

Department of Taxation and Finance

Claim for QEZE Tax Reduction Credit

IT-604

Tax Law - Section 16

Note: You must submit all pages (1 through 8) with your return. All taxpayers must complete the information below and then complete either Section 1 (pages 1 through 4) or Section 2 (pages 5 through 8). Do not complete both sections.

	All filers enter tax period:	beginning		ending	
Submit this form with Form IT-201, IT-203, IT-204	l, or IT-205.				
Name(s) as shown on your return			Taxpayer ide	entification r	number
Name of empire zone (EZ)					
Name of qualified empire zone enterprise (QEZE) business			Employer ide	entification n	umber (EIN) of QEZE
Mark an X in the box if you are a Clean Energy Ent	erprise (CEE) <i>(see</i> Definitions for	r all QEZEs /	in the instructions).		
Mark an X in the box if you are a QEZE first certified on real property it owns or leases, that is located in					
prior to January 1, 2006					

Mark an X in the box if you are claiming this credit as a partner in a partnership, shareholder of a New York S corporation, or beneficiary of an estate or trust.

Section 1 – For QEZEs first certified prior to April 1, 2005 (see Important information in the instructions)

Date (mm-dd-yyyy) of first certification by Empire State Development (submit copies of all certificates of eligibility and EZ retention certificates)

Schedule A – Employment test for QEZEs first certified prior to April 1, 2005 (see instructions)

Part 1 - EZ employment - Computation of the employment number within all EZs for the current tax year and the five-year base period. Include employees within all EZs, even if you are not certified in all of those zones (see instructions).

Current tax year employment numbe	r	March 31	June 30	September 30	December 31	Total		
Number of full-time e within all EZs	employees							
1 Current tax year	employment	number withi	in all EZs <i>(do n</i>	not round; see inst	ructions)		1	
Base period employment number	Tax year ending <i>(mm-yyy</i>	y) March 31	June 30	September 30	December 31	Total		
Number in base year one								
Number in base year two								
Number in base year three								
Number in base year four								
Number in base year five								
Total number of full-	time employee	es within all E	EZs in the base	e period				
2 Base period employment number within all EZs (do not round; see instructions)							2	
3 Does the amour	nt on line 1 eq i	ual or excee	d line 2? (see)	instr.) Yes	No			

Does the amount on line 1 equal or exceed line 2? (see instr.) Yes

If No, stop; you are not eligible for the QEZE tax reduction credit.



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Part 2 – New York State employment outside all EZs – Computation of the employment number inside New York State and outside all EZs (whether or not you are certified in all of those EZs) for the current tax year and the five-year base period (see instructions).

Current tax year employment numbe	r	March 31	June 30	September 30	December 31	Total	
Number of full-time e inside NYS and outs							
4 Current tax year	employment r	number insid	le NYS and ou	tside all EZs <i>(dc</i>	o not round)		4
Base period employment number	Tax year ending <i>(mm-yyy</i> y	/) March 31	June 30	September 30	December 31	Total	
Number in base year one							
Number in base year two							
Number in base year three							
Number in base year four							
Number in base year five							
Total number of full-	time employee	s inside NY	S and outside	EZs in the base	period		
5 Base period emp	oloyment numb	ber inside N	YS and outside	e all EZs <i>(do not</i>	round)		5
		_					
6 Does the amoun	-				nstructions)	Yes No	
ii /vo, stop; yo	ou are not eligi		EZE tax reduc	clion credit.			
Schedule B – Cor	nnutation of	tost voar	omnlovmonf	number with	in the E7s in	which you are cert	ified
		test year	empioyment			i which you are cert	ineu
Test year <i>(mm-yyyy)</i> to		March 31	June 30	September 30	December 31	Total	
Number of full-time within the EZs							
7 Test year employ	yment number	within the E	Zs in which yo	ou are certified (see instructions)		7
Schedule C – Em	ployment ind	crease fac	tor (see instru	ctions)			
8 Current tax year	employment r	number with	in the EZs in w	hich you are ce	rtified <i>(see instru</i>	uctions)]
9 Test year employ				•			
10 Subtract line 9 fr							
11 Divide line 10 by	line 9 (round th	he result to the	e fourth decimal	place; if line 9 is			

 zero and line 8 is greater than zero, enter 1)

 12
 Divide line 10 by 100 (round the result to the fourth decimal place)
 12

 13
 Employment increase factor (enter the greater of line 11 or 12, but not more than 1.0)
 13

 Partnerships – Enter the line 13 amount on Form IT-204, line 133.

