## **Credit for Qualified Facilities**

2014

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

Nam	For the calendar y	rity or lentification Number					
Pa	rt 1 Listing of Po	ost-Approved Qualifie	ed Facilities and App	ortioned Credi	it Amou	nt	
	qualified facilities for v tional schedules. See	which you are entitled to clain instructions.	im a credit during this taxa	able year. If you ha	ave more	than two facilities, inc	lude
	(a) Arizona Commerce Authority Post-Approval Information			(b) Apportioned Credit Amount			
	(a)1 Allocation Year	(a)2 Post-Approval Date	(a)3 Post-Approval Number				
1	YYYY	M MID DIA A A A			00		
2	YYYY	M MID DIA A A A			00		
3	Aggregate total from	all additional schedules	3		00		
4	TOTAL: Add lines 1 t	through 3	4		00		
5 6 7	Total recapture of appror passed through to from Part 1, column (Certification has been Secondarial Secondarial Secondarial Secondarial Check only one box Claim the credit for OR	ertification of the business as portioned credit for qualified S corporation shareholders (b) on Form 349 for the tax y in terminated or revoked, ento con Credit Election and is made an irrevocable election; or qualified facilities as shown a qualified facilities as shown	facility. Full amount of cre- or partners of a partnership ears prior to the date on lin- er the aggregate amount d Shareholder's Share ion for the taxable year end- on on Part 1, line 4 (for the	cits previously clair b. Enter the amount ie 5. If more than of the of Credit and ding [M,M,D,D,Y] taxable year mention	med ints one d Credit	ıto ve);	00
	Signature		Title			Date	_
hro	ugh to the shareholder	h to the shareholders, comples, complete line 11 separates 1 and 2 of Form 349.		•			
8	Name of shareholder	:					
9	Shareholder's TIN:		_		Γ		$\Box$
10	Shareholder's share	of the apportioned credit for	qualified facilities from Par	t 1, line 4	10		00
11	Shareholder's share	of the credit recapture from I	Part 2, line 6		11		00

Continued on page 2 →

Name (as shown on page 1) TIN				
Pa	rt 4 Partner's Share of Credit and Credit Recapture			
	nplete lines 12 through 14 separately for each corporate partner. If passing carately for each partner. Furnish each partner with a copy of the Certification		•	•
12	Name of partner:			
13	Partner's TIN:			
14	Partner's share of the apportioned credit for qualified facilities from Part 1,	line 4	14	00
15	Partner's share of the credit recapture from Part 2, line 6		15	00
Pa	rt 5 Credit Recapture Summary			
16	Enter the taxable year(s) in which you took a credit for a business as a qua Certification has been terminated or revoked:	lified facility whose		
17	<ul> <li>Enter the total amount of credit originally claimed on prior returns:</li> <li>Individuals, corporations, exempt organizations with UBTI, and S corporate Enter the amount from Part 2, line 6.</li> <li>S corporation shareholders: Enter the amount from Part 3, line 11.</li> <li>Partners of a partnership: Enter the amount from Part 4, line 15</li></ul>		17	00
	rt 6 Total Apportioned Credit Claimed This Taxable Year			
18	<ul> <li>Total apportioned credit for qualified facilities:</li> <li>Individuals, corporations, exempt organizations with UBTI, or S corporation from Part 1, line 4.</li> <li>S corporation shareholders: Enter the amount from Part 3, line 10.</li> <li>Partners of a partnership: Enter the amount from Part 4, line 14</li></ul>	line 14; or 12.	18	00