Credit for Qualified Facilities

2024

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

For the calendar year 2024 or fiscal year beginning [M,M]D,D]2,0,2,4 and ending [M,M]D,D]Y,Y,Y,Y.

Name as shown on Form 140, 140PY, 140NR, 140X, 140-SBI, 140PY-SBI, 140NR-SBI, 140X-SBI, 99T, 120, 120A, 120S, 120X, or 165

Social Security or Employer Identification Number

Part 1 Listing of Post-Approved Qualified Facilities and Apportioned Credit Amount

List qualified facilities for which you are entitled to claim a credit during this taxable year. If you have more than two facilities, include additional schedules. See instructions.

	(a) Arizona Commerce Authority Post-Approval Information				(b) Apportioned Credit	
	(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	MMDDIYYYY				00
3	Enter the total from all additional schedules			3		00
4	Enter the total amount of this credit passed through from partnerships on Form 349-P, Part 1, line 3c			4		00
5	Enter the total amount of this credit passed through from S Corporations on Form 349-S, Part 1, line 3c			5		00
6		1 through 5, column (b). Enter th amount	•	6		00

Part 2 Full-Time Employment Positions Vacant More Than 150 Days

List the number of full-time employment positions which were vacant for more than 150 days since the credit was approved. If positions were vacant at more than two facilities, include additional schedules. See instructions.

	(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 additio	nal schedules			9	00
10	Subtotal: Add lines	7 through 9, column (e). Enter	the total. This is the amount of	your credit reduction. 1	10	00

Part 3 Net Credit

11	Subtract the amount on line 10 from the amount on line 6. Enter the difference. If less than		
	zero, enter "0"	11	 00

Part 4 Credit Recapture

12	Date on which the certification of the business as a qualified facility was terminated or revoked	12	MDDYYY	(Y
13	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		13	00
14 15	Enter the partner's portion of this credit to be recaptured from Form 349-P, Part 2, line 7 Enter the S Corporation shareholder's portion of this credit to be recaptured from Form 349-S, Part 2, line 7		14	00
16	Add lines 13 through 15. Enter the total. This is your total recapture amount		16 Continued on page	00 2 →

Name (as shown on page 1)	EIN

Part 5 S Corporation Credit Election

- 17 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):
 - **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.

Signature

Title

Date

If passing the credit through to the shareholders, complete Form 349-S for each shareholder.

- Provide a completed copy of Form 349-S to each shareholder.
- Include a copy of each completed Form 349-S with your tax return.
- Keep a copy of each completed Form 349-S for your records.

Part 6 Partnerships

Partnerships passing the credit through to its partners, complete Form 349-P for each partner.

- Provide a completed copy of Form 349-P to each partner.
- Include a copy of each completed Form 349-P with your tax return.
- Keep a copy of each completed Form 349-P for your records.

Part 7 Credit Recapture Summary

18	Enter the taxable year(s) in which you took a credit for a business as a qualified facility whose certification has been terminated or revoked:			
19	Total amount of credit recaptured:			
	 Individuals, C Corporations, S Corporations, and exempt organizations with UBTI: 			
	Enter the amount from Part 4, line 16.			
	• Individuals that did not make the Small Business Income election: Also, enter this amount			
	on Form 301, Part 2, line 28.			
	 Individuals that made the Small Business Income election: Also, enter this amount on 			
	Form 301-SBI, Part 2, line 21			
	 C Corporations, S Corporations that claimed this credit at the corporate level, and exempt 			
	organizations with UBTI: Also, enter this amount on Form 300, Part 2, line 19	19	00)

Part 8 Total Apportioned Credit Claimed This Taxable Year

20	Total apportioned cr	edit for qualified facilities:
20	Total apportioned of	suit ioi quaimeu iacimies.

 Individuals, C Corporations, S Corporations claiming this credit at the corporate level, and 			
exempt organizations with UBTI: Enter the amount from Part 3, line 11.			
Partnerships: Enter "0".			
 S Corporations electing to pass this credit through to individual shareholders: Enter "0". 			
 Individuals that did not make the Small Business Income election: Also, enter this amount 			
on Form 140, line 58; or Form 140NR, line 65; or Form 140PY, line 67; or Form 140X, line 45.			
 Individuals that made the Small Business Income election: Also, enter this amount on 			
Form 140-SBI, line 61; or Form 140NR-SBI, line 59; or Form 140PY-SBI, line 61; or			
Form 140X-SBI, line 61.			
• C Corporations: Also, enter this amount on Form 120, line 22; or Form 120A, line 14; or			
Form 120X, line 22(c).			
 Exempt organizations with UBTI: Also, enter this amount on Form 99T, line 12. 			
 S Corporations that claimed this credit at the corporate level: Also, enter this amount on 			
Form 120S, line 20	20	(00