



COVID-19 Capital Costs Credit

IT-657

Tax Law – Sections 47 and 606(nnn)

Submit this form with Form IT-201, IT-203, IT-204, or IT-205.

| | |
|----------------------------|---------------------------------------|
| Name(s) as shown on return | Identifying number as shown on return |
| | |

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Schedule A: Partner's, shareholder's, or beneficiary's share of credit (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 from that entity, complete the following information for each partnership, New York S corporation, or estate or trust. For *Type*, enter **P** for partnership, **S** for S corporation, or **ET** for estate or trust.

| A Name of entity | B Type | C EIN | D Certificate number | E Share of credit |
|--|-----------|----------|-------------------------|----------------------|
| | | | | .00 |
| | | | | .00 |
| | | | | .00 |
| Total from any additional Forms IT-657 | | | | .00 |
| 2 Total (add column E amounts) | | | | 2 .00 |

Fiduciary: Include the line 2 amount on line 3.

All others: Enter the line 2 amount on line 7.

Schedule B: Beneficiary's and fiduciary's share of credit (see instructions)

| 3 Total (enter amount from line 2) | | 3 | .00 |
|---|-------------------------|----------------------|-----|
| A Beneficiary's name (same as on Form IT-205, Schedule C) | B Identifying number | C Share of credit | |
| | | .00 | |
| | | .00 | |
| | | .00 | |
| Total from any additional Forms IT-657 | | .00 | |
| 4 Share of credit allocated to beneficiaries (add column C amounts) | | 4 | .00 |
| 5 Fiduciary's share of credit (subtract line 4 from line 3; enter the result here and on line 8) | | 5 | .00 |



Schedule C: Computation of credit (see instructions)

| | | | |
|--|----------|---|--------------|
| | 6 | | |
| Partner, S corporation shareholder, beneficiary | 7 | Enter the amount from line 2 | 7 .00 |
| Fiduciary | 8 | Enter the amount from line 5 | 8 .00 |
| | 9 | Total credit (add lines 7 and 8; see instructions) | 9 .00 |

Schedule D: Recapture of credit (see instructions)

| | A Certificate number | B Amount of revoked credit |
|--|--------------------------------|--------------------------------------|
| | | .00 |
| | | .00 |
| | | .00 |
| Total from any additional Forms IT-657 | | .00 |
| 10 Total (add column B amounts) | 10 | .00 |

Individual, partner, S corporation shareholder and beneficiary: Enter the line 10 amount and code **657** on Form IT-201-ATT, line 20, or Form IT-203-ATT, line 19.

Partnership: Enter the line 10 amount and code **657** on Form IT-204, line 148.

Fiduciary: Include the line 10 amount on Form IT-205, line 12.

