

Department of Taxation and Finance Claim for Earned Income Credit New York State • New York City

Submit this form with Form IT-201 or IT-203.

Nan	Name(s) as shown on return Your social sec						urity number							
1	Did you claim th	ne fede	eral earned income	credit? If No, s	stop; you	do n	not qu	alify fo	or th	nese credits.	1	Yes	No	
2	Is your investme	nt inco	me (see instructions) greater than \$3	3,400? If Ye	es, st	top; y	ou do n	ot d	qualify for these credits	2	Yes	No	
3	Have you alread	Have you already filed your New York State income tax return? If Yes, you must file an amended NYS return						3	Yes	No				
4	Did you claim qualifying children on your federal Schedule EIC? If No , continue with line 5.													
	If Yes, in the spaces below, list up to three of the same children you claimed on federal Schedule EIC							No						
	If you claimed more than three, see instructions.													
					Number of months lived	Full	-time	Perso with	n			Date of birth		
	First name	MI	Last name	Relationship	with you			disabilit	y *	Social security number		(mmddyy)	vy)	
	* Mark an X in these boxes only if you checked Yes in the same box on your federal Schedule EIC (box 4a or 4b).													
5		the IRS figuring your federal earned income credit (EIC) for you? If Yes, complete lines 6 through 9 (also lines 21,												
	23, and 24 if y	ou are	a part-year New Yor	k State resident	, and line 2	8 if y	ou are	a part-	yea	r New York City resident).				
	The Tax Depar	tment	will compute your Ne	ew York State ar	nd, if applic	able,	your l	New Yor	k C	ity earned income				
	credit for you. If No, complete lines 6 through 17 (and lines 18 through 26 if you are a part-year New York State													
	resident). New	York C	City residents must c	omplete the New	w York City	/ ear	ned in	come d	crea	dit Worksheet C on				
	page 3 of Form IT-215-I. Part-year New York City residents must also complete line 28 on the back of this claim form 5 Yes No								No					
									Whole dollars					
6	0	• • •		-				-		m IT-215-I	6		00	
7		,	,	,							7		00	
8	Business incom	e or lo	SS (from your federal	Form 1040 line in	structions, E	Earne	d Incor	ne Credi	it W	orksheet B, lines 1e, 2c, and 3)	8		00	

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10	Amount of federal EIC claimed (from federal Form 1040EZ, line 8a; Form 1040A, line 42a; or Form 1040, line 66a)	10	00
11	New York State earned income credit (NYS EIC) rate 30% (.30)	11	.30
12	Tentative NYS EIC (multiply line 10 by line 11; see instructions)	12	00

Complete Worksheet B on the back page before continuing.

13 14		13 14	00				
15	Enter the smaller of line 13 or line 14	15		00			
16	Allowable New York State earned income credit (subtract line 15 from line 12; see instructions)				1	00	
17	If your New York State filing status is ③, Married filing separate return, complete line 17. The NYS EIC on						
	line 16 above can be divided between spouses in any manner you wish. Enter on li						
	of NYS EIC from line 16 you are claiming, and also enter your joint federal adjusted	17		00			
	Federal adjusted gross income (from federal Form 1040EZ, line 4;						
	Form 1040A, line 22; or Form 1040, line 38)	[00				



Par	t-year New York State resident earned income credit							
Lines 18 through 26 apply only to part-year New York State residents claiming the New York State earned income credit.								
18	Enter your New York State earned income credit (from line 16 or line 17)	18	00					
19	Enter the amount from Form IT-203, line 42	19	00					
	 If line 19 is equal to or more than line 18, stop. You do not have excess New York State earned income cre If line 19 is less than line 18, continue on line 20 below. 	dit.						
20	Excess New York State earned income credit (subtract line 19 from line 18)	20	00					
21	Enter the amount from Form IT-203-ATT, line 31 (If you do not have to file Form IT-203-ATT, leave blank and continue on line 22 below.)	21	00					
	- If Form IT-215, line 21, is equal to or more than Form IT-215, line 20, stop. Do not continue	<u> </u>						
	with this computation. Enter the amount from line 20 above on Form IT-203-ATT, line 32.							
	 If Form IT-215, line 21, is less than Form IT-215, line 20, enter the amount from line 20 above on 							
	Form IT-203-ATT, line 32, and continue on line 22 below.							
22	Subtract line 21 from line 20. This is your remaining excess New York State earned income credit.	22	00					
23	Enter the amount from line 19, Column D, of the <i>Part-year resident</i> income allocation worksheet in your Form IT-203 instruction booklet]						
24	Enter the amount from line 19, Column A, of the Part-year resident	7						
	income allocation worksheet in your Form IT-203 instruction booklet]						
25	Divide line 23 by line 24 (round the result to the fourth decimal place). This amount cannot exceed 100% (1.0000).	25						
26	Multiply line 22 by line 25. Enter the result here and on Form IT-203-ATT, line 10.							
	This is the refundable portion of your part-year New York State resident earned income credit.	26	00					
Nev	v York City earned income credit (full-year and part-year New York City residents)							
27	From Worksheet C, New York City earned income credit, on page 3 of Form IT-215-I, Instructions for							
	Form IT-215. Enter here and on Form IT-201, line 70, or Form IT-203-ATT, line 11.	27	00					
	Part-year New York City residents must also complete line 28 below.							
28	Part-year New York City adjusted gross income							
	Enter the amounts from Worksheet C, lines 6 and 7 28A 00	28B	00					
Wo	rksheet B							
1	New York State tax (from Form IT-201, line 39, or Form IT-203, line 38)	1	00					
2	Resident credit (see instructions)							
3	Accumulation distribution credit (see instructions)	-						
4	Add lines 2 and 3	4	00					
5	Subtract line 4 from line 1. (If line 4 is more than line 1, enter 0.) Enter here and on line 13 on the front of this form.	5	00					
3		5	00					

