

New York State Department of Taxation and Finance

Claim for Long-Term Care Insurance Credit

Tax Law - Section 606(aa)

IT-249

Name(s) as shown on return

Identifying number as shown on return

Attach this form to Form IT-201, IT-203, IT-204, or IT-205.

Schedule A — Individuals (including sole proprietors), partnerships, and fiduciaries

1	Qualified long-term care insurance premiums paid for the current tax year	
2	Credit rate (20%)	
3	Credit for qualified long-term care insurance (multiply line 1 by line 2)	

1.			
2.	•	2	0
3.			

Fiduciaries — Include the amount from line 3 in the *Total* line of Schedule D, column C. **All others** — Enter the amount from line 3 on Schedule E, line 8.

Schedule B — Partnership, S corporation, estate, and trust information

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 long-term care insurance 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. You must also complete Schedule C and Schedule E, and, if applicable, Schedule D, Schedule F, Schedule G and Schedule H.

	Name of entity	Туре	Employer ID number
1.			
2.			

Schedule C — Partner's, shareholder's, or beneficiary's share of credit							
Partner	Partner 4 Enter your share of the credit from your partnership (see instructions) 4.						
S corporation shareholder 5 Enter your share of the credit from your S corporation (see instructions)					•		
Beneficiary	6	Enter your share of the credit from the fiduciary's Form IT-249, Schedule D, column C	6.				
	7	Totals (add lines 4, 5, and 6)	7.		•		

Fiduciaries — Include the amount from line 7 in the *Total* line of Schedule D, column C.

All others — Enter the amount from line 7 on Schedule E, line 9.

Schedule D — Beneficiary's and fiduciary's share of credit

A Beneficiary's name <i>(same as on</i> Form IT-205, Schedule C)	B Identifying number	C Share of qualified long-term care insurance credit
Total (enter the amount from Schedule A, line 3, plus the amount from Schedule C, line 7)		
Fiduciary		

(continued on back)



Schedule E — Computation of credit available for the current year						
Individuals and partnerships	8	Enter the amount from Schedule A, line 3	8.].[
Partners, S corporation						
shareholders, beneficiaries	9	Enter the amount from Schedule C, line 7	9.].[
Fiduciaries	10	Enter the amount from Schedule D, Fiduciary line, column C	10.].[
	11	Total credit available for the current year (add lines 8, 9, and 10)	11.].[

Full year NYS resident individuals, estates and trusts — Complete Schedule F Nonresident and part-year resident individuals, estates, and trusts — Complete Schedule G Partnerships — Enter the line 11 amount on Form IT-204, line 29.

Schedule F — Full-Year New York State residents computation of total credit

12	Enter the amount from line 11	12.		
	Enter the available carryover of unused credit from preceding period(s) <i>(see instructions)</i> Total credit <i>(add lines 12 and 13)</i>	13. 14.	•_	

Individuals — Enter the line 14 amount on Form IT-201-ATT, line 3. Fiduciaries — Include the line 14 amount on Form IT-205, line 10.

Schedule G — New York State Nonresidents and part-year residents computation of total credit

15	Enter the amount from line 11	15.	•	
16	Income percentage from 2006 Form IT-203, line 45, or Form IT-205-A, line 12 (if the income			
	percentage is more than 100% (1.0000), enter 1.0000)	16.	•	
17	Nonresident and part-year resident credit (multiply line 15 by line 16)	17.	•	
18	Enter the available carryover of unused credit from preceding period(s) (see instructions)	18.	•	
19	Total credit (add lines 17 and 18)	19.	•	
	Individuals — Enter the line 19 amount on Form IT-203-ATT, line 4.			

Fiduciaries — Include line 19 amount on Form IT-205, line 10.

Schedule H — Application of credit and computation of carryover

(see the instructions to determine if you are required to complete this schedule)

20	Total credit (from line 14 or 19 as applicable)	20.	•	
21	Amount that you applied against your 2006 tax (see instructions)	21.	•	
22	Amount of credit available for carryover to 2007 (subtract line 21 from line 20)	22.		

