



Claim for EZ Investment Tax Credit and EZ Employment Incentive Credit for the Financial Services Industry

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

2009 calendar-year filers, mark an X in the box: []

Other filers enter tax period:

beginning [] and ending []

File this claim with your Form IT-201, IT-203, IT-204, or IT-205.

Attach a copy of the Certificate of Eligibility and Empire Zone Retention Certificate.

Name(s) as shown on the front page of your return
Taxpayer identification number
Name of empire zone (EZ)

Schedule A – Eligibility and investment tax credit (see Form IT-605-I, Instructions for Form IT-605, for assistance)

Important: If this is your first tax year, do not complete Schedule A, Parts 1, 2, and 3. Begin with Part 4 on page 2.

Part 1 – 80% current-year test (see instructions) Computation of percentage of administrative and support employees in New York State for the current tax year:

Table with columns: Current tax year, March 31, June 30, September 30, December 31, Total. Rows include: Number of administrative and support employees in New York State, 1a Average number of administrative and support employees in New York State, Number of administrative and support employees everywhere, 1b Average number of administrative and support employees everywhere, 2 Percentage of administrative and support employees in New York State.

Part 2 – 95% three-year back-office test (see instructions) Computation of average number of administrative and support employees in New York State for the current tax year and 36-month test period:

Table with columns: Current tax year, March 31, June 30, September 30, December 31, Total. Rows include: Number of administrative and support employees in New York State, 3a Average number of administrative and support employees in New York State for current tax year, Number of administrative and support employees in New York State during 36-month test period (A, B, C), D. Total number of administrative and support employees in New York State for 36-month test period, 3b Average number of administrative and support employees in New York State for 36-month test period, 4 Percentage of employment for administrative and support employees in New York State.

Part 3 – 90% end-of-year test (see instructions) Computation of percentage of employees in New York State for the current tax year:

Table with columns: Current tax year, March 31, June 30, September 30, December 31, Total. Rows include: Number of employees in New York State, 5a Average number of employees in New York State during the current tax year, 5b Number of employees in New York State on the last day of your first tax year in which you were subject to tax in New York State, 6 Percentage of employees in New York State for the current tax year.

If your percentage of employment qualifies on either line 2 (80% current-year test), line 4 (95% three-year back-office test), or line 6 (90% end-of-year test), continue with Schedule A, Part 4, on page 2.

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Part 4 – EZ investment tax credit (EZ-ITC) (see instructions)

Property located in EZ on which EZ-ITC is claimed (attach additional sheets if necessary)

| A | B | C | D | E |
|--|---------------|---------------|--------------|---------------------|
| Itemized description of property | Principal use | Date acquired | Life (years) | Cost or other basis |
| | | | | |
| | | | | |
| | | | | |
| Total column E (include amounts from attached sheets, if any) | | | | |
| 7 EZ-ITC for personal income tax (multiply the total of column E by 8% (0.08)) | | | | 7. |

Fiduciaries – Include the line 7 amount in the *Total* line of Schedule E, column C.
All others – Enter the line 7 amount on line 18.

Schedule B – EZ employment incentive credit (EZ-EIC) (attach additional sheets if necessary)

Part 1 – Employment information required to determine eligibility for EZ-EIC

| | 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 | Total columns B + C + D + E | 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 | Total columns B + C + D + E | 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 | Total columns B + C + D + E | Average (see instructions) | Percent* |
| Number of employees in EZ for period covered by this claim | | | | | | | | |
| Number of employees in EZ for employment base year | | | | | | | | |

* Divide the average number of employees covered by this claim by the average number of employees in base year (column G).

Part 2 – Computation of EZ-EIC

| A | B | C |
|--|---------------------------|--|
| Tax year in which EZ-ITC was allowed | Amount of original EZ-ITC | EZ-EIC (multiply column B by 30% (.30)) |
| a | | |
| b | | |
| c | | |
| 8 Total of column C (include amounts from attached sheets, if any) | | 8. |

Fiduciaries – Include the line 8 amount in the *Total* line of Schedule E, column C.
All others – Enter the line 8 amount on line 19.

