Department of Taxation and Finance

IT-661

## 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 numbe	r as shown	on return
All filers <b>must</b> complete lines A and B.					
A Did you receive an advance payment during	g this tax year? (include o	n line 12; see instructi	ions)Yo	es 🗌	No 🗌
If you received an advance payment, enter	the certificate number:				
<b>B</b> Are you claiming this credit as an individual trust that <b>earned</b> the credit (not as a partne credit)? (mark an <b>X</b> in the appropriate box; see	r, shareholder, or benefic	iary, receiving a sha	are of the	es 🗌	No 🗌
If Yes, complete lines C through F. Also, co Schedules A, D, and Forms IT-661-ATT. Fiduciary, also complete Schedule C.		complete Schedule iary, also complete			
C Is your federal gross income from farming a sources in excess of \$30,000 for the tax ye				es 🗌	No 🗌
If you marked an <b>X</b> in the <b>No</b> box on line C, <b>must be repaid.</b> See instructions for lines		e credit. Any amoun	t of advance pa	ayment re	eceived
<b>D</b> Enter the name, employer identification nur	nber (EIN), and physical	address of the farm			
Business name			EIN		
Number and street	City		State ZI	P code	
E Is more than 50% federal gross income from	n farming from the sale of	wine or cider? (see	instructions) Yo	es 🗌	No 🗌
<b>F</b> Enter the total number of unique farm empl	oyees from all forms IT-6	61-ATT (see instructi	ions)		
Schedule A: Individual (including sol	e proprietor), partne	rship, and estate	e or trust (se	e instruc	tions)
1 Enter the total of column I amounts from Form:					.00
<ul><li>Tax credit rate (118%)</li><li>Farm employer overtime credit (multiply line 1 by</li></ul>					<b>1.18</b>
Individuals and partnerships: Enter the line Fiduciaries: Include the line 3 amount on line				(0	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.

Α		C	D				F
Name of entity		,, , , , , , , , , , , , , , , , , , ,		cate number Share o punt entered in column f)		credit	Amount of column E received as an advance paymen
						.00	
						.00	
						.00	
						.00	
otal column E and F amounts from additional forms IT-661, if any						.00	
Total (add column E and F amo		ter the column E amount on line		4		.00	
the column amount on the	2.)					:00	
hedule C: Beneficiar	y's ar	nd fiduciary's share	of credit (se	ee instru	ıctions)		
5 Total (fiduciaries: add lines 3 and line 4, column E)						5	
A B Beneficiary's name (from Form IT-205, Schedule C) Identifying number						C Share of credit	
tal column C amounts from ad	ditional	I forms IT-661 if any					
otal column C amounts from additional forms IT-661, if any						6	
7 Fiduciary's share of credit (subtract line 6 from line 5; enter here and on line 10)					7		
chedule D: Calculation	n of c	credit (see instructions)	)				
dividuals and partnerships		Enter the amount from line 3				8	
rtners, S corporation areholders, beneficiaries							
duciaries	10	Enter the amount from line 7	7			10	
	11	Total credit (add line 8 through	gh 10)			11	

13 Net credit (see instructions) \_\_\_\_\_

13

.00