



Department of Taxation and Finance

New York Youth Jobs Program Tax Credit

Tax Law – Section 210-B.36

CT-635

All filers enter tax period:

beginning

ending

Legal name of corporation

Employer identification number (EIN)

File this form with Form CT-3, CT-3-A, or CT-3-S. You **must** complete a **separate** Form CT-635 for each certificate of tax credit. Submit a copy of the certificate with your return.

All filers **must** complete line A.

A Are you claiming this credit as a corporation that **earned** the credit (not as a corporate partner that received a share of the credit from a partnership)? (mark an **X** in the appropriate box; see instructions) Yes ☐ No ☐

C corporations

If Yes, complete lines B through G and Schedules A and B.

If No, and you are claiming this credit as a corporate partner, complete lines B, C, D, G and Schedules A, B, and C.

New York S corporations

If Yes, complete lines B through G and Schedule A.

If No, and you are claiming this credit as a corporate partner, complete lines B, C, D, G and Schedules A and C.

B Name of the business certified by the NYS Department of Labor to participate in the New York Youth Jobs Program..... •

C Certified business's EIN •

D Certificate number (from the certificate of tax credit) •

E Number of certified youth employed full-time and included in this claim for credit •

F Number of certified youth employed part-time and included in this claim for credit •

G Program year (from the certificate of tax credit) •

Schedule A: Credit for certified youths

| | | | | |
|----|---|---|----|----------------------|
| 1 | New York youth jobs program tax credit (see instructions) | • | 1 | <input type="text"/> |
| 1a | Enter the line 1 totals from all additional Forms CT-635 | • | 1a | <input type="text"/> |
| 2 | Partner: Enter your share of the credit from your partnership from line 13 | • | 2 | <input type="text"/> |
| 3 | Total credit (see instructions) | • | 3 | <input type="text"/> |

Schedule B: Calculation of tax credit used, refunded, or credited as an overpayment to the next tax year. New York S corporations: Do not complete this schedule.

| | | | |
|----|--|----|--|
| 4 | Tax due before credits (see instructions) | 4 | |
| 5 | Tax credits claimed before this credit (see instructions) | 5 | |
| 6 | Subtract line 5 from line 4 | 6 | |
| 7 | Minimum tax (see instructions) | 7 | |
| 8 | Credit limitation (subtract line 7 from line 6; if zero or less, enter 0) | 8 | |
| 9 | Credit to be used this year (enter the lesser of line 3 or line 8 here and on your franchise tax return) | 9 | |
| 10 | Unused tax credit available as a refund or as an overpayment (subtract line 9 from line 3) | 10 | |
| 11 | Tax credit to be refunded (limited to the amount on line 10; enter here and on your franchise tax return) | 11 | |
| 12 | Amount to be applied as an overpayment to next year's tax (subtract line 11 from line 10; enter here and on your franchise tax return) | 12 | |

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Schedule C: Partnership information (see instructions)

| A Name of partnership | | B Partnerships's EIN | C Credit amount allocated |
|--|--|-------------------------|------------------------------|
| Total column C amounts from additional Forms CT-635, if any | | | |
| 13 Total credit allocated from partnerships (add column C amounts; enter here and on line 2) | | 13 | |

