



# Credit for Employment of Persons with Disabilities

Name(s) as shown on return	Identifying number as shown on return
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Complete this form if you are claiming a credit for employment of persons with disabilities, and submit it with Form IT-201, IT-203, IT-204, or IT-205.

## Schedule A – Individuals (sole proprietors), partnerships, and estates or trusts (see instructions)

### Part 1 – Computation of credit on qualified first-year wages

(Do not include employees shown in Part 2. Use additional sheets if necessary.)

A Qualified employee	B Social security number	C One-year period for qualified first-year wages (beginning date to end date)	D Wages paid during tax year for services rendered during one-year period shown in column C (\$6,000 limit)
			.00
			.00
			.00
			.00

1 Wages paid during tax year for services rendered during one-year period (add column D amounts; include column D totals from all additional sheets) .....	<b>1</b>	.00
2 Tax credit percentage (35%).....	<b>2</b>	<b>.35</b>
3 Tax credit on qualified first-year wages (multiply line 1 by line 2) .....	<b>3</b>	.00

### Part 2 – Computation of credit on qualified second-year wages

(Do not include employees shown in Part 1. Use additional sheets if necessary.)

A Qualified employee	B Social security number	C One-year period for qualified second-year wages (beginning date to end date)	D Wages paid during tax year for services rendered during one-year period shown in column C (\$6,000 limit)
			.00
			.00
			.00
			.00
			.00

4 Wages paid during tax year for services rendered during one-year period (add column D amounts; include column D totals from all additional sheets) .....	<b>4</b>	.00
5 Tax credit percentage (35%).....	<b>5</b>	<b>.35</b>
6 Tax credit on qualified second-year wages (multiply line 4 by line 5) .....	<b>6</b>	.00
7 Total tax credit (add lines 3 and 6) .....	<b>7</b>	.00

**Individuals and partnerships:** Enter the line 7 amount on Schedule E, line 12.

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



**Schedule B – Partnership, S corporation, and estate or trust information** (see instructions)

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 credit for employment of persons with disabilities from that entity, complete the following information for each partnership, S corporation, or estate or trust. For *Type*, enter **P** for partnership, **S** for S corporation, or **ET** for estate or trust.

Name of partnership, S corporation, or estate or trust	Type	Employer ID number

**Schedule C – Partner’s, shareholder’s, or beneficiary’s share of credit** (see instructions)

<b>Partner</b>	<b>8</b>	Enter your share of the credit from your partnership.....	<b>8</b>	.00
<b>S corporation shareholder</b>	<b>9</b>	Enter your share of the credit from your NY S corporation .....	<b>9</b>	.00
<b>Beneficiary</b>	<b>10</b>	Enter your share of the credit from the estate or trust.....	<b>10</b>	.00
	<b>11</b>	<b>Total</b> (add lines 8, 9, and 10) .....	<b>11</b>	.00

**Fiduciaries:** Include the line 11 amount in the *Total* line of Schedule D, column C.

**All others:** Enter the line 11 amount on Schedule E, line 13.

**Schedule D – Beneficiary’s and fiduciary’s share of credit**

<b>A</b> Beneficiary’s name - same as on Form IT-205, Schedule C	<b>B</b> Identifying number	<b>C</b> Share of credit for employment of persons with disabilities
<b>Total</b> (fiduciaries, enter the amount from Schedule A, line 7, plus the amount from Schedule C, line 11)		.00
		.00
		.00
Fiduciary		.00

**Schedule E – Computation of credit** (fiduciaries, do not make entries on lines 12 and 13)

<b>Individuals and partnerships</b>	<b>12</b>	Enter the amount from Schedule A, line 7.....	<b>12</b>	.00
<b>Partners, S corporation shareholders, beneficiaries</b>	<b>13</b>	Enter the amount from Schedule C, line 11.....	<b>13</b>	.00
<b>Fiduciaries</b>	<b>14</b>	Enter the amount from Schedule D, <i>Fiduciary</i> line, column C.....	<b>14</b>	.00
	<b>15</b>	Enter the carryover credit from last year’s Form IT-251 .....	<b>15</b>	.00
	<b>16</b>	<b>Total credit</b> (add lines 12 through 15).....	<b>16</b>	.00

**Partnerships:** Enter the line 16 amount and code **251** on Form IT-204, line 147.

**All others:** Complete Schedule F.

**Schedule F – Application of credit and computation of carryover**

<b>17</b>	Tax due before credits (see instructions).....	<b>17</b>	.00
<b>18</b>	Credits applied against the tax before this credit (see instructions) .....	<b>18</b>	.00
<b>19</b>	Net tax (subtract line 18 from line 17).....	<b>19</b>	.00
<b>20</b>	Amount of credit used this year (enter the lesser of line 16 or line 19; see instructions).....	<b>20</b>	.00
<b>21</b>	Amount of credit available for carryover to next year (subtract line 20 from line 16) .....	<b>21</b>	.00

