

Department of Taxation and Finance

Claim for Earned Income Credit
New York State • New York City
Tax Law - Section 606(d)

IT-215

Submit this form with Form IT-201 or IT-203.

Name(s) as shown on return Your											Your Social S	ur Social Security number		
1	Did you claim the federal earned income credit? If No, stop; you do not qualify for these credits.									1	Yes	No 🗌		
2	Is your investment income (see instructions) greater than \$11,950? If Yes, stop; you do not qualify for these credits										redits. 2	Yes	No	
3	Is your federal filing status <i>Married filing separate</i> and do you meet the requirements to be considered unmarried													
	for the purposes of the earned income credit?									3	Yes	No		
4 Did you claim qualifying children on your federal Schedule EIC? If No , continue with line 5.														
	If Yes , in the spaces below, list up to three of the same children you claimed on federal Schedule EIC													
	lf	you claimed more th	an three, se	e inst	ructions.									
		First name		MI	MI Last name Suffix							Relationship		
		First name		IVII	II Last name Suffi					Julia		Relationship		
	st nild						Social Security nun	nhor	Date of birth	(mmddy)	24)			
Ci	IIIU	No. of months	Full-time		Person with		Social Security Huri	inei	Date of billing	mmaayyy	<u>y)</u>			
		lived with you First nam	student*	MI	disability*	Ш	Last name			Suffix		Relationship		
_		i ii st iiaii	10	IVII			Last Hairie			Julia		Relationship		
2nd Child				Н.,			Social Security nun	nher	Date of birth	(mmddyyy	n/)			
Ci	iliu	No. of months	Full-time student*		Person with		Goolal Geounty Hull	ibei	Date of birtin	mmaayyy	y)			
		lived with you First nam		MI	disability*		Last name			Suffix		Relationship		
2	rd						<u> </u>			- Cumix		. tolullorioriip		
3rd Child				1			Social Security nun	nber	Date of birth	 (mmddvvv	v)			
		No. of months lived with you	Full-time student*		Person with disability*						,,			
		-					hov on your fodoral S	obodul	EIC (box 4a ar	· 4b)				
 * Mark an X in these boxes only if you checked Yes in the same box on your federal Schedule EIC (box 4a or 4b). 5 Is the IRS figuring your federal earned income credit (EIC) for you? If Yes, complete lines 6 through 9 (also lines 21, 														
•	23, and 24 if you are a part-year New York State resident, and line 28 if you are a part-year New York City resident).													
	The Tax Department will calculate your New York State resident, and line 28 if you are a part-year New York City resident). The Tax Department will calculate your New York State and, if applicable, your New York City earned income credit for you. If No , complete lines 6 through 17 (and lines 18 through 26 if you are a part-year New York State resident).													
		-		_					-					
New York City residents must complete <i>Worksheet C, New York City earned income credit</i> , in the instructions. Part-year New York City residents must also complete line 28 on the back of this claim form										Yes	No			
	i arr-year new tork only residents must also complete line 20 on the back of this daill form.											Whole dolla		
6	Wac	les salaries tins etc	c from Wor l	kshe	et Δ line 3 in	the in	etructions				6		.00	
7	_	Wages, salaries, tips, etc., from Worksheet A line 3, in the instructions. Earned income adjustments (see instructions)									.00			
8		Business income or loss (see instructions)										.00		
		nployer identificatior										1		
9		Enter your federal adjusted gross income (from Form IT-201, line 19, or Form IT-203, line 19, Federal amount column)									9		.00	
10		Amount of federal EIC claimed (from federal Form 1040, line 27a)										.00		
11		New York State earned income credit (NYS EIC) rate 30% (.30)							11		.30			
12		Tentative NYS EIC (multiply line 10 by line 11; see instructions)										.00		
Complete Worksheet B on the back page before continuing.														
13		Enter the amount from <i>Worksheet B</i> , line 5, on the back of this form												
14		New York State household credit (from Form IT-201, line 40, or Form IT-203, line 39) 14									00			
15	Enter the smaller of line 13 or line 14									15		.00		
16	Allo	Allowable New York State earned income credit (subtract line 15 from line 12; see instructions)								16		.00		
17	Con	Complete only if you filed your federal return as <i>Married filing joint</i> , but are required to file your New York State								te				
	return as Married filing separate return (see instructions).								17		.00			
											00			

Part-year New York State resident earned income credit Lines 18 through 26 apply only to part-year New York State residents claiming the New York State earned income credit. Enter your New York State earned income credit (from line 16 or line 17) 18 .00 Enter the amount from Form IT-203, line 42 .00 If line 19 is equal to or more than line 18, stop. Subtract line 19 from line 18 20 .00 Enter the amount from Form IT-203-ATT, line 31 (If you do not have to file Form IT-203-ATT, leave blank and continue on line 22 below.) 21 .00 If Form IT-215, line 21, is equal to or more than Form IT-215, line 20, stop. Do not continue with this calculation. Enter the amount from line 20 above on Form IT-203-ATT, line 32. If Form IT-215, line 21, is less than Form IT-215, line 20, enter the amount from line 20 above on Form IT-203-ATT, line 32, and continue on line 22 below. Subtract line 21 from line 20 .00 Amount from line 19, Column D, of Part-year resident income allocation worksheet, in Form IT-203-I (see instructions)..... 23 .00 Enter the amount from Form IT-203, line 19, Federal amount column00 Divide line 23 by line 24 (round the result to the fourth decimal place). This amount cannot exceed 100% (1.0000) (see instr.) 25 25 Multiply line 22 by line 25. Enter the result here and on Form IT-203-ATT, line 1000 New York City earned income credit (full-year and part-year New York City residents) Enter the amount from Worksheet C, here and on Form IT-201, line 70, or Form IT-203-ATT, line 11. 27 .00 Part-year New York City residents must also complete line 28 below. Part-year New York City adjusted gross income Enter the amounts from Worksheet C, lines 6 and 700 28B .00 Worksheet B 1 .00 New York State tax (from Form IT-201, line 39, or Form IT-203, line 38) Resident credit (see instructions) Accumulation distribution credit (see instructions) Add lines 2 and 3 .00 5 .00 Subtract line 4 from line 1 (if line 4 is more than line 1, enter 0). Enter here and on line 13 on the front of this form