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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.

| Name | Type | Employer identification number (EIN) |
|------|------|--------------------------------------|
| | | <input type="text"/> |
| | | <input type="text"/> |
| | | <input type="text"/> |
| | | <input type="text"/> |
| | | <input type="text"/> |
| | | <input type="text"/> |

Schedule D – Partner’s, shareholder’s, or beneficiary’s share of credit

| | | | |
|----------------------------------|-----------|--|------------|
| Partner | 9 | Enter your share of the credit from your partnership (<i>see instructions</i>) | 9. |
| S corporation shareholder | 10 | Enter your share of the credit from your S corporation (<i>see instructions</i>) | 10. |
| Beneficiary | 11 | Enter your share of the credit from the fiduciary’s Form IT-605, Schedule E, column C | 11. |
| | 12 | Totals (<i>add lines 9, 10, and 11</i>) | 12. |

Fiduciaries – Include the line 12 amount in the *Total* line of Schedule E, column C.

All others – Enter the line 12 amount on line 20.

Schedule E – Beneficiary’s and fiduciary’s share of credit and recapture of credit

| A Beneficiary’s name (<i>same as on Form IT-205, Schedule C</i>) | B Identifying number | C Share of EZ-ITC and EZ-EIC | D Share of recapture credit |
|--|--------------------------------|--|---------------------------------------|
| Total | | | |
| | <input type="text"/> | | |
| | <input type="text"/> | | |
| Fiduciary | <input type="text"/> | | |

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Schedule F – Computation of recapture of EZ-ITC and EZ-EIC (see instructions)

| A | B | C | D | E | F | G | H | I | |
|--|---------------|---------------------------------|---------------|----------------------|--------------------|-----------------------------------|---------------------------|--------------------------------------|--|
| Description of property | Date acquired | Date property ceased to qualify | Life (months) | Unused life (months) | Percentage (E ÷ D) | EZ-ITC allowed (see instructions) | Recaptured EZ-ITC (F x G) | Recaptured EZ-EIC (see instructions) | |
| | | | | | | | | | |
| 13 Recaptured EZ-ITC (add column H amounts) | | | | | | | 13. | | |
| 14 Recaptured EZ-EIC (add column I amounts) | | | | | | | 14. | | |
| 15 Augmented recapture amount (see instructions) | | | | | | | 15. | | |
| 16 Partner in a partnership, shareholder of an S corporation, or beneficiary of an estate or trust: enter your share of addback of the EZ-ITC and EZ-EIC (see instructions) | | | | | | | 16. | | |
| 17 Add lines 13 through 16. Enter total here | | | | | | | 17. | | |

Fiduciaries – Include the line 17 amount in the *Total* line of Schedule E, column D.
All others – Enter the line 17 amount on line 25.

Schedule G – Computation of available EZ-ITC and EZ-EIC allowed for the current tax year or recapture amount

Individuals and partnerships

18 Enter the amount from line 7

19 Enter the amount from line 8

Partners, S corporation shareholders, and beneficiaries

20 Enter the amount from line 12

Fiduciaries

21 Enter the amount from Schedule E, *Fiduciary* line, column C

22 EZ-ITC and EZ-EIC computed for the current tax year (add lines 18 through 21)

23 Enter the available carryover of unused EZ-ITC or EZ-EIC from preceding period(s)

24 Total EZ-ITC and EZ-EIC (add lines 22 and 23)

25 Total recapture of all investment tax credits taken in previous period (fiduciaries: enter the amount from the fiduciary line of Schedule E, column D; all others: enter the amount from line 17)

26 Net EZ-ITC (subtract line 25 from line 24 and enter here; if line 25 is greater than line 24, do not enter an amount on line 26 – go to line 27; see instructions)

27 Net EZ-ITC recapture amount (subtract line 24 from line 25 and enter here; see instructions)

Schedule H – Computation of refundable portion of EZ-ITC and EZ-EIC or carryover

28 EZ-ITC and EZ-EIC for tax year 2009 from line 22

29 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

30 All credit(s) that you choose to apply against your tax except the EZ-ITC and EZ-EIC (see the instructions for Form IT-201-ATT or Form IT-203-ATT)

31 Subtract line 30 from line 29

32 Unused EZ-ITC and EZ-EIC available to be carried forward (subtract line 31 from line 28)

33 Refundable EZ-ITC and EZ-EIC (see instructions)

34 Unused EZ-ITC and EZ-EIC after refundable portion (see instructions)

