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New York State Department of Taxation and Finance

## Claim for Security Officer Training Tax Credit

Tax Law - Sections 26, 187-n, 210.37, 1456(t), and 1511(x)

All filers must enter tax period:

beginning

Legal name of corporation

Employer identification number (EIN)

ending

File this form with Form CT-3, CT-3-A, CT-3-S, CT-32, CT-32-A, CT-32-S, CT-33, CT-33-A, CT-33-NL, CT-183, CT-185, CT-186, CT-186-E, CT-186-EZ, or CT-186-P.

## **Part 1 — Computation of security officer training tax credit** (see instructions)

Α	Enter the calendar year shown on the certificate of tax credit from the New York State Office of Homeland Security	A.	
1	Security officer training tax credit (enter amount from the certificate of tax credit from the New York State		
	Office of Homeland Security and attach a copy of the certificate)●	1.	
2	Security officer training tax credit from partnership(s) (from line 13; see instructions)	2.	

Part 2 — Computation of security officer training tax credit used (see instructions; New York S corporations do not complete this part)

4	Tax due before credits (see instructions)	•	4.	
5	Tax credits claimed before the security officer training tax credit (see instructions)	•	5.	
6	Tax after application of credits (subtract line 5 from line 4)		6.	
7	Tax limitation (see instructions)		7.	
8	Limitation on security officer training tax credit (subtract line 7 from line 6; if line 7 is more than line 6, enter 0) •		8.	
9	Security officer training tax credit used for this period (enter the amount on line 3 or line 8, whichever			
	is less; transfer to the appropriate tax return)	·L	9.	
10	Unused security officer training tax credit (subtract line 9 from line 3)	1	10.	
11	Amount of security officer training tax credit to be refunded (limited to the amount on line 10; enter			
	here and on your tax return)		11.	
12	Amount of security officer training tax credit to be applied as an overpayment to next period			
	(subtract line 11 from line 10; enter here and on your tax return)●	1	12.	

## Part 3 — Partnership information (see instructions)

Name of partnership	Partnership's EIN	Credit amount allocated
		•
		•
		•
		•
		•
		•
		•
		•
		•
Total from additional sheet(s), if any		•
13 Total credit amount allocated from partnership(s) (enter here and on line	2)	3.

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