



Department of Taxation and Finance
Claim for Earned Income Credit
New York State • New York City
Tax Law - Section 606(d)

IT-215

Submit this form with Form IT-201 or IT-203.

Name(s) as shown on return	Your Social Security number
A AND B A	490549999

- 1 Did you claim the federal earned income credit? If **No**, stop; you do not qualify for these credits. 1 Yes ☒ No ☐
- 2 Is your investment income (see instructions) greater than \$11,600? If **Yes**, stop; you do not qualify for these credits. 2 Yes ☐ No ☒
- 3 Is your federal filing status *Married filing separate* and do you meet the requirements to be considered unmarried for the purposes of the earned income credit? 3 Yes ☐ No ☒
- 4 Did you claim qualifying children on your **federal** Schedule EIC? If **No**, see instructions. 4 Yes ☒ No ☐
If **Yes**, in the spaces below, list up to three of the same children you claimed on federal Schedule EIC.
If you claimed more than three, see instructions.

1st Child	First name	MI	Last name	Suffix	Relationship
	C		A		SON
	No. of months lived with you	Full-time student*	Person with disability*	Social Security number	Date of birth (mmddyyyy)
	12	<input type="checkbox"/>	<input type="checkbox"/>	490547777	01012014
2nd Child	First name	MI	Last name	Suffix	Relationship
	No. of months lived with you	Full-time student*	Person with disability*	Social Security number	Date of birth (mmddyyyy)
		<input type="checkbox"/>	<input type="checkbox"/>		
3rd Child	First name	MI	Last name	Suffix	Relationship
	No. of months lived with you	Full-time student*	Person with disability*	Social Security number	Date of birth (mmddyyyy)
		<input type="checkbox"/>	<input type="checkbox"/>		

* Mark an **X** in these boxes **only** if you checked **Yes** in the same box on your federal Schedule EIC (box 4a or 4b).

- 5 Is the IRS figuring your **federal** earned income credit (EIC) for you? If **Yes**, complete lines 6 through 9 (also lines 21, 23, and 24 if you are a part-year New York State resident, and line 28 if you are a part-year New York City resident).
The Tax Department will calculate your New York State and, if applicable, your New York City earned income credit credit for you. If **No**, complete lines 6 through 17 (and lines 18 through 26 if you are a part-year New York State resident).
New York City residents must complete the **Worksheet C, New York City earned income credit, in the instructions**.
Part-year New York City residents must also complete line 28 on the back of this claim form. 5 Yes ☐ No ☒

Whole dollars only

- 6 Wages, salaries, tips, etc., from **Worksheet A** line 3, in the instructions 6 9999.00
- 7 Earned income adjustments (see instructions). 7 .00
- 8 Business income or loss (see instructions) 8 .00
- Employer identification number (see instructions)
- 9 Enter your federal adjusted gross income (from Form IT-201, line 19, or Form IT-203, line 19, Federal amount column) 9 9999.00
- 10 Amount of federal EIC claimed (from federal Form 1040, line 27) 10 3392.00
- 11 New York State earned income credit (NYS EIC) rate 30% (.30) 11 .30
- 12 Tentative NYS EIC (multiply line 10 by line 11; see instructions) 12 1018.00

Complete **Worksheet B** on the back page before continuing.

- 13 Enter the amount from **Worksheet B**, line 5, on the back of this form 13 .00
- 14 New York State household credit (from Form IT-201, line 40, or Form IT-203, line 39). 14 9000
- 15 Enter the smaller of line 13 or line 14 15 .00
- 16 Allowable New York State earned income credit (subtract line 15 from line 12; see instructions). 16 1018.00
- 17 Complete only if you filed your federal return as Married filing joint, but are required to file your New York State return as Married filing separate return (see instructions). 17 .00
- Joint federal adjusted gross income00

NO HANDWRITTEN ENTRIES ON THIS FORM

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Part-year New York State resident earned income credit

Lines 18 through 26 apply only to part-year New York State residents claiming the New York State earned income credit.

18	Enter your New York State earned income credit (from line 16 or line 17)	18	.00
19	Enter the amount from Form IT-203, line 42. - If line 19 is equal to or more than line 18, stop .	19	.00
20	Subtract line 19 from line 18	20	.00
21	Enter the amount from Form IT-203-ATT, line 31 (If you do not have to file Form IT-203-ATT, leave blank and continue on line 22 below.) - If Form IT-215, line 21, is equal to or more than Form IT-215, line 20, stop. Do not continue with this calculation. Enter the amount from line 20 above on Form IT-203-ATT, line 32. - If Form IT-215, line 21, is less than Form IT-215, line 20, enter the amount from line 20 above on Form IT-203-ATT, line 32, and continue on line 22 below.	21	.00
22	Subtract line 21 from line 20	22	.00
23	Amount from line 19, Column D, of <i>Part-year resident income allocation worksheet</i> , in Form IT-203-I. (see instructions)	23	.00
24	Enter the amount from Form IT-203, line 19, <i>Federal amount</i> column	24	.00
25	Divide line 23 by line 24 (round the result to the fourth decimal place). This amount cannot exceed 100% (1.0000) (see instructions).	25	
26	Multiply line 22 by line 25. Enter the result here and on Form IT-203-ATT, line 10	26	.00

New York City earned income credit (full-year and part-year New York City residents)

27	Enter the amount from Worksheet C, here and on Form IT-201, line 70, or Form IT-203-ATT, line 11. Part-year New York City residents must also complete line 28 below.	27	.00		
28	Part-year New York City adjusted gross income Enter the amounts from Worksheet C, lines 6 and 7.	28A	.00	28B	.00

Worksheet B

1	New York State tax (from Form IT-201, line 39, or Form IT-203, line 38)	1	.00
2	Resident credit (see instructions)	2	.00
3	Accumulation distribution credit (see instructions)	3	.00
4	Add lines 2 and 3	4	.00
5	Subtract line 4 from line 1 (If line 4 is more than line 1, enter 0). Enter here and on line 13 on page 1 of this form	5	.00

NO HANDWRITTEN ENTRIES ON THIS FORM