All others - Enter the line 13 amount on line 26.



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.00

.00

Sc	hedule D – Zone allocation factor (see instructions) A – EZ	B – New York State
14	Average value of property (see instructions) 14	.00
15	EZ property factor (divide line 14, column A, by line 14, column B; round the result to the fourth decimal place)	15
16	Wages and other compensation of employees (see instr.) 16 .00	.00
18	EZ payroll factor (divide line 16, column A, by line 16, column B; round the result to the fourth decimal place) Total EZ factors (add lines 15 and 17)	17 18
19	Zone allocation factor (<i>divide line 18 by two; round the result to the fourth decimal place</i>) Partnerships – Enter the line 19 amount on Form IT-204, line 134 and enter the benefit period factor from the <i>Benefit period factor table</i> below on Form IT-204, line 135. All others – Enter the line 19 amount on line 27.	19
Sc	hedule E – Tax factor	
20	Enter your tax from Form IT-201, line 39; Form IT-203, line 38; Form IT-205, line 6 (full-year resident	
~ .	estate or trust); or Form IT-205-A, line 11 (nonresident estate or trust or part-year resident trust)	
21 22	Enter the amount of your income from the QEZE allocated within NYS (see instructions) New York adjusted gross income (see instructions)	
23	Divide line 21 by line 22 (the result cannot exceed one; round the result to the fourth decimal place)	23
24	Multiply line 20 by line 23; this is your tax factor (enter here and on line 28)	.00
Sc	hedule F – QEZE tax reduction credit (see instructions)	
25	Tax year of the business benefit period; benefit period factor (from table below)	25
26	Employment increase factor (from line 13)	26
27	Zone allocation factor (from line 19)	27
28	Tax factor (from line 24)	28 .00
29	QEZE tax reduction credit available for use (multiply line 25 by line 26 by line 27 by line 28)	29 .00
30	Tax due before credits (see instructions)	30 .00
31	Credits applied against the tax before this credit (see instructions)	31 .00

Benefit period factor table*					
Tax year of the benefit period	Benefit period factor				
1 - 10	1.0				
11	0.8				
12	0.6				
13	0.4				
14	0.2				
15	0				

Sole proprietors and fiduciaries – Find the tax year of your benefit period. Enter the benefit period factor for that tax year on line 25.

All others - See instructions.

* For taxpayers first certified prior to April 1, 2005, the QEZE tax reduction credit is generally available for up to 14 years for taxpayers that continue to qualify.



Schedule G – Beneficiary's and fiduciary's share of QEZE income (see instructions)

A Beneficiary's name (same as on Form IT-205, Schedule C)	B Identifying number	C Share of QEZE income
Total		.00
		.00
Fiduciary		.00

Schedule H – Related entities

List the names and EINs of any business entities related to the QEZE. Use additional sheets if necessary. Use the definition of *related persons* in the instructions to determine if an entity is related.

Name	EIN

Schedule I – Valid business purpose for QEZEs first certified prior to August 1, 2002 (see instructions)

If you are claiming that the QEZE was formed for a valid business purpose, mark an **X** in the box and submit a notarized statement describing in detail how your QEZE meets the valid business purpose test

(continued)



Claim for QEZE Tax Reduction Credit

Section 2 – For QEZEs first certified on or after April 1, 2005 (see Important information in the instructions)

	All filers enter tax period:	beginning	ending
Note: You must submit all pages (1 through 8) w	ith your return. All taxpayers m	nust complete the	information above Section 1 on
page 1 and then complete either Section 1 (pages	s 1 through 4) or Section 2 (pag	ges 5 through 8). D	o not complete both sections.

Name(s) as shown on your return	Taxpayer identification number
Name of empire zone (EZ)	
Name of qualified empire zone enterprise (QEZE) business	Employer identification number (EIN) of QEZE

Date (mm-dd-yyyy) of first certification by Empire State Development (submit copies of all certificates of eligibility and EZ retention certificates)

Schedule J – Employment test for QEZEs first certified on or after April 1, 2005 (see instructions)

Part 1 – EZ employment – Computation of the employment number within all EZs for the current tax year and the four-year base period. Include employees within all EZs, even if you are not certified in all of those zones (see instructions).

