

New York State Department of Taxation and Finance

Claim for Environmental Remediation Insurance Credit

Tax Law - Sections 23 and 606(ff)

Calendar-year filers, mark an X in the box:	
Other filers enter tax period:	

beginning

and ending

IT-613

File a separate Form IT-613 with your personal income tax return, Form IT-201,

IT-203, IT-204, or IT-205 for each Certificate of Completion (CoC). Name(s) as shown on return

Identifying number as shown on return

Schedule A – Brownfield site identifying information (see instructions, Form IT-613-I)

A Enter the date of execution of the Brownfield Cleanup Agreement (BCA) for the brownfield site for which you are claiming the credit (mm-dd-yyyy)...... A

B Enter the following information as listed on the CoC issued by the Department of Environmental Conservation (DEC) for the qualified site (see instructions). Submit a copy of the CoC. Also submit a

copy of the certification form for the environmental remediation insurance tax credit completed by the insurer.

Site name	Site location					
	Municipality	County				
DEC region	Division of Environmental Remediation (DEF	R) site number Date CoC was issued				
C Mark an X in the box if you received notification from the Department of State that the qualified site is located in a Brownfield Opportunity Area						
Schedule B – Individuals (including sole proprietors), partnerships, and fiduciaries						

1 Qualified environmental remediation insurance premiums paid (see instructions)	1	.00
2 Multiply line 1 by 50% (.50)	2	.00
3 Enter the lesser of line 2 or \$30,000	3	.00

Individuals and partnerships: Enter the line 3 amount on line 8.

Fiduciaries: Include the line 3 amount in the Total line of Schedule E, column C.

Schedule C – Partnership, S corporation, estate, and trust information (see instructions)

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 environmental remediation insurance credit from that entity, complete the following information for each partnership, New York S corporation, estate, or trust. For Type, enter P for partnership, S for S corporation, or ET for estate or trust.

Name	Туре	Employer ID number

Schedule D – Partner's, shareholder's, or beneficiary's share of credit (see instructions)

		· · · · · · · · · · · · · · · · · · ·	-/	
Partner 4 Enter your share of the credit from your partnership (see instructions)		4	.00	
S corporation				
shareholder	5	Enter your share of the credit from your S corporation (see instructions)	5	.00
Demeficience	6	Enter your share of the credit from the fiduciary's		
Beneficiary		Form IT-613, Schedule E, column C	6	.00
	7	Total (add lines 4, 5, and 6)	7	.00

Fiduciaries: Include the line 7 amount in the Total line of Schedule E, column C. All others: Enter the line 7 amount on line 9.



Schedule E – Beneficiary's and fiduciary's share of credit and recapture of credit (see instructions)

B	C	D
Identifving number	Share of environmental	
		Share of recapture of credit
	00	00
	.00	.00
	.00	.00
	.00	.00
		.00
	B Identifying number	remediation insurance credit

Schedule F – Computation of credit (see instructions)				
Individuals and partnerships 8 Enter the amount from line 3			8	.00
Partners, S corporation				
shareholders, beneficiaries	9	Enter the amount from line 7	9	.00
Fiduciaries	10	Enter the amount from Schedule E, column C, Fiduciary line	10	.00
11 Total environmental remediation insurance credit				
		(see instructions)	11	.00

Schedule G - Summary of recapture of environmental remediation insurance credit

Fiduciaries: Include the line 12 amount on the *Total* line of Schedule E, column D and continue with line 14.All others: Continue with line 13.

13	Partners in a partnership, shareholders of an S corporation, and beneficiaries of an estate or trust:				
	Enter your share of recapture of the environmental remediation insurance credit (see instructions)	13	.00		
14	Fiduciaries: Enter amount from Schedule E, column D, <i>Fiduciary</i> line	14	.00		
15	Recapture amount (add lines 12, 13, and 14; fiduciaries, see instructions)	15	.00		

.00

Individuals: Enter the line 15 amount and code 173 on Form IT-201-ATT, line 20, or Form IT-203-ATT, line 19.Partnerships: Enter the line 15 amount and code 173 on Form IT-204, line 148.

Fiduciaries: Include the line 15 amount on Form IT-205, line 12.

