



## Claim for Earned Income Credit New York State • New York City Tax Law - Section 606(d)

IT-215

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

Name(s) as shown on return									Yo	Your Social Security number			
,	D						£ 41	114	,		V	N	
1	Did you claim the federal earned income credit? If <b>No, stop; you do not qualify for these credits</b>										Yes	No	
2	Is your investment income (see instructions) greater than \$11,000? If <b>Yes</b> , <b>stop</b> ; you do not qualify for these credits. 2 Yes No												
3	5 5 5 7 7 7										V	Na 🗔	
	for the purposes of the earned income credit?												
4	4 Did you claim qualifying children on your <b>federal</b> Schedule EIC? If <b>No</b> , continue with line 5.  If <b>Yes</b> , in the spaces below, list up to three of the same children you claimed on federal Schedule EIC												
						ndren you daimed of	n iede	rai Scriedule E	:10	4	res	NO	
If you claimed more than three, see instructions.													
		First name		MI	/II Last name				Suffix		Relationship		
1st Child													
		No. of months   F	Full-time r		Person with	Social Security nun	nber	Date of birth (	mmddyyyy)				
			student*	_	disability*								
		First name		MI		Last name			Suffix		Relationship		
2	nd												
Cł	nild	No. of months   F	Full-time _		Person with	Social Security nun	nber	Date of birth (	mmddyyyy)				
			student*		disability*								
		First name		MI		Last name			Suffix		Relationship		
	rd												
Cł	nild	No. of months   F	Full-time _	-, l	Person with	Social Security nun	nber	Date of birth (	mmddyyyy)				
			student*		disability*								
* 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	Is 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 you are a part-year New York State resident, and line 28 if you are a part-year New York City resident).												
	The Tax Department will compute your New York State and, if applicable, your New York City earned income credit												
	for you. If <b>No</b> , complete lines 6 through 17 (and lines 18 through 26 if you are a part-year New York State resident).												
	New York City residents must complete Worksheet C, New York City earned income credit, in the instructions.												
	Part-year New York City residents must also complete line 28 on the back of this claim form.									5	Yes	No	
											Whole dollar		
6	-	Wages, salaries, tips, etc., from <b>Worksheet A</b> line 3, in the instructions.								.00			
7		Earned income adjustments (see instructions)								<b>.</b> 00			
8		Business income or loss (see instructions)						8		.00			
		mployer identification r			· · · · · · · · · · · · · · · · · · ·								
9		Enter your federal adjusted gross income (from Form IT-201, line 19, or Form IT-203, line 19, Federal amount column)										.00	
10		Amount of federal EIC claimed (from federal Form 1040, line 27)										.00	
11		New York State earned income credit (NYS EIC) rate 30% (.30)							11		.30		
	Tentative NYS EIC (multiply line 10 by line 11; see instructions)									12		.00	
Complete Worksheet B on the back page before continuing.													
13					e 5, on the back of this form				.0	_			
14					rm IT-201, line 40, or Form IT-203, line 39) 14				.0			00	
15		Enter the smaller of line 13 or line 14									.00		
16	Allowable New York State earned income credit (subtract line 15 from line 12; see instructions)											.00	
17										00			
		turn as <i>Married tiling s</i> pint federal adjusted	•		see instructions)		Г					.00	
	.10			111111111111111111111111111111111111111					-()				

## Part-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. Enter your New York State earned income credit (from line 16 or line 17) 18 .00 Enter the amount from Form IT-203, line 42 19 .00 - If line 19 is equal to or more than line 18, **stop**. Subtract line 19 from line 18 ..... 20 .00 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 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. Subtract line 21 from line 20 .00 Amount from line 19, Column D, of Part-year resident income allocation worksheet, in Form IT-203-I. ..... 23 .00 Enter the amount from Form IT-203, line 19, Federal amount column ...... .00 Divide line 23 by line 24 (round the result to the fourth decimal place). This amount cannot exceed 100% (1.0000) (see instr.) 25 25 Multiply line 22 by line 25. Enter the result here and on Form IT-203-ATT, line 10 ..... .00 New York City earned income credit (full-year and part-year New York City residents) Enter the amount from Worksheet C, 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. Part-year New York City adjusted gross income Enter the amounts from Worksheet C, lines 6 and 7 ..... .00 28B .00 Worksheet B 1 .00 New York State tax (from Form IT-201, line 39, or Form IT-203, line 38) ..... Resident credit (see instructions) Accumulation distribution credit (see instructions) Add lines 2 and 3 .00 5 .00 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. ......

