# Claim for Environmental Remediation Insurance Credit <br> For Qualified Sites Accepted into the Brownfield Cleanup Program Prior to July 1, 2015 

Tax Law - Sections 23 and 606(ff)
Calendar-year filers, mark an $X$ in the box: $\square$ Other filers enter tax period: beginning $\qquad$ and ending


File a separate Form IT-613 with your personal income tax return, Form IT-201, IT-203, IT-204, or IT-205 for each Certificate of Completion (CoC).
Name(s) as shown on return

## Schedule A - Brownfield site identifying information (see instructions, Form IT-613-I)

A Enter the date of execution of the Brownfield Cleanup Agreement (BCA) for the brownfield site for which you are claiming the credit (mmddyyyy)
B Enter the following information as listed on the CoC issued by the Department of Environmental Conservation (DEC) for the qualified site (see instructions). Submit a copy of the CoC. Also submit a copy of the certification form for the environmental remediation insurance tax credit completed by the insurer.

| Site name | Site location |  |
| :--- | :--- | :--- |
|  | Municipality | County |
| DEC region | Division of Environmental Remediation (DER) site number | Date CoC was issued |

C Mark an $\boldsymbol{X}$ in the box if you received notification from the Department of State that the qualified site is located in a Brownfield Opportunity Area

## Schedule B - Individuals (including sole proprietors), partnerships, and fiduciaries

1 Qualified environmental remediation insurance premiums paid (see instructions) .......................

| 1 | .00 |
| :--- | :--- |
| 2 | .00 |
| 3 | .00 |


Individuals and partnerships: Enter the line 3 amount on line 8.
Fiduciaries: Include the line 3 amount in the Total line of Schedule E, column C.

## Schedule C - Partnership, S corporation, estate, and 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 environmental remediation insurance credit from that entity, complete the following information for each partnership, New York S corporation, estate, or trust. For Type, enter $\boldsymbol{P}$ for partnership, $\boldsymbol{S}$ for $\mathbf{S}$ corporation, or $\boldsymbol{E T}$ for estate or trust.

| Name | Type | Employer ID number |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |

Schedule D - Partner's, shareholder's, or beneficiary's share of credit (see instructions)

| Partner | 4 | Enter your share of the credit from your partnership................................... | 4 | . 00 |
| :---: | :---: | :---: | :---: | :---: |
| S corporation shareholder | 5 | Enter your share of the credit from your S corporation ............................... | 5 | . 00 |
| Beneficiary | 6 | Enter your share of the credit from the estate or trust. <br> Total (add lines 4, 5, and 6) | 6 | . 00 |
|  | 7 |  | 7 | . 00 |

Fiduciaries: Include the line 7 amount in the Total line of Schedule E, column C.
All others: Enter the line 7 amount on line 9.

## IT-613 (2023) (back)

| Schedule E - Beneficiary's and fiduciary's share of credit and recapture of credit (see instructions) |  |  |  |
| :---: | :---: | :---: | :---: |
| Beneficiary's name (same as on Form IT-205, Schedule C) | Identifying number | C <br> Share of environmental remediation insurance credit | $\bar{D}$ <br> Share of recapture of credit |
| Total (see instructions) |  | . 00 | . 00 |
|  |  | . 00 | . 00 |
|  |  | . 00 | . 00 |
| Fiduciary |  | . 00 | . 00 |



## Schedule G - Summary of recapture of environmental remediation insurance credit

12 Recaptured environmental remediation insurance credit (see instructions). $\qquad$
Fiduciaries: Include the line 12 amount on the Total line of Schedule E, column D and continue with line 14.
All others: Continue with line 13.
13 Partners in a partnership, shareholders of an S corporation, and beneficiaries of an estate or trust: Enter your share of recapture of the environmental remediation insurance credit (see instructions)

| 13 | .00 |
| :--- | ---: |
| 14 | .00 |

14 Fiduciaries: Enter amount from Schedule E, column D, Fiduciary line
15 Recapture amount (add lines 12, 13, and 14; fiduciaries, see instructions) 15 .00
Individuals: Enter the line 15 amount and code 173 on Form IT-201-ATT, line 20, or Form IT-203-ATT, line 19.
Partnerships: Enter the line 15 amount and code 173 on Form IT-204, line 148.
Fiduciaries: Include the line 15 amount on Form IT-205, line 12.

