

Name

New York State Department of Taxation and Finance

#### 1999 calendar-yr. filers, check box Other filers enter tax period:

# of Persons with Disabilities

ending

beginning

Tax Law — Sections 187-a, 210.23, 1456(f), and 1511(j) Employer identification number

File number

File this form with Form CT-3, CT-3-A, CT-3-S, CT-3-S-A, CT-32, CT-32-A, CT-32-S, CT-33, CT-33-A, CT-183, CT-184, CT-185, or CT-186

**Claim for Credit for Employment** 

## Schedule A - Computation of credit

#### Part 1 - Computation of credit on qualified first-year wages. (Do not include employees shown in Part 2 below)

	<b>A</b> Qualified employee	<b>B</b> Social security number	<b>C</b> One-year period for qualified first-year wages (beginning date - end date)		D Wages paid during tax year for services rendered during one-year period shown in column C (\$6,000 limit)
Att	ach additional sheets if necessary				
1	Wages paid during tax year for ser	vices rendered during one-year perio	d (total amounts in column D)	1	
2	Tax credit percentage (35%)			2	.35
3	Tax credit on qualified first-year wa	ages (multiply line 1 by line 2)		3	•

#### Part 2 - Computation of credit on qualified second-year wages (Do not include employees shown in Part 1 above)

	A Qualified employee	B Social security number	C One-year period for qualified second-year wages (beginning date - end date)		D Wages paid during tax year for services rendered during one-year period shown in column C (\$6,000 limit)
Att	ach additional sheets if necessary.				
4	Wages paid during tax year for ser	vices rendered during one-year perio	d (total amounts in column D)	4	
5	Tax credit percentage (35%)			5	.35
6	Tax credit on qualified second-yea	r wages (multiply line 4 by line 5)		6	•
7	Total tax credit (add lines 3 and line 6	6)		7	

### Schedule B - Computation of credit used and carried forward

(New York S corporations do not complete Schedule B, see instructions.)

8	Unused credit carried forward from preceding tax year (see instructions)	8	•
9	Total credit computed for the current tax year (enter amount from line 7)	9	•
10	Total credit (add lines 8 and 9)	10	
11	Tax before credits (see instructions)	11	
12	Enter other tax credits used (see instructions)	12	
13	Net tax (subtract line 12 from line 11)	13	
14	Tax limitation - enter appropriate tax		
•••	Section 183 - enter minimum tax of \$75		
	Section 185 - enter minimum tax of \$10		
	Section 186 - enter minimum tax of \$125		
	Article 9-A - enter the fixed dollar minimum tax		
	Articles 32 and 33 - enter minimum tax of \$250	14	
15	Tax credit limitation (subtract line 14 from line 13; if line 14 is greater than line 13, enter "0")	15	•
16	Tax credit used for the current tax year (enter line 10 or line 15 amount, whichever is less)	16	•
10		10	
17	Tax credit carried forward (subtract line 16 from line 10)	17	•

## **Need help?**

	<b>Telephone assistance</b> is available from 8:30 a.m. to 4:25 p.m. (eastern time), Monday through Friday.				
	For business tax information, call the New York State Business Tax				
	Information Center:	1 800 972-1233			
	For general information:	1 800 225-5829			
	To order forms and publications:	1 800 462-8100			
	From areas outside the U.S. and outside Canada:	(518) 485-6800			
	<b>Fax-on-demand forms:</b> Forms are available 24 hours a day, 7 days a week.	1 800 748-3676			
www	Internet access: http://www.tax.state	.ny.us			



Hotline for the hearing and speech impaired: 1 800 634-2110 from 8:30 a.m. to 4:15 p.m. (eastern time), Monday through Friday. If you do not own a telecommunications device for the deaf (TDD), check with independent living centers or community action programs to find out where machines are available for public use.



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If you need to write, address your letter to: NYS TAX DEPARTMENT TAXPAYER ASSISTANCE BUREAU TAXPAYER CORRESPONDENCE W A HARRIMAN CAMPUS ALBANY NY 12227