

## Claim for Empire State Commercial Production Credit Tax Law - Section 28, Section 606(jj)

IT-246

Submit this form with Form IT-201, IT-203, IT-204	, or IT-205.
---	--------------

Name(s) as shown on return			Taxpayer identification number			
aı	rt 1 – Computation of credit					
1	Empire State commercial production credit (submit a copy	of the certifica	ate(s) of tax credit from the			
	Governor's Office of Motion Picture & Television Development)					.00
2	Partner, shareholder, beneficiary share of credit from Part 2, line 17					.00
3						
4	<b>Fiduciaries:</b> Enter the credit allocated to beneficiaries from Part 3, column C			4		.00
5				5	.00.	00
	<b>Partnerships:</b> Enter the line 5 amount and code <b>355</b> on Form IT-204, line 147. <b>All others:</b> Continue with line 6.					
6	Enter amount from Form IT-201, line 39; Form IT-203, line 46; or Form IT-205, line 8 if a					
	resident, or line 9 if a nonresident or part-year resident			6		00
7	Form IT-201 and IT-203 filers: Enter amount from Form					
	Form IT-203-ATT, line 20. Form IT-205 filers: Enter an	y credits show	vn on line 1			
	of the Addbacks worksheet in the instructions for Form	IT-205, line 1	2	7		00
8	Add lines 6 and 7	•				.00
	Other credits (see instructions)			-		00
	Subtract line 9 from line 8					00
	Nonrefundable portion of credit (see instructions)					00
	12 Subtract line 11 from line 5 (see instructions)  13 Multiply line 12 by 50% (.5)			. 12	.0	.00
14 Prior-year carryover (from last year's Form IT-246)			14	00.		
					-	
	Subtract line 13 from line 12. This is the amount of credit			16		.00
	rt 2 – Partnership, New York S corporation, and	estate and	trust information		·	<u> </u>
	For <i>Type</i> , enter <b>P</b> for partnership, <b>S</b> for S corporation <b>A</b> – Name of entity	B - Type	<b>C</b> – Employer identification nu		<b>D</b> – Share of credit	$\neg$
	A - Name of entity	<b>B</b> – Type	C - Employer Identification no	iiiibei	D - Share of Credit	$\dashv$
						.00
						00
						.00
						-
						.00
7	Total (Add amounts in column D; include amounts from additional	al sheets. Enter	here and on line 2 above.)	17		.00
_						_
aı	rt 3 – Beneficiary's and fiduciary's share of Emp				• 01 6 19	_
	A – Beneficiary's name (same as on Form IT-205, Schedu	ile C)	B – Identifying numbe	_	C - Share of credit	$\dashv$
То	tal					00
						.00
						.00
						.00
Fi	duciary					
	-					.00