

Claim for Excelsior Jobs Program Tax Credit Tax Law - Sections 31 and 606(qq)

		Calendar-	-year fil	ers, mark an X in the b	oox:
		Other filers enter tax p	eriod:		
		beginning		and ending	
Submit this form with Form IT-201, You must also submit a copy of the		03, IT-204, or IT-205. ficate(s) of tax credit issued by Empire State Development ((ESD).		
Name(s) as shown on return			Idontif	fying number as shown o	on roturn
Name(s) as shown on return			luentii	ying number as snown c	ni retuiri
A Excelsior Jobs Program project	t nur	mber (see instructions)		A	
B Year of eligibility (enter a number	r fron	n 1 to 10; see instructions)			В
B1 Green CHIPS projects only: indic	ate th	ne phase from your certificate of tax credit issued by ESD <i>(see ins</i>	str.)	Phase 1 Pha	se 2
Schedule A – Credit compo					
Part 1 – Excelsior jobs tax cre		·			
Individual (including sole					
proprietor), partnership, fiduciary	1	Enter your excelsior jobs tax credit component	1		.00
Partner	2	Enter your share of the excelsior jobs tax credit			
	_	component from your partnership(s)	2		. 00
S corporation shareholder	3	Enter your share of the excelsior jobs tax credit component from your S corporation(s)	3		.00
Beneficiary	4	Enter your share of the excelsior jobs tax credit			
	5	component from the estate(s) or trust(s)	4		.00
		(add lines 1 through 4; see instructions)	5		.00
Part 2 – Excelsior investment	tax	credit component (see instructions)			
Individual (including sole					
proprietor), partnership, fiduciary	-	, ,	6		.00
Partner	7	Enter your share of the excelsior investment tax credit component from your partnership(s)	7		.00
S corporation shareholder	8	Enter your share of the excelsior investment tax credit component from your S corporation(s)	8		.00
	9		_ 0		
Beneficiary		component from the estate(s) or trust(s)	9		.00
	10	Total excelsior investment tax credit component	40		
		(add lines 6 through 9; see instructions)	10		.00
Part 3 – Excelsior research an	d d	evelopment tax credit component (see instructions)			
Individual (including sole	11	,			
proprietor), partnership, fiduciary	 	credit component	11		.00
Partner	12	Enter your share of the excelsior research and development tax credit component from your partnership(s)	12		.00
S corporation shareholder	13		46		
	14	tax credit component from your S corporation(s) Enter your share of the excelsior research and development	13		.00
Beneficiary	14	tax credit component from the estate(s) or trust(s)	14		.00
	15	· ·			
	1	component (add lines 11 through 14; see instructions)	15		.00

