

Claim for Earned Income Credit

1994 IT-215

For office use only



Carefully read *Information and Instructions on the back.*
This is a scannable form.
Please file original with the Tax Department.

Print or Type	Last name		First name and middle initial (if joint claim, enter both names)	
	Mailing address (number and street or rural route)			Apartment number
	City, village or post office		State	ZIP code

Your social security number
 Spouse's social security number
 New York State county of residence

- Have you already filed your 1994 New York State income tax return? (see Information and Instructions on the back) . Yes No
 If **No**, you must file this claim with a return.
- Did you file a 1994 federal Schedule EIC and claim qualifying children? . Yes No
 If **No**, go directly to line 3.
 If **Yes**, fill in the following for the same children claimed on federal Schedule EIC.

	Last name	First name and middle initial	Social security number	Year of birth
Child 1				1 9
Child 2				1 9

- Is the IRS figuring your federal earned income credit for you? . Yes No
 If **Yes**, complete lines 4 through 7 (and lines 16, 18 and 19 if you are a part-year resident) and attach this form to your New York State income tax return. The Tax Department will compute your New York State earned income credit for you.
 If **No**, complete lines 4 through 11 (and lines 12 through 21 if you are a part-year resident) (see Information and Instructions on the back).

4 Wages, salaries, tips, etc. (from federal Form 1040EZ, line 1 or 1040A, line 7 or 1040, line 7)	4.				
Before completing lines 5, 6 and 7, see Information and Instructions on the back.					
5 If you received a taxable scholarship or fellowship grant that wasn't reported on a W-2 form, enter that amount here (from your federal Earned Income Credit Worksheet, line 2)	5.				
6 Nontaxable earned income (from your federal Earned Income Credit Worksheet, line 4)	6.				
7 Business income or loss (from your federal Form 1040 Instructions, Earned Income Credit Worksheet, line 5)	7.				
• Employer Identification Number (see Information and Instructions) <input type="checkbox"/>					
• Check applicable box The amount on line 7 is a profit <input type="checkbox"/> or loss <input type="checkbox"/>					
8 Amount of federal EIC claimed (from federal Form 1040EZ, line 7 or 1040A, line 28c or 1040, line 56. Federal alternative minimum tax filers - see instructions.)	8.				
9 New York State EIC rate 7½% (.075)	9.				0 7 5
10 New York State earned income credit (multiply line 8 by line 9; see Information and Instructions on the back)	10.				
11 If your New York State filing status is ③, married filing separate return, the credit on line 10 can be divided between spouses in any manner you wish. Enter on line 11 the amount of credit from line 10 you are claiming and enter your joint federal adjusted gross income below	11.				
• federal adjusted gross income (from federal form 1040EZ, line 3 or 1040A, line 16 or 1040, line 31)					

Computation of Part-Year Resident Earned Income Credit — lines 12 - 21 apply ONLY to part-year residents claiming the earned income credit. ALL OTHERS STOP HERE!

12 Enter New York State earned income credit (from line 10 or 11 above)	12.				
13 Enter the amount from Form IT-203, line 55	13.				
If line 13 is equal to or more than line 12, STOP! You do not have excess EIC. If line 13 is less than line 12, continue on line 14 below.					
14 Subtract line 13 from line 12. This is your excess earned income credit. Enter here and on line 15 on the back of this form	14.				

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Sign Here	Your signature	Date
	Firm's name (or yours, if self-employed)	Preparer's social security number			Spouse's signature (if joint claim)	Date
	Firm's address	Employer identification number				

