Credit for Qualified Facilities

2021

Include this completed form and the Certification of Qualification from the Arizona Commerce Authority with your return.

	For the calenda	ır year 2021 or fiscal year beg	inning $[\underline{M},\underline{M},\underline{D},\underline{D},\underline{2},\underline{0},\underline{2},\underline{1}]$	1 and ending M	MID.DIY.	<u>Y,Y,Y</u>].		
	Name as shown on Form 140, 140PY, 140NR, 140X, 140-SBI, 140PY-SBI, 140NR-SBI, 140X-SBI, Social Sec 99T, 120, 120A, 120S, 120X, or 165					on Number		
Par	t 1 Listing of	Post-Approved Qualified	Facilities and Apportio	ned Credit Am	ount			
		r which you are entitled to claim	a credit during this taxable y	ear. If you have mo	ore than two	facilities, include		
addii	tional schedules. Se			4.5				
	(a) Arizona Commerce Authority Post-Appro		oval Information	(b) Apportioned Credi	t			
	(a)1 Allocation Year	(a)2 First Installment Tax Year Ending	(a)3 Post-Approval Number	Amount				
1	YYYY	M MID DIY Y Y Y			00			
2	YYYY	M MID DIY Y Y Y			00			
3		all additional schedules			00			
4 5	Form 349-P, Part 1	unt of this credit passed through, line 3c unt of this credit passed through	4	,	00			
3		, line 3c	·		00			
6		s 1 through 5, column (b). Enter that amount	-		00			
Dar	+ 2 Full-Time I	Employment Positions Va	cant More Than 150 De	ave				
	'	ne employment positions which w		•	dit was appre	oved. If positions		
		n two facilities, include additional				·		
	(a) Allocation Year	(b) Post-Approval Number	(c) Number of Employees	(d) Reduction		(e) Total		
7	YYYY			\$4,000.00)	00		
8	YYYY			\$4,000.00)	00		
9	Total from all addition	onal schedules			9	00		
10	Subtotal: Add lines	s 7 through 9, column (e). Enter th	ne total. This is the amount of	your credit reduction	n. 10	00		
	t 3 Net Credit							
11		unt on line 10 from the amou			an 11	00		
Par	t 4 Credit Rec	apture						
12			qualified facility was terminate	ed or revoked	12 M M I	DIYYYY		
13	Date on which the certification of the business as a qualified facility was terminated or revoked Total recapture of apportioned credit for qualified facilities: Enter the total amount(s) of the credit(s) previously claimed for the facility(ies) whose certification was terminated or revoked. If more than							
	one certification has been terminated or revoked, enter the total amount					00		
14 15						00		
						00		
16	Add lines 13 throug	gh 15. Enter the total. This is you	ır total recapture amount			00 ued on page 2 →		
					COHIII	oeu on Dade / 🖚		

Name (as shown on page	l) 	EIN	EIN			
Part 5 S Corpora	ation Credit Flection					
The S Corporation has made an irrevocable election for the taxable year ending M,M,D,D,Y,Y,Y,Y,Y to (check only one box): 17a ☐ Claim the credit for qualified facilities as shown in Part 3, line 11 (for the taxable year indicated above); OR 17b ☐ Pass the credit for qualified facilities as shown in Part 3, line 11 (for the taxable year indicated above), through to its shareholders.						
Cian atura	Tills		Dete			
Provide a complInclude a copy o	Title ough to the shareholders, complete Form 349-S for e eted copy of Form 349-S to each shareholder. If each completed Form 349-S with your tax return. Each completed Form 349-S for your records.	ach shareholder.	Date			
Part 6 Partnersh	iips					
 Provide a compl Include a copy o Keep a copy of e Part 7 Credit Re						
	year(s) in which you took a credit for a business as a een terminated or revoked:	qualified facility whose				
 Individuals that on Form 301, Pa Individuals that p Individuals that p Form 301-SBI, F C Corporations, 	orporations, S Corporations, and exempt organization of the from Part 4, line 16. It from Part 4, line 16. It is a line 29. It is a line 20. It is a lin	enter this amount enter this amount on ate level, and exempt	19	00		
Part 8 Total App	ortioned Credit Claimed This Taxable Ye	ar				
 Individuals, C Conserved by Comparison Partnerships: E S Corporations of Comparison Individuals that on Form 140, line Individuals that of Individuals that of In	electing to pass this credit through to individual share did not make the Small Business Income election to 58; or Form 140NR, line 65; or Form 140PY, line 6 made the Small Business Income election: Also, either 57; or Form 140NR-SBI, line 55; or Form 140PY-Value 56. Also, enter this amount on Form 120, line 22; or Form 22(c). Attack at the corporate level: Also, enter this credit at the corporate level: Also, enter the samount on the state of the corporate level.	eholders: Enter "0". Also, enter this amount 7; or Form 140X, line 45. enter this amount on SBI, line 55; or 120A, line 14; or 97, line 12.	20	00		