N-344 (REV. 2015)

IMPORTANT AGRICULTURAL LAND QUALIFIED AGRICULTURAL COST TAX CREDIT

Or fiscal year beginning ______, 2015, and ending ______, 20_

TAX YEAR

2015

ATTACH TO FORM N-11, N-15, N-20, N-30, N-35, N-40, OR N-70NP, WHICHEVER IS APPLICABLE. Name(s) as shown on Form N-11, N-15, N-20, N-30, N-35, N-40, or N-70NP SSN or FEIN Part I CREDIT CERTIFICATE DEPARTMENT OF AGRICULTURE CERTIFICATE (Completed by the Department of Agriculture only) 2. SSN/FEIN 1. Name of taxpayer 3. Address (Number and street, including apartment number or rural route, city, state, and postal/zip code) 4. Description of designated important agricultural land (Include Tax Map Key, Number of acres, and Island) 5. Total qualified costs allowed 6. Credit Year: ☐ First Year ☐ Third Year Second Year This is to certify that the amounts noted above have been verified in accordance with section 235-110.93, Hawaii Revised Statutes. Signature of Certifying Officer Date of Certification (Type or Print Name and Title) Part II COMPUTATION OF TAX CREDIT Note: If you are only claiming your distributive share of a tax credit distributed from a partnership, an S corporation, an estate, or a trust, skip line 1 and begin on line 2. Total amount of certified tax credit allowed for tax year 2015 from Part I, line 7..... 1 Flow through of important agricultural land qualified agricultural cost tax credit received from other entities, if any: Check the applicable box below. Enter the name and Federal Employer I.D. No. of Entity: a Partner — enter amount from Schedule K-1 (Form N-20), line 26..... b S corporation shareholder — enter amount from Schedule K-1 (Form N-35), line 16k..... c Beneficiary — enter amount from Schedule K-1 (Form N-40), line 9..... d Patron — enter the amount from federal Form 1099-PATR..... Total credit — Add lines 1 and 2 and enter the result here, rounded to the nearest dollar, and on the appropriate line for the credit on Schedule CR (for Form N-11, N-15, N-30, and N-70NP filers); Form N-20, Schedule K; Form N-35, Schedule K; or Form N-40, Schedule F (for the estate's or trust's share) and/or Schedule K-1 (for the beneficiaries' share); whichever is applicable..... Part III RECAPTURE OF TAX CREDIT Enter the taxable year for which the certified written statement was not submitted to the Department of 1 Agriculture..... Enter the amount of tax credit claimed for the taxable year in which the certified written statement was not submitted to the Department of Agriculture. Add this amount, rounded to the nearest dollar, to your

tax liability for the tax year in which the recapture occurred

Part IV	FLOW-THROUGH ENTITIES ALLOCATING THE CREDIT TO ITS PAR	RTNERS, SHAREHOL	DER	S, OR BENEFICIARIES
1. Tax credit allocated to partners, shareholders, or beneficiaries. Enter the amount from Part II, line 3\$				
2. Al	llocation of the tax credit to its partners, shareholders, or beneficiaries as follows (if more space is needed, attach additional sheet(s)):			
(a) No.	(b) Name and Address of Partner, Shareholder, or Beneficiary	(c) Identifying No. of Part Shareholder, or Benefi		(d) Amount of Tax Credit Allocated
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
3. To	I tal from additional sheet(s)		3	
	tal amounts allocated (Must equal Part IV, line 1 above.)		4	