 | June 30 | September 30 | December 31 | $\begin{gathered} \text { Total } \\ \text { columns } \\ (B+C+D+E) \end{gathered}$ | Average (see instructions) | Percent * |
| Number of employees in EZ for period covered by this claim |  |  |  |  |  |  |  |  |
| Number of employees in EZ for employment base year |  |  |  |  |  |  |  | \% |
| $B$ Information in conjunction with Schedule B, Part 2, line B | Year | March 31 | June 30 | September 30 | December 31 | $\begin{gathered} \text { Total } \\ \text { columns } \\ (B+C+D+E) \end{gathered}$ | Average (see instructions) | Percent * |
| Number of employees in EZ for period covered by this claim |  |  |  |  |  |  |  |  |
| Number of employees in EZ for employment base year |  |  |  |  |  |  |  | \% |
| C Information in conjunction with Schedule B, Part 2, line C | Year | March 31 | June 30 | September 30 | December 31 | $\begin{gathered} \text { Total } \\ \text { columns } \\ (B+C+D+E) \end{gathered}$ | Average (see instructions) | Percent * |
| Number of employees in EZ for period covered by this claim |  |  |  |  |  |  |  |  |
| Number of employees in EZ for employment base year |  |  |  |  |  |  |  | \% |

[^0](continued on page 2)

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## Schedule B — EZ employment incentive credit (EZ-EIC) (continued)

2 Enter amount from line 1 on page 1
2. $\square$ .$\square$

## Part 2 - Computation of EZ-EIC



## Schedule C - Partnership, S corporation, and estate and trust information

If you were a partner in a partnership, a shareholder of a New York S corporation, or a beneficiary of an estate or trust and received a share of the EZ-ITC or EZ-EIC from that entity, complete the following information for each partnership, S corporation, or estate or trust. For Type, enter P for partnership, S for S corporation, or ET for estate or trust.


Schedule D - Partner's, shareholder's, or beneficiary's share of credit

| Partner | 5 | Enter your share of the credit from your partnership (see instructions) | 5. |  |
| :---: | :---: | :---: | :---: | :---: |
| S corporation shareholder | 6 | Enter your share of the credit from your S corporation (see instructions) | 6. |  |
| Beneficiary | 7 | Enter your share of the credit from the fiduciary's <br> Form IT-603, Schedule E, column C. | 7. |  |
|  | 8 | Total (add lines 5, 6, and 7) | 8. |  |

Fiduciaries (that are also a partner, a shareholder, or beneficiary of another entity) - Include
the line 8 total in the Totals line of Schedule E, column C on page 3.
All others - Enter the line 8 amount on Schedule G, line 15.

Schedule E - Beneficiary's and fiduciary's share of credit and recapture of credit

| A <br> Beneficiary's name (same as on Form IT-205, Schedule C) | B Identifying number | C <br> Share of EZ-ITC and EZ-EIC | D <br> Share of recapture of credit |
| :---: | :---: | :---: | :---: |
| Totals |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Fiduciary |  |  |  |

Schedule F - Computation of recapture of EZ-ITC and EZ-EIC

| A <br> Description of property | $\begin{gathered} \hline \mathbf{B} \\ \text { Date } \\ \text { acquired } \end{gathered}$ | C <br> Date property ceased to qualify | $\left.\left\lvert\, \begin{array}{c} \mathbf{D} \\ \text { Life } \\ (\text { months } \end{array}\right.\right)$ | E Unused life (months) | $\begin{gathered} \mathbf{F} \\ \substack{\text { Percentage } \\ (E \div D)} \end{gathered}$ | GEZ-ITCallowed(see instructions) |  | $\underset{\substack{\text { H } \\ \text { Recaptured EZ-ITC } \\(F \times G)}}{\text { and }}$ | I <br> Recaptured EZ-EIC (see instructions) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| 9 Recaptured EZ-ITC | dd colum | amounts) |  |  |  |  | 9. |  |  |
| 10 Recaptured EZ-EIC | (add colum | amounts). |  |  |  |  | 10. |  |  |
| 11 Additional recaptur | (see instru |  |  |  |  |  | 11. |  |  |

12 Partners in a partnership, shareholders of an S corporation, or beneficiaries of an estate or trust, enter your share of addback of the EZ-ITC and EZ-EIC (see instructions). 12.

13 Add lines 9 through 12
13.

Fiduciaries - Include the line 13 amount in the Totals line of Schedule E, column D.
All others - Enter the line 13 amount on line 20.

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## Schedule H - Computation of refundable portion of EZ-ITC and EZ-EIC

23 EZ-ITC and EZ-EIC for tax year 2008 from line 17

$\square$
24 Personal income tax from Form IT-201, line 39, and Form IT-230-I, Worksheet A, line 1; or Form IT-203, line 46, and Form IT-203-ATT, line 18; or Form IT-205, line 8 if a resident or line 9 if a nonresident or part-year resident


25 Enter all credits that you choose to apply against your tax except refundable credits and the EZ-ITC and EZ-EIC (see the instructions for Form IT-201-ATT, Part 1 or Form IT-203-ATT, Part 1)......
26 Subtract line 25 from line 24


27 Unused EZ-ITC and EZ-EIC available to be carried forward to future years (subtract line 26 from line 23)
28 Refundable EZ-ITC and EZ-EIC (see instructions)


Individuals - Enter the line 28 amount and code 163 on Form IT-201-ATT, line 12, or Form IT-203-ATT, line 12.
Fiduciaries - Include the line 28 amount on Form IT-205, line 33.
29 Unused EZ-ITC and EZ-EIC after refundable portion (subtract line 28 from line 21); this is the amount of your EZ-ITC and EZ-EIC that is not refundable

## 29.

$\square$
Individuals - Enter the line 29 amount and code 163 on Form IT-201-ATT, line 6, or Form IT-203-ATT, line 7.
Fiduciaries - Include the line 29 amount on Form IT-205, line 10.


[^0]:    * Divide the average number of employees covered by this claim by the average number of employees in base year (column G ).

