

For the calendar year 2012 or fiscal year beginning [M,M|D,D|Y,Y,Y,Y] and ending [M,M|D,D|Y,Y,Y,Y].

Attach to your return.

| | |
|--|--|
| Your Name as shown on Form 140, 140PY, 140NR, 140X, 120, 120A, 120S, 120X or 165 | Your Social Security or Employer Identification Number |
| Spouse's Name as shown on Form 140, 140PY, 140NR, 140X (if a joint return) | Spouse's Social Security Number |

Part I Business Information

- 1 Business name: _____
- 2 Business location: _____
- 3 Employer Identification Number: _____

Part II Net Increase in Qualified Employment Positions

| | | |
|---|---|--|
| 4 Average number of qualified employment positions during the current taxable year..... | 4 | |
| 5 Average number of qualified employment positions during the immediately preceding taxable year..... | 5 | |
| 6 Net increase in the number of qualified employment positions: Subtract line 5 from line 4..... | 6 | |
| 7 Number of positions on line 6 that are eligible for any other income tax credit under Arizona law | 7 | |
| 8 Maximum number of positions eligible for the credit: Subtract line 7 from line 6..... | 8 | |

Part III Qualifying New Employees

| | | |
|---|----|--|
| 9 New employees hired during the year | 9 | |
| 10 Qualified new employees..... | 10 | |
| 11 Maximum number of qualifying net new employees: Enter the smaller of line 8 or line 10 | 11 | |

Part IV Credit Calculation for Qualified Employees

| | (a) No. of Qualifying Employees | (b) Qualifying Wages | (c) Percentage | (d) Allowable Credit |
|---|---------------------------------------|-------------------------|-------------------|-------------------------|
| 12 Qualifying Net New Employees..... 12 | | \$.00 | 25% | \$.00 |
| 13 Previously Qualified Employees in the Second Year of Continuous Employment..... 13 | | \$.00 | 33 1/3% | \$.00 |
| 14 Previously Qualified Employees in the Third Year of Continuous Employment..... 14 | | \$.00 | 50% | \$.00 |
| 15 TOTALS..... 15 | | | | \$.00 |

Part V S Corporation Credit Election and Shareholder's Share of Credit

- 16 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):
 - Claim the credit for employment of TANF recipients, as shown on Part IV, line 15, column (d) for the taxable year mentioned above;
OR
 - Pass the credit for employment of TANF recipients, as shown on Part IV, line 15, column (d) for the taxable year mentioned above,
through to its shareholders.

Signature _____ Title _____ Date _____

If passing the credit through to the shareholders, complete lines 17 through 19 separately for each shareholder. Furnish each shareholder with a copy of pages 1 and 2.

- 17 Name of shareholder: _____
- 18 Shareholder's TIN: _____
- 19 Shareholder's share of the amount on Part IV, line 15, column (d).....

| | |
|----|--|
| 19 | |
|----|--|

| | |
|--------------------------------|--|
| Your Name (as shown on page 1) | Your Social Security or Employer Identification Number |
|--------------------------------|--|

Part VI Partner's Share of Credit

Complete lines 20 through 22 separately for each partner. Furnish each partner with a copy of pages 1 and 2.

20 Name of partner: _____

21 Partner's TIN: _____

22 Partner's share of the amount on Part IV, line 15, column (d)

| | | |
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| 22 | | |
|-----------|--|--|

Part VII Available Credit Carryover

| | (a) Carryover From Taxable Year Ending | (b) Original Credit Amount | (c) Amount Previously Used | (d) Available Carryover: <i>Subtract column (c) from column (b).</i> |
|----|--|-------------------------------|----------------------------------|--|
| 23 | 2007 | .00 | .00 | .00 |
| 24 | 2008 | .00 | .00 | .00 |
| 25 | 2009 | .00 | .00 | .00 |
| 26 | 2010 | .00 | .00 | .00 |
| 27 | 2011 | .00 | .00 | .00 |
| 28 | TOTAL AVAILABLE CARRYOVER..... | | | .00 |

Part VIII Total Available Credit

29 Current year's credit: Individuals, corporations, or S corporations that are claiming the credit,
enter the amount from Part IV, line 15, column (d)

| | | |
|-----------|--|--|
| 29 | | |
|-----------|--|--|

- S corporation shareholders: Enter the amount from Part V, line 19.
- Partners of a partnership: Enter the amount from Part VI, line 22.

30 Available carryover from Part VII, line 28, column (d).....

| | | |
|-----------|--|--|
| 30 | | |
|-----------|--|--|

31 Total Available Credit: Add lines 29 and 30.....

| | | |
|-----------|--|--|
| 31 | | |
|-----------|--|--|

- Corporations, including S corporations that are claiming the credit, enter the total here and on Form 300, Part I, line 8.
- Individuals, enter the total here and on Form 301, Part I, line 11.

Your Name (as shown on page 1)

Your Social Security or Employer Identification Number

Form 320-1 (2012)

Qualifying Employees

| | (a) Employee's Name | (b) Social Security Number | (c) Date of Hire | (d) Was this employee an Arizona resident on date of hire? | (e) Was this employee receiving TANF benefits on date of hire? |
|----|------------------------|-------------------------------|---------------------|---|---|
| 1 | | | | | |
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| 24 | | | | | |
| 25 | | | | | |

If you have more than 25 qualifying employees, complete additional schedules.

| | |
|--|--|
| Your Name (as shown on Form 320, page 1) | Your Social Security or Employer Identification Number |
|--|--|

Form 320-2 (2012) Qualifying Employees for Which You are Taking a Credit

| | | (c) | | | (d) | (e) | | | |
|-----------------|---------------------------|---|--|--|-----|--|--|------------------------|------------------------|
| | | Type of Employee (Check the appropriate box.) This employee is a: | | | | Total Wages Paid to the Employee During the Current Taxable Year Less Wages Subsidized as Provided by ARS §46-299 | Maximum Allowable Wages Enter the lesser of column (d) or the maximum allowed below. | | |
| | | 1 st Year Employee c1 | 2 nd Year Employee c2 | 3 rd Year Employee c3 | | | Year 1 \$2000 e1 | Year 2 \$3000 e2 | Year 3 \$3000 e3 |
| Employee's Name | Social Security Number | | | | | | | | |
| 1 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 2 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 3 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 4 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 5 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 6 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 7 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 8 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 9 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 10 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 11 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | .00 | | | | |
| 12 TOTAL: | | | | | .00 | | | | |

• For column (c), add the number of employees in each column c1, c2 and c3, and enter the total for each column on line 12.
 • For columns (d) and (e), add the amounts in each column and enter the total for each column on line 12. 12

If you have more than 11 qualifying employees, complete additional schedules.