



Department of Taxation and Finance  
**Other Tax Credits and Taxes**  
 Attachment to Form IT-203

**IT-203-ATT**

Name(s) as shown on your Form IT-203	Your social security number
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Complete all parts that apply to you; see instructions (Form IT-203-I). Submit this form with your Form IT-203.

A Have you (or an entity of which you are an owner) been convicted of *Bribery Involving Public Servants and Related Offenses, Corrupting the Government, or Defrauding the Government* (NYS Penal Law Article 200, 496, or section 195.20)? (see instructions)..... Yes  No

**Part 1 – Other tax credits** (submit all applicable forms)

**Section A – New York State nonrefundable, non-carryover credits used**

Whole dollars only

1 Resident credit .....	1	.00
2 Accumulation distribution credit (submit computation) .....	2	.00
3 Other nonrefundable, non-carryover credits		
Code                      Amount	Code	Amount
3a <input type="text"/> .00	3b <input type="text"/> .00	
Total other nonrefundable, non-carryover credits (add lines 3a and 3b) .....		3 .00

**Section B – New York State nonrefundable, carryover credits used**

4 Long-term care insurance credit .....	4	.00
5 Investment credit .....	5	.00
6 Part-year solar energy system equipment credit .....	6	.00
7 Other nonrefundable, carryover credits		
Code                      Amount	Code	Amount
7a <input type="text"/> .00	7h <input type="text"/> .00	
7b <input type="text"/> .00	7i <input type="text"/> .00	
7c <input type="text"/> .00	7j <input type="text"/> .00	
7d <input type="text"/> .00	7k <input type="text"/> .00	
7e <input type="text"/> .00	7l <input type="text"/> .00	
7f <input type="text"/> .00	7m <input type="text"/> .00	
7g <input type="text"/> .00	7n <input type="text"/> .00	
Total other nonrefundable, carryover credits (add lines 7a through 7n) .....		7 .00

**8 Total New York State nonrefundable credits used**  
 (add lines 1 through 7; enter here and on Form IT-203, line 47) ..... **8** .00

**Section C – New York State, New York City, Yonkers, and MCTMT refundable credits**

9 Part-year resident refundable New York State child and dependent care credit.....	9	.00
9a Part-year resident refundable New York City child and dependent care credit .....	9a	.00
10 Part-year resident refundable New York State earned income credit .....	<input type="text"/>	.00
11 Part-year resident refundable New York City earned income credit .....	<input type="text"/>	.00
12 Other NY State refundable credits		

Code                      Amount	Code	Amount
12a <input type="text"/> .00	12g <input type="text"/> .00	
12b <input type="text"/> .00	12h <input type="text"/> .00	
12c <input type="text"/> .00	12i <input type="text"/> .00	
12d <input type="text"/> .00	12j <input type="text"/> .00	
12e <input type="text"/> .00	12k <input type="text"/> .00	
12f <input type="text"/> .00	12l <input type="text"/> .00	

Total other refundable credits (add lines 12a through 12l) .....		<b>12</b> .00
13 Add lines 9 through 12 .....	<b>13</b>	.00
14 New York State claim of right credit .....	<b>14</b>	.00
15 New York City claim of right credit .....	<b>15</b>	.00
16 Yonkers claim of right credit .....	<b>16</b>	.00
16a MCTMT (metropolitan commuter transportation mobility tax) claim of right credit.....	<b>16a</b>	.00
17 Total New York State, New York City, Yonkers, and MCTMT refundable credits (add lines 13 through 16a; enter here and on Form IT-203, line 61) .....	<b>17</b>	.00

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**Part 2 – Other New York State taxes** (submit all applicable forms)

**18** NY State tax on capital gain portion of lump-sum distributions (Form IT-230-I, worksheet C, line 7) **18**  .00

**19** Other New York State taxes

	Code	Amount		Code	Amount	
<b>19a</b>	<input type="text"/>	.00	<b>19g</b>	<input type="text"/>	.00	
<b>19b</b>	<input type="text"/>	.00	<b>19h</b>	<input type="text"/>	.00	
<b>19c</b>	<input type="text"/>	.00	<b>19i</b>	<input type="text"/>	.00	
<b>19d</b>	<input type="text"/>	.00	<b>19j</b>	<input type="text"/>	.00	
<b>19e</b>	<input type="text"/>	.00	<b>19k</b>	<input type="text"/>	.00	
<b>19f</b>	<input type="text"/>	.00	<b>19l</b>	<input type="text"/>	.00	
Total other New York State taxes (add lines 19a through 19l) .....						<b>19</b> <input type="text" value=""/> .00

**20** Add lines 18 and 19 ..... **20**  .00

**21** Enter amount from **Form IT-203**, line 47 ..... **21**  .00

**22** Enter amount from **Form IT-203**, line 46 ..... **22**  .00

**23** Subtract line 22 from line 21 (if line 22 is more than line 21, leave blank)..... **23**  .00

**24** Subtract line 23 from line 20 (if line 23 is more than line 20, leave blank)..... **24**  .00

**25** New York State separate tax on lump-sum distributions (Form IT-230) ..... **25**  .00

**26** Resident credit against separate tax on lump-sum distributions ..... **26**  .00

**27** Subtract line 26 from line 25 ..... **27**  .00

**28** This line intentionally left blank ..... **28**

**29** Add lines 24 and 27 ..... **29**  .00

**30** Excess child and dependent care credit ..... **30**  .00

**31** Subtract line 30 from line 29 (if line 30 is more than line 29, leave blank)..... **31**  .00

**32** Excess New York State earned income credit ..... **32**  .00

**33** **Net other New York State taxes** (subtract line 32 from line 31; if line 32 is more than line 31, leave blank; otherwise, enter the result here and on **Form IT-203**, line 49) ..... **33**  .00