Current tax year employment numbe	r	March 31	June 30	September 30	December 31	Total			
Number of full-time e within all EZs	employees								
34 Current tax year	4 Current tax year employment number within all EZs (do not round; see instructions)								
Base period employment number	Tax year ending <i>(mm-yy</i>)	March 31	June 30	September 30	December 31	Total			
Number in base year one									
Number in base year two									
Number in base year three									
Number in base year four									
Total number of full-	Total number of full-time employees within all EZs in the base period								
35 Base period employment number within all EZs (do not round; see instructions)							35		
36 Does the amoun	36 Does the amount on line 34 exceed line 35? (see instructions) Yes No								

If No, stop; you are not eligible for the QEZE tax reduction credit.

(continued)



Part 2 – New York State employment – Computation of the employment number in New York State for the current tax year and the four-year base period (*see instructions*).

Current tax year employment numbe	ər	March 31	June 30	September 30	December 31	Total	
Number of full-time inside New York Sta							
7 Current tax year employment number in New York State (do not round)							37
Base period employment number	Tax year ending <i>(mm-yyy</i>	y) March 31	June 30	September 30	December 31	Total	
Number in]
base year one							
Number in							
base year two							
Number in							
base year three							
Number in							
base year four							
Total number of full-	time employee	es in New Yo	ork State for the	e base period			1
38 Base period employment number in New York State (<i>do not round</i>)							38
39 Does the amount on line 37 exceed the amount on line 38? (see instructions)							

If No, stop; you are not eligible for the QEZE tax reduction credit.

Schedule K – Computation of test year employment number within the EZs in which you are certified

Test year <i>(mm-yyyy)</i> to	March 31	June 30	September 30	December 31	Total		
Number of full-time employees within the EZs							
40 Test year employment number within the EZs in which you are certified <i>(see instructions)</i>							

Schedule L – Employment increase factor (see instructions)

41	Current year employment number within the EZs in which you are certified (see instructions)			41		
42	Test year employment number within the EZs in which you are certified (from line 40)			42		
43	Subtract line 42 from line 41		43			
44	Divide line 43 by line 42 (round the result to the fourth decimal place;					
	if line 42 is zero and line 41 is greater than zero, enter 1)	44				
45	Divide line 43 by 100 (round the result to the fourth decimal place)	45				
46	Employment increase factor (enter the greater of line 44 or 45, but not more than 1.	0)		46		
	Partnerships: Enter the line 46 amount on Form IT-204, line 133.					
	All others: Enter the line 46 amount on line 59.					



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65

.00

.00

Sc	hedule M – Zone allocation factor (see instructions) A – EZ		B – New York State
47	Average value of property (see instructions) 47	.00 47	.00
48	EZ property factor (divide line 47, column A, by line 47, column B; round the result to the fourth decimal	place) 48	
49	Wages and other compensation of employees <i>(see instr.)</i> 49	.00 49	.00
50 51 52			
Sc	hedule N – Tax factor		
53	Enter your tax from Form IT-201, line 39; Form IT-203, line 38; Form IT-205, line 6 (full-year residen estate or trust); or Form IT-205-A, line 11 (nonresident estate or trust or part-year resident trust)		.00
54			.00
55	New York adjusted gross income (see instructions)		.00
56	Divide line 54 by line 55 (the result cannot exceed one; round the result to the fourth decimal place)		
57	7 Multiply line 53 by line 56; this is your tax factor (<i>enter here and on line 61</i>)		.00
Sc	hedule O – QEZE tax reduction credit (see instructions)		
58	Tax year of the business benefit period; benefit period factor (see instructions)		
59	Employment increase factor (from line 46)	59	
60	Zone allocation factor (from line 52)	60	
61	Tax factor (from line 57)		.00
62			.00
63	Tax due before credits (see instructions)		.00
64	Credits applied against the tax before this credit (see instructions)		.00

65 Net tax due (subtract line 64 from line 63)

QEZE tax reduction credit used for the current tax year (see instructions)



66

Schedule P – Beneficiary's and fiduciary's share of QEZE income (see instructions)

C Share of QEZE income	B Identifying numb	A Beneficiary's name (same as on Form IT-205, Schedule C)
.00		Total
.00		
.00		
_		Fiduciary

Schedule Q – Related entities

List the names and EINs of any business entities related to the QEZE. Use additional sheets if necessary. Use the definition of *related persons* in the instructions to determine if an entity is related.

Name	EIN

