CT-657

COVID-19 Capital Costs Credit

Tax Law - Section 210-B.58

All filers must enter tax period:

All filers must complete line A. A re you claiming this credit as a corporation that earned the credit (not a received a share of the credit from a partnership)? (mark an X in the appropriate forms a partnership)? (mark an X in the appropriate forms) C corporations If Yes, complete Schedules A through C. If No, and you are claiming this credit as a corporate form partner, complete Schedules B and C. All filers: Complete Schedule D, if appropriate forms are complete Schedule D, if appropriate forms are complete Schedule D. Schedule A – Computation of credit (see instructions) Enter the information from your certificate of tax credit in columns A and B below.	s a corporate poriate box; see in Scorporations plete Schedule you are claiming mplete Schedu	structions) Yes ● No Ses A and B. g this credit as a corporate
C corporations If Yes, complete Schedules A through C. If No, and you are claiming this credit as a corporate partner, complete Schedules B and C. All filers: Complete Schedule D, if ap Schedule A – Computation of credit (see instructions) Enter the information from your certificate of tax credit in columns A and B below.	S corporations plete Schedule you are claimin mplete Schedu	structions) Yes ● No Ses A and B. g this credit as a corporate
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If Yes, complete Schedules A through C. If No, and you are claiming this credit as a corporate partner, complete Schedules B and C. If No, and you are claiming this credit as a corporate partner, complete Schedules B and C. All filers: Complete Schedule D, if apparent of the information from your certificate of tax credit in columns A and B below.	plete Schedule ou are claimin mplete Schedu	es A and B. g this credit as a corporate
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Enter the information from your certificate of tax credit in columns A and B below.		
Enter the information from your certificate of tax credit in columns A and B below.		
	A tificate number	B Credit
Total from any additional Forms CT-657 1 COVID-19 capital costs credit (add column B amounts)		1
Schedule B – Partnership information (see instructions)		
A B Name of partnership Partnership's EIN Ce	C ertificate number	D Share of credit
Total from any additional Forms CT-657		•
 2 Total credit allocated from partnership(s) (add column D amounts) 3 Total credit (add lines 1 and 2; New York S corporations, see instructions) 		3

Schedule C – Computation of credit used, refunded, or credited as an overpayment to the next tax year (New York S corporations: do not complete this schedule.)

4	Tax due before credits (see instructions)	4	4	
5	Tax credits claimed before this credit (see instructions)	Ę	5	
6	Tax after application of credits (subtract line 5 from line 4)	6	6	
7	Fixed dollar minimum tax (see instructions)	7	7	
8	Credit limitation (subtract line 7 from line 6; if line 7 is more than line 6, enter 0)	8	8	
9	Credit used for this tax year (enter the lesser of line 3 or line 8 here and on your franchise tax return)	9	9	
10	Unused tax credit available as a refund or as an overpayment (subtract line 9 from line 3)	10	0	
11	Amount of credit to be refunded (limited to the amount on line 10; enter here and on your franchise tax			
	return)	11	1	
12	Amount of credit to be applied as an overpayment to the next year's tax (subtract line 11 from line 10;			
	enter here and on your franchise tax return)	12	2	

Schedule D – Recapture of credit (see instructions)

	A Revoked certificate number	B Amount of credit previously claimed
Total from any additional Forms CT-657		
13 Total (add column B amounts)		