Include with your return.

For the calendar year 2021 or fiscal year beginning $(M, M_1 D, D_1 2, 0, 2, 1)$ and ending $(M, M_1 D, D_1 Y, Y, Y, Y)$.

Your Nam		/our Social Security or Employer Identification Number			
Spouse's	Name as shown on Form 140, 140PY, 140NR, 140X, 140-SBI, 140NR-SBI, 140PY-SBI or 140X-SBI (if a joint return) Spous	e's Social	Security Number		
Part 1	Business Information				
1	Business name:	I			
2	Business location:	1			
		1			
3	Employer Identification Number:				
Part 2	Credit Computation - All taxpayers must complete Part 2			_	
4	Number of qualifying employees placed on active duty during the current taxable year				
5	Credit per employee		1,000		
6 7	Multiply the number on line 4 by the amount on line 5 Amount of pass through credit from Partnership: Enter the amount from Form 333-P, line 4			00	
8	Amount of pass through credit from S Corporation: Enter the amount from Form 333-S, line 4			00	
9	Total Credit: Add lines 6, 7, and 8. Enter the total			00	
Part 3	Partner's Share of Credit				
Partners					
	not complete Part 5 and 6 of Form 333.				
	nplete Form 333-P separately for each partner. nish each partner with a copy of Form 333-P.				
	• • • • • • • • • • • • • • • • • • • •				
Part 4	S Corporation Credit Election and Shareholder's Share of Credit				
10	The S Corporation has made an irrevocable election for the taxable year ending $[M,M]D,D]Y,Y,Y,Y]$ to (check only one box):				
	(a) Claim the credit for employing national guard members, as shown on Part 2, line 9 for the taxable year mentioned above;				
	 OR (b) Pass the credit for employing national guard members, as shown on Part 2, line 9 for the taxable year mentioned above, through to its shareholders. 				
	Signature Title Date				
	 If box (a) is checked, continue to Part 5. 				
	• If box (b) is checked:				
	Complete a separate Form 333-S for each shareholder.				
	• Furnish each shareholder with a copy of Form 333-S			- · · ·	
	 S Corporations that have a carryover available from a credit in a prior year must complete Pa 19. If no carryover is available do not complete Part 5 and Part 6. 	n 5; and	Part 6, lines 18	and	
	13. Il no canyovel is avaliable do not complete Falt J and Falt U.				

Part 5 Available Credit Carryover

	(a) Taxable Year from which you are carrying a credit	(b) Original Credit Amount	(c) Amount Previously Used		(d) Available Carryover: Subtract column (c) from	
					column (b).	
11	2016	00		00		00
12	2017	00		00		00
13	2018	00		00		00
14	2019	00		00		00
15	2020	00		00		00
16 Total Available Carryover: Add lines 11 through 15, column (d)						00

Part 6 Total Available Credit

17	Current year's credit:		
	• Individuals, C Corporations, S Corporations that are claiming the credit, or exempt organizations		
	with UBTI: Enter the amount from Part 2, line 9 on line 17.		
	• Individuals: If you <i>did not make the Small Business Income election</i> : Enter this amount on		
	Arizona Form 301, Part 1, line 14, column (a).		
	• Individuals: If you <i>made the Small Business Income election</i> : Enter this amount on <i>Arizona Form 301-SBI, Part 1, line 10, column (a).</i>		
	• C Corporations, S Corporations that are claiming the credit, and exempt organizations with UBTI:		
	Also, enter this amount on Arizona Form 300, Part 1, line 9, column (a)		
		17	00
18	Available carryover from Part 5, line 16, column (d).		
	• Individuals: If you <i>did not make the Small Business Income election</i> : Enter this amount on		
	Arizona Form 301, Part 1, line 14, column (b).		
	• Individuals: If you <u>made the Small Business Income election</u> : Enter this amount on Arizona		
	Form 301-SBI, Part 1, line 10, column (b).		
	• C Corporations, S Corporations that are claiming the credit, and exempt organizations with UBTI:		
	Also, enter this amount on Arizona Form 300, Part 1, line 9, column (b)	18	00
19	Total Available Credit: Add lines 17 and 18 and enter the total.		
15			
	• Individuals: If you <i>did not make the Small Business Income election</i> : Enter this amount on		
	Arizona Form 301, Part 1, line 14, column (c).		
	Individuals: If you <i>made the Small Business Income election</i> : Enter this amount on <i>Arizona</i>		
	Form 301-SBI, Part 1, line 10, column (c).		
	• C Corporations, including S Corporations that are claiming the credit, and exempt organizations		
	with UBTI: Also, enter this amount on Arizona Form 300, Part 1, line 9, column (c)	19	00

Your Name (as shown on Form 333, page 1)	Your Social Security or Employer Identification Number	
		Page, of

	Form 333-1	Form 333-1 Qualifying Employees					2021	
		(a)	(b) Social Security	(c)	(d) Date placed	(e) Was this employee in a full-time employment position when placed	during the tax exceeds the period, includi	(f) oyee serve on active duty kable year for training that required annual training ng any activation for federal
	En	nployee Name	Number	Date of Hire	on Active Duty	on active duty?	or state conting	gencies or emergencies?
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
	If you have more than 16 qualifying employees, complete additional schedules and include with the form.							