Individual (including sole								
proprietor), partnership, fiduciary	16	-	r excelsior real prope r share of the excelsi		•	16		.(
Partner	17		nent from your partne			17		.(
S corporation shareholder	18		r share of the excelsi nent from your S corp			18		.(
Beneficiary	19	Enter you compor	r share of the excelsi nent from the estate(s	or real property t s) or trust(s)	ax credit	19		.(
	20		elsior real property tax s 16 through 19; see ins			20		.(
Part 5 – Excelsior child care s	servi	ces tax c	redit component ((see instructions)				
Individual (including sole				, 000				
proprietor), partnership, fiduciary	+	-	excelsior child care ser		•	21		.(
Partner	22		r share of the excelsi omponent from your			22		.(
S corporation shareholder	23		r share of the excelsi omponent from your			23		.(
Beneficiary	24		r share of the excelsi omponent from the e			24		.(
	25		elsior child care servions 21 through 24; see ins		•	25		.(
26 Excelsior jobs program tax cre Fiduciaries: Complete Schedu Individuals (including sole program)	ıle C.					26 es: Er	nter the line	.0 26 amount on line 3
Individuals (including sole possible by the sole of th	s co	etors), particorporation	ners, S corporation slopn, estate, and troof a New York S corpor	nareholders, and rust informativation, or a beneficinformation for ea	beneficiari	es: Er	ctions)	26 amount on line 3
Fiduciaries: Complete Schedu Individuals (including sole possible) Schedule B – Partnership, f you were a partner in a partnership	S Co	orporationareholder of that entity, of for S corpor	ners, S corporation slopn, estate, and troof a New York S corpor	nareholders, and rust informativation, or a beneficinformation for ea	beneficiari ion (see i ciary of an e	es: Er	ctions) or trust and lew York S	26 amount on line 3
Fiduciaries: Complete Schedu Individuals (including sole possible of partnership) Schedule B – Partnership, f you were a partner in a partnership the excelsior jobs program tax credit	S Co	etors), particorporation	ners, S corporation slopn, estate, and troof a New York S corpor	nareholders, and rust informativation, or a beneficinformation for ea	beneficiari	es: Er	ctions) or trust and lew York S	26 amount on line 3
Fiduciaries: Complete Schedu Individuals (including sole possible of partnership) Schedule B – Partnership, f you were a partner in a partnership the excelsior jobs program tax credit	S Co	orporationareholder of that entity, of for S corpor	ners, S corporation slopn, estate, and troof a New York S corpor	nareholders, and rust informativation, or a beneficinformation for ea	beneficiari ion (see i ciary of an e	es: Er	ctions) or trust and lew York S	26 amount on line 3
Fiduciaries: Complete Schedu Individuals (including sole proceeding sole procedure B — Partnership, for you were a partner in a partnership he excelsior jobs program tax credit rust. For Type, enter P for partnership	S cc, a sh	orporationareholder of that entity, of for S corpor Name	on, estate, and troof a New York S corpor complete the following ation, or <i>ET</i> for estate	rust information or a beneficinformation for early trust.	beneficiari ion (see i	es: Er	ctions) or trust and ew York S Employ	26 amount on line 3 d received a share of corporation, estate, er ID number
Fiduciaries: Complete Schedula Individuals (including sole proceedings) Schedule B — Partnership, If you were a partner in a partnership he excelsior jobs program tax credit rust. For Type, enter P for partnership for partnership for partnership for partnership for the proceedings of the procedure of	S coo, a sh	prporation areholder of that entity, of for S corpor Name	on, estate, and troof a New York S corpor complete the following ation, or <i>ET</i> for estate	rust information or a beneficinformation for early trust.	beneficiari ion (see i	es: Er	ctions) or trust and ew York S Employ	26 amount on line 3 d received a share o corporation, estate, rer ID number
Fiduciaries: Complete Schedularies: Complete Schedularies: Complete Schedularies (including sole processed in the schedularies). Schedularies: Complete Schedularies (including sole processed in the schedularies). Schedularies: Complete in a partnership, for you were a partner in a partnership, for you were a partner in a partnership he excelsior jobs program tax credit rust. For Type, enter P for partnership for partnership he excelsior jobs tax credit investigation. Schedularies: Complete Schedularies (including sole processed in partnership). Schedularies: Complete Schedularies (including sole processed in partnership).	S CO, a shaffrom p, S f	prporationareholder of that entity, of for S corpor Name	on, estate, and troof a New York S corpor complete the following ation, or <i>ET</i> for estate	rust information or a beneficinformation for early trust.	ion (see and size of the second secon	es: Er	ctions) or trust and lew York S Employ pture of	26 amount on line 3 d received a share o corporation, estate, rer ID number



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

List the beneficiary's name and identifying number here; for each name, complete columns C through G on the corresponding lines below.

Item	A	В
	Beneficiary's name (same as on Form IT-205, Schedule C)	Identifying number
Α		
В		
С		
D		

Item	C Share of excelsior jobs tax credit component	D Share of excelsior investment tax credit component	E Share of excelsior research and development tax credit component	F Share of excelsior real property tax credit component	G Share of excelsior child care services tax credit component	H Share of recapture of credit					
Α	.00	.00	.00	.00	.00	.00					
В	.00	.00	.00	.00	.00	.00					
С	.00	.00	.00	.00	.00	.00					
D	.00	.00	.00	.00	.00	.00					
Total fro	om additional forms, if ar	ıy									
	.00	.00	.00	.00	.00	.00					
28 Tot	28 Total of allocated share to beneficiaries (total columns C through H)										
	.00	.00	.00	.00	.00	.00					
29 Fig	29 Fiduciary's share (subtract line 28 from line 27 for each column)										
	.00	.00	.00	.00	.00	.00					

Schedule D - Computation of credit (see instructions)

Individuals (including sole proprietors), partners, S corporation shareholders,				
beneficiaries	30	Enter the amount from line 26	30	.00
	31	Enter the amount from line 29, column C	31	.00
Fiduciaries	32	Enter the amount from line 29, column D	32	.00
Fiduciaries	33	Enter the amount from line 29, column E	33	.00
	34	Enter the amount from line 29, column F	34	.00
	35	Enter the amount from line 29, column G	35	.00
	36	Total excelsior jobs program tax credit		
		(add lines 30 through 35; see instructions)	36	.00

Schedule E – Summary of recapture of credit (see instructions)

37	Individual's and partnership's recapture of credit	37	.00
38	Beneficiary's share of recapture of credit (see instructions)	38	.00
39	Partner's share of recapture of credit (see instructions)	39	.00
40	S corporation shareholder's share of recapture of credit (see instructions)	40	.00
41	Fiduciaries: enter your share of amount from line 29, column H	41	.00
42	Total (add lines 37 through 41)	42	.00

Individuals (including sole proprietors), partners, S corporation shareholders, and beneficiaries: Enter the line 42 amount and code 607 on Form IT-201-ATT, line 20, or Form IT-203-ATT, line 19.

Fiduciaries: Include the line 42 amount on Form IT-205, line 12.

Partnerships: Enter the line 42 amount and code 607 on Form IT-204, line 148.

