



# Farm Employer Overtime Credit

Tax Law – Sections 42-a 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

All filers **must** complete lines A and B.

**A** Did you receive an advance payment during this tax year? (include on line 12; see instructions) ..... Yes  No

If you received an advance payment, enter the certificate number:

**B** Are you claiming this credit as an individual (sole proprietor), partnership, or fiduciary of an estate or trust that **earned** the credit (not as a partner, shareholder, or beneficiary, receiving a share of the credit)? (mark an **X** in the appropriate box; see instructions) ..... Yes  No

If **Yes**, complete lines C through F. Also, complete Schedules A, D, and Forms IT-661-ATT. Fiduciary, also complete Schedule C.

If **No**, complete Schedules B and D. Fiduciary, also complete Schedule C.

**C** Is your federal gross income from farming at least two-thirds of your federal gross income from all sources in excess of \$30,000 for the tax year? (see instructions) ..... Yes  No

If you marked an **X** in the *No* box on *line A* and an **X** in the *No* box on *line C*, **Stop**: you do not qualify for the credit.

**D** Enter the name, employer identification number (EIN), and physical address of the farm.

Business name		EIN	
Number and street	City	State	ZIP code

**E** Is more than 50% federal gross income from farming from the sale of wine or cider? (see instructions) ... Yes  No

**F** Enter the total number of unique farm employees from all forms IT-661-ATT (see instructions) .....

## Schedule A – Individual (including sole proprietor), partnership, and estate or trust (see instructions)

1	Enter the total of column I amounts from Forms IT-661-ATT (see instructions) .....	1	.00
2	Tax credit rate (118%) .....	2	<b>1.18</b>
3	Farm employer overtime credit (multiply line 1 by line 2) .....	3	.00

**Individuals and partnerships:** Enter the line 3 amount on line 8.

**Fiduciaries:** Include the line 3 amount on line 5.

(continued)

**Schedule B – 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 farm employer overtime credit from that entity, complete the following information for each partnership, 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 Employer ID number	D Certificate number	E Share of credit	F Advance payment
				.00	.00
				.00	.00
				.00	.00
				.00	.00
Total column E and F amounts from additional forms IT-661, if any .....				.00	.00
<b>4</b> Total (add column E and F amounts; enter the column E amount on line 9 and the column F amount on line 12.) .....				<b>4</b>	.00

**Schedule C – Beneficiary’s and fiduciary’s share of credit** (see instructions)

<b>5</b> Total (fiduciaries: add lines 3 and line 4, column E) .....	<b>5</b>	.00
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A Beneficiary’s name (from Form IT-205, Schedule C)	B Identifying number	C Share of credit
		.00
		.00
		.00
		.00
Total column C amounts from additional forms IT-661, if any .....		.00
<b>6</b> Share of credit allocated to beneficiaries (add column C amounts) .....		<b>6</b>
<b>7</b> Fiduciary’s share of credit (subtract line 6 from line 5; enter here and on line 10) .....		<b>7</b>

**Schedule D – Computation of credit** (see instructions)

<b>Individuals and partnerships</b>	<b>8</b>	Enter the amount from line 3 .....	<b>8</b>	.00
<b>Partners, S corporation shareholders, beneficiaries</b>	<b>9</b>	Enter the amount from line 4, column E .....	<b>9</b>	.00
<b>Fiduciaries</b>	<b>10</b>	Enter the amount from line 7 .....	<b>10</b>	.00
	<b>11</b>	<b>Total credit</b> (add line 8 through 10) .....	<b>11</b>	.00
	<b>12</b>	Advance payment received (see instructions) .....	<b>12</b>	.00
	<b>13</b>	<b>Net credit</b> (see instructions) .....	<b>13</b>	.00