



Department of Taxation and Finance

New York Youth Jobs Program Tax Credit

Tax Law – Section 210-B.36

CT-635

All filers enter tax period:

beginning ending

Legal name of corporation	Employer identification number (EIN)
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File this form with your franchise tax return. You must also submit 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 **X** in the appropriate box; see instructions) Yes No

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.....

C Certified business's EIN

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

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

F Program year from the annual final certificate of tax credit

Schedule A – Credit for certified youths

1 New York youth jobs program tax credit (see instructions)	•	1	<input type="text"/>	<input type="text"/>
2 Partner: Enter your share of the credit from your partnership from line 13	•	2	<input type="text"/>	<input type="text"/>
3 Total credit (see instructions)	•	3	<input type="text"/>	<input type="text"/>

Schedule B – Calculation 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	<input type="text"/>	<input type="text"/>
5 Tax credits claimed before this credit (see instructions)	•	5	<input type="text"/>	<input type="text"/>
6 Subtract line 5 from line 4		6	<input type="text"/>	<input type="text"/>
7 Minimum tax (see instructions)		7	<input type="text"/>	<input type="text"/>
8 Credit limitation (subtract line 7 from line 6; if zero or less, enter 0)	•	8	<input type="text"/>	<input type="text"/>
9 Credit to be used this tax year (see instructions)	•	9	<input type="text"/>	<input type="text"/>
10 Unused tax credit available as a refund or as an overpayment (subtract line 9 from line 3)	•	10	<input type="text"/>	<input type="text"/>
11 Tax credit to be refunded (limited to the amount on line 10; see instructions)	•	11	<input type="text"/>	<input type="text"/>
12 Amount to be applied as an overpayment to next year's tax (subtract line 11 from line 10; see instructions)	•	12	<input type="text"/>	<input type="text"/>

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Schedule C – Partnership information (see instructions)

Name of partnership	Partnership's EIN	Credit amount allocated
	•	
	•	
	•	
Total from additional forms, if any		
13 Total credit allocated from partnerships (enter here and on line 2)		• 13

