

Include with your return.

For the calendar year 2014 or fiscal year beginning MM,DD,2014 and ending MM,DD,YYYY.

Your Name as shown on Form 140, 140PY, 140NR, 140X, 120S 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 1 Qualifying Water Conservation System

- 1 Do you have a conservation plan on file and in effect with the United States Department of Agriculture Soil Conservation Service?..... 1

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If the answer to question 1 is "Yes", enter the following:

2a Date filed 2a MM,DD,YYYY

2b Location of Soil Conservation Office 2b

- 3 Check a box below and indicate the type of change or system installed.

System Changes:

- Unlined field ditch to concrete lined ditch
- Unlined field ditch to underground pipeline
- Unlined field ditch to gated pipes
- Sloping unlevelled surface field to slope on precise grade
- Sloping surface irrigated field to level basin
- Sloping field with surface irrigation to sprinkler
- Surface or sprinkler to trickle (above ground)
- Surface or sprinkler to subsurface trickle (below ground)
- Increasing the size of field ditch to provide larger head
- Unused runoff water to tailwater recovery system
- Other - Please describe:

Part 2 Calculation of the Current Taxable Year's Credit

4 Total amount of expenses for current taxable year.....	4		00
5 Total amount of reimbursement.....	5		00
6 Net amount of qualifying expenses: Subtract line 5 from line 4.....	6		00
7 Current taxable year's credit: Multiply line 6 by 75% (.75)	7		00

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Your Name (as shown on page 1)	Your Social Security or Employer Identification Number
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Part 3 S Corporation – Individual Shareholder’s Share of Credit

Complete lines 8 through 11 separately for each individual shareholder.
 Furnish each individual shareholder with a copy of the completed Form 312.

8 Name of individual shareholder: _____

9 Individual shareholder’s Social Security Number: _____

10 Individual shareholder’s share of the amount of qualifying expense on Part 2, line 6.....	10	00
11 Individual shareholder’s share of the amount on Part 2, line 7	11	00

Part 4 Partnership – Individual Partner’s Share of Credit

Complete lines 12 through 14 separately for each individual partner.
 Furnish each individual partner with a copy of the completed Form 312.

12 Name of individual partner: _____

13 Individual partner’s Social Security Number: _____

14 Individual partner’s share of the amount on Part 2, line 7	14	00
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Part 5 Available Credit Carryover

	(a) Taxable Year from which you are carrying the credit	(b) Original Credit Amount	(c) Amount Previously Used	(d) Available Carryover: Subtract column (c) from column (b).
15	2009	00	00	00
16	2010	00	00	00
17	2011	00	00	00
18	2012	00	00	00
19	2013	00	00	00
20	TOTAL AVAILABLE CARRYOVER: Add lines 15 through 19, column (d)			00

Part 6 Total Available Credit

21 Current year’s credit:
 • Individuals, enter the amount from Part 2, line 7.
 • Individual shareholders of an S corporation, enter the amount from Part 3, line 11.
 • Individual partners of a partnership, enter the amount from Part 4, line 14 **21** 00
 Enter this amount on Arizona Form 301, line 8, column (a).

22 Available credit carryover from Part 5, line 20, column (d)..... **22** 00
 Enter this amount on Arizona Form 301, line 8, column (b).

23 Total Available Credit: Individuals, add line 21 and line 22..... **23** 00
 Enter this amount on Arizona Form 301, Part 1, line 8, column (c).

Individual shareholders of an S Corporation: If you are claiming this credit, you must include the amount from Part 3, line 10, on your Arizona income tax return, under “Other Additions”.