NEW YORK STATE 2023

Department of Taxation and Finance

Claim for Security Officer Training Tax Credit

CT-631

Tax Law – Article 1, Section 26; Article 9, Section 187-n; Article 9-A, Section 210-B.21; and Article 33, Section 1511(x)

All filers must enter tax period:

beginning _____ ending _____

Legal name of corporation	Employer identification number (EIN)

File this form with Form CT-3, CT-3-A, CT-3-S, CT-33, CT-33-A, CT-33-NL, CT-183, CT-184, CT-186, CT-186-E, or CT-186-P.

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

A Enter the calendar year shown on the certificate of tax credit from the New York State Division of Homeland Security and Emergency Services (DHSES)	**A**	
1 Security officer training tax credit *(enter amount from the certificate of tax credit from the New York State DHSES and attach a copy of the certificate)*	**1**	
2 Security officer training tax credit from partnership(s) *(from line 13; see instructions)*	**2**	
3 Total security officer training tax credit *(add lines 1 and 2)*	**3**	

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 *(see instructions)*	**9**	
10 Unused security officer training tax credit *(subtract line 9 from line 3)*	**10**	
11 Amount of security officer training tax credit to be refunded *(limited to the amount on line 10; see instructions)*	**11**	
12 Amount of security officer training tax credit to be applied as an overpayment to next period *(subtract line 11 from line 10; see instructions)*	**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)*	**13**	

B If you are claiming this credit as a corporate partner, mark an ***X*** in the box ☐

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