



Claim for Excelsior Jobs Program Tax Credit

Tax Law - Sections 31 and 606(qq)

IT-607

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

Other filers enter tax period:

beginning and ending

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

You must also submit a copy of the certificate(s) of tax credit issued by Empire State Development (ESD).

Name(s) as shown on return	Identifying number as shown on return
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A Certificate number (see instructions) **A**

A1 Project number (see instructions) **A1**

B Year of eligibility (enter a number from 1 to 10; see instructions) **B**

B1 Green CHIPS projects only: indicate the phase from your certificate of tax credit issued by ESD (see instr.) Phase 1 Phase 2

Schedule A: Credit components (see instructions)

Part 1: Excelsior jobs tax credit component (see instructions)

Individual (including sole proprietor), partnership, fiduciary	1	Enter your excelsior jobs tax credit component	<input style="width:100px" type="text"/>	.00
Partner	2	Enter your share of the excelsior jobs tax credit component from your partnership(s)	<input style="width:100px" type="text"/>	.00
S corporation shareholder	3	Enter your share of the excelsior jobs tax credit component from your S corporation(s)	<input style="width:100px" type="text"/>	.00
Beneficiary	4	Enter your share of the excelsior jobs tax credit component from the estate(s) or trust(s)	<input style="width:100px" type="text"/>	.00
	5	Total excelsior jobs tax credit component (add lines 1 through 4; see instructions)	<input style="width:100px" type="text"/>	.00

Part 2: Excelsior investment tax credit component (see instructions)

Individual (including sole proprietor), partnership, fiduciary	6	Enter your excelsior investment tax credit component	<input style="width:100px" type="text"/>	.00
Partner	7	Enter your share of the excelsior investment tax credit component from your partnership(s)	<input style="width:100px" type="text"/>	.00
S corporation shareholder	8	Enter your share of the excelsior investment tax credit component from your S corporation(s)	<input style="width:100px" type="text"/>	.00
Beneficiary	9	Enter your share of the excelsior investment tax credit component from the estate(s) or trust(s)	<input style="width:100px" type="text"/>	.00
	10	Total excelsior investment tax credit component (add lines 6 through 9; see instructions)	<input style="width:100px" type="text"/>	.00

Part 3: Excelsior research and development tax credit component (see instructions)

Individual (including sole proprietor), partnership, fiduciary	11	Enter your excelsior research and development tax credit component	<input style="width:100px" type="text"/>	.00
Partner	12	Enter your share of the excelsior research and development tax credit component from your partnership(s)	<input style="width:100px" type="text"/>	.00
S corporation shareholder	13	Enter your share of the excelsior research and development tax credit component from your S corporation(s)	<input style="width:100px" type="text"/>	.00
Beneficiary	14	Enter your share of the excelsior research and development tax credit component from the estate(s) or trust(s)	<input style="width:100px" type="text"/>	.00
	15	Total excelsior research and development tax credit component (add lines 11 through 14; see instructions)	<input style="width:100px" type="text"/>	.00



Part 4: Excelsior real property tax credit component (see instructions)

Individual (including sole proprietor), partnership, fiduciary	16	Enter your excelsior real property tax credit component ...	16	.00
Partner	17	Enter your share of the excelsior real property tax credit component from your partnership(s)	17	.00
S corporation shareholder	18	Enter your share of the excelsior real property tax credit component from your S corporation(s)	18	.00
Beneficiary	19	Enter your share of the excelsior real property tax credit component from the estate(s) or trust(s)	19	.00
	20	Total excelsior real property tax credit component (add lines 16 through 19; see instructions)	20	.00

Part 5: Excelsior child care services tax credit component (see instructions)

Individual (including sole proprietor), partnership, fiduciary	21	Enter your excelsior child care services tax credit component ...	21	.00
Partner	22	Enter your share of the excelsior child care services tax credit component from your partnership(s)	22	.00
S corporation shareholder	23	Enter your share of the excelsior child care services tax credit component from your S corporation(s)	23	.00
Beneficiary	24	Enter your share of the excelsior child care services tax credit component from the estate(s) or trust(s)	24	.00
	25	Total excelsior child care services tax credit component (add lines 21 through 24; see instructions)	25	.00

26 Excelsior jobs program tax credit (add lines 5, 10, 15, 20, and 25) **26** .00

Fiduciaries: Complete Schedule C.

Individuals (including sole proprietors), partners, S corporation shareholders, and beneficiaries: Enter the line 26 amount on line 30.

Schedule B: Partnership, S corporation, estate and trust information (see instructions)

If you were a partner in a partnership, a shareholder of a New York S corporation, or a beneficiary of an estate or trust and received a share of the excelsior jobs program tax credit from that entity, complete the following information for each partnership, New York S corporation, estate, or trust. For *Type*, enter **P** for partnership, **S** for S corporation, or **ET** for estate or trust.

Name	Type	Employer ID number

Schedule C: Beneficiary's and fiduciary's share of credit components and recapture of credit (see instr.)

An estate or trust **must** complete this part.

	A Share of excelsior jobs tax credit component	B Share of excelsior investment tax credit component	C Share of excelsior research and development tax credit component	D Share of excelsior real property tax credit component	E Share of excelsior child care services tax credit component	F Share of recapture of credit
Totals 27	.00	.00	.00	.00	.00	.00

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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 Beneficiary's name <i>(same as on Form IT-205, Schedule C)</i>	B Identifying number
A		
B		
C		
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
A	.00	.00	.00	.00	.00	.00
B	.00	.00	.00	.00	.00	.00
C	.00	.00	.00	.00	.00	.00
D	.00	.00	.00	.00	.00	.00
Total from additional forms, if any						
	.00	.00	.00	.00	.00	.00
28	Total of allocated share to beneficiaries <i>(total columns C through H)</i>					
	.00	.00	.00	.00	.00	.00
29	Fiduciary's share <i>(subtract line 28 from line 27 for each column)</i>					
	.00	.00	.00	.00	.00	.00

Schedule D: Calculation of credit (see instructions)

Individuals (including sole proprietors), partners, S corporation shareholders, beneficiaries	30	Enter the amount from line 26	30	.00	
	Fiduciaries	31	Enter the amount from line 29, column C	31	.00
		32	Enter the amount from line 29, column D	32	.00
		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 <i>(add lines 30 through 35; see instructions)</i>	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 <i>(see instructions)</i>	38	.00
39	Partner's share of recapture of credit <i>(see instructions)</i>	39	.00
40	S corporation shareholder's share of recapture of credit <i>(see instructions)</i>	40	.00
41	Fiduciaries: enter your share of amount from line 29, column H	41	.00
42	Total <i>(add lines 37 through 41)</i>	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.

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