



Aircraft Manufacturer New Employee Credit Pass-Through Schedule

Partner's, Shareholder's or Member's Last Name		Partner's, Shareholder's or Member's First Name		Middle Initial
SSN -or- Colorado Account Number	Profit/Loss -or- Stock Ownership Percentage	Aircraft Manufacturer New Employee Credit Allocated		
		%	\$	
Address				
City			State	Zip
Partner's, Shareholder's or Member's Last Name		Partner's, Shareholder's or Member's First Name		Middle Initial
SSN -or- Colorado Account Number	Profit/Loss -or- Stock Ownership Percentage	Aircraft Manufacturer New Employee Credit Allocated		
		%	\$	
Address				
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Partner's, Shareholder's or Member's Last Name		Partner's, Shareholder's or Member's First Name		Middle Initial
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Address				
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Partner's, Shareholder's or Member's Last Name		Partner's, Shareholder's or Member's First Name		Middle Initial
SSN -or- Colorado Account Number	Profit/Loss -or- Stock Ownership Percentage	Aircraft Manufacturer New Employee Credit Allocated		
		%	\$	
Address				
City			State	Zip

Attach additional copies of this form as needed.

S corporations, partnerships and other pass-through entities must attach this schedule to the copy of Form DR 0085 that is submitted to the Department of Revenue. The information on this schedule is confidential tax information and is not public record.

A computer printout with the required information can be attached to the DR 0085 in lieu of this schedule.

For additional information, refer to FYI Income 62 at www.TaxColorado.com or call (303) 238-7378.