

Department of Taxation and Finance

START-UP NY Telecommunication



Calendar-year filers, mark an X in the box:

Services Excise Tax Credit Tax Law – Sections 39 and 606(yy)

All other filers er	ter tax period: beginning ending				
Submit this form with Form IT-201, IT-203, IT-204, or IT-205.					
Name(s) as shown on return	Identifying number as shown on return				
All filers must complete line A.					
A Are you claiming a credit as an individual (sole proprietor), partr earned the credit (not as a partner, shareholder, or beneficiary, the appropriate box; see instructions)	receiving a share of the credit)? (mark an X in				
If Yes, complete lines B and C and Schedules A and D. Fiduciary also complete Schedule C.	If <i>No</i> , complete lines B and C and Schedules B and D. Fiduciary also complete Schedule C.				
B Certificate number from Form DTF-74, <i>Certificate of Eligibility,</i> is START-UP NY business <i>(see instructions)</i>					
C Year of START-UP NY business tax benefit period (enter a number	er from 1 to 10; see instructions) C				
Schedule A: Individual (including sole proprietor), partn	ership, and estate or trust				
1 Telecommunication services excise tax paid (see instructions)					
Fiduciary: Include the line 1 amount on line 3. All others: Enter the line 1 amount on line 6.					
Schedule B: Partnership, New York S corporation, and e	state or trust information (see instructions)				
For <i>Type</i> , enter P for partnership, S for S corporation, or ET for est	ate or trust (submit additional forms if necessary).				

A Name of entity	В Туре	C Employer identification number	D Certificate number	E Year of business tax benefit period	F Share of credit
					.00
					.00
					.00
					.00
Total column F amounts from additional forms, if any					.00
2 Total (add column F amounts)				2	.00

Fiduciary: Include the line 2 amount on line 3. **All others:** Enter the line 2 amount on line 7.



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Schedule C: Beneficiary's and fiduciary's share of credit (see instructions)

3 Total (fiduciaries: add lines 1 and 2)		3 .00
A Beneficiary's name <i>(same as on Form IT-205, Schedule C)</i>	B Identifying number	C Share of credit
		.00
		.00
		.00
		.00
Total column C amounts from additional forms, if any	00	
4 Share of credit allocated to beneficiaries (add column C amounts)		4 .00
5 Fiduciary's share of credit (subtract line 4 from line 3; enter the result here an	nd on line 8)	5 .00

Schedule D: Calculation of credit (see instructions)

Individual and partnership	6	Enter the amount from line 1	6	.00
Partner, S corporation shareholder, beneficiary	7	Enter the amount from line 2	7	.00
Fiduciary	8	Enter the amount from line 5	8	.00
	9	Total credit (add lines 6, 7, and 8; see instructions)	9	.00

