All filers enter tax period:


| Legal name of corporation | Employer identification number (EIN) |
| :--- | :--- |

File this form with your franchise tax return. You must also attach a copy of the annual final certificate of tax credit issued by the New York State (NYS) Department of Labor.
All filers must complete line A.
A Are you claiming this credit as a corporation that earned the credit (not as a corporate partner that received a share of the credit from a partnership)? (mark an $\boldsymbol{X}$ in the appropriate box; see instructions)............................... Yes $\square \square$ No $\square$

C corporations
If Yes, complete lines B through F and Schedules A, and B.
If No, and you are claiming this credit as a corporate partner, complete Schedules A, B, and C.

## New York S corporations

If Yes, complete lines B through F and Schedule A.
If No, and you are claiming this credit as a corporate partner, complete Schedules A and C.

B Name of the business certified by the NYS Department of Labor to participate in the New York Youth Jobs Program. - $\square$

C Certified business's EIN $\qquad$ -


D Number of certified youth employed full-time and included in this claim for credit $\qquad$
$\square$

E Number of certified youth employed part-time and included in this claim for credit $\qquad$
$\square$

F Program year from the annual final certificate of tax credit $\qquad$
$\square$

## Schedule A - Credit for certified youths



Schedule B - Computation of tax credit used, refunded, or credited as an overpayment to the next tax year. New York S corporations: Do not complete this section.

| 4 | Tax due before credits (see instructions) | 4 |  |
| :---: | :---: | :---: | :---: |
| 5 | 5 Tax credits claimed before this credit (see instructions) ................................................................ | 5 |  |
| 6 | Subtract line 5 from line 4 | 6 |  |
| 7 | Minimum tax (see instructions) | 7 |  |
| 8 | Credit limitation (subtract line 7 from line 6; if zero or less, enter 0) ................................................... | 8 |  |
| 9 | Credit to be used this tax year (see instructions) ....................................................................... $\bullet$ | 9 |  |
|  | Unused tax credit available as a refund or as an overpayment (subtract line 9 from line 3) ................. | 10 |  |
|  | Tax credit to be refunded (limited to the amount on line 10; see instructions) ...................................... $\bullet$ | 11 |  |
|  | 12 Amount to be applied as an overpayment to next year's tax (subtract line 11 from line 10; see instructions) $\bullet$ | 12 |  |

Schedule C - Partnership information (see instructions)

| Name of partnership | Partnership's EIN | Credit amount allocated |
| :---: | :---: | :---: |
|  | - |  |
|  | - |  |
|  | $\bullet$ |  |
| Total from attachment(s) .................................................................................................................. |  |  |
| 13 Total credit allocated from partnerships (enter here and on line 2) | ............................ • 13 |  |

