



# Claim for Volunteer Firefighters' and Ambulance Workers' Credit

Tax Law – Section 606(e-1)

Submit this form with Form IT-201.

### Part 1: Enter identifying information

Your name as shown on return	Your Social Security number
Spouse's name	Spouse's Social Security number

### Part 2: Determine eligibility (for lines 1 through 3, mark an X in the appropriate box)

- 1 Were you (and your spouse if filing a joint return) a New York State resident for all of this tax year? .....  1 Yes  No   
 If you marked an X in the No box, stop; you do not qualify for this credit.
- 2 Were you an active volunteer firefighter or ambulance worker for all of this tax year who **did not** receive a real property tax exemption for these services (see instructions)? .....  2 Yes  No   
 If your filing status is *Married filing joint return*, continue with line 3.  
 For any other filing status:  
 If you marked an X in the No box, stop; you do not qualify for this credit.  
 If you marked an X in the Yes box, continue with Part 3.
- 3 If your filing status is *Married filing joint return*, was your spouse an active volunteer firefighter or ambulance worker for all of this tax year who **did not** receive a real property tax exemption for these services (see instructions)? .....  3 Yes  No   
 If you marked an X in the No box at both lines 2 and 3, stop; you do not qualify for this credit.

### Part 3: Enter qualifying information (see instructions)

Name of qualifying volunteer	Volunteer fire company/department or ambulance company	Address of volunteer fire company/department or ambulance company

### Part 4: Determine credit amount

- 4 If you marked an X in the Yes box at either line 2 or line 3, but not both enter 200.  
 If you marked an X in the Yes box at both lines 2 and 3, enter 400 .....  4  .00  
 Enter the line 4 amount and code 354 on Form IT-201-ATT, line 12.

