N-344 (REV. 2016)

IMPORTANT AGRICULTURAL LAND QUALIFIED AGRICULTURAL COST TAX CREDIT

Or fiscal year beginning ______, 2016, and ending ______, 20__

TAX YEAR

2016

ATTACH TO FORM N-11, N-15, N-20, N-30, N-35, N-40	, OR N-70NP, WHICHEVER IS APPI	ICABLE.			
Name(s) as shown on Form N-11, N-15, N-20, N-30, N-35, N-40, or N-70NP		SSN or FEIN			
Port I CDEDIT CEDTICICATE					
Part I CREDIT CERTIFICATE					
DEPARTMENT OF AGRICULTURE CERTIFICATE					
(Completed by the Departmen	t of Agriculture only)				
1. Name of taxpayer		2. SSN/FEIN			
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)					
	I				
5. Total qualified costs allowed	6. Credit Year:				
Ψ	☐ First Year ☐ Secon	nd Year			
7. Amount of tax credit allowed for tax year 2016	\$				
Transcark of tax order anonde for tax your 2010					
This is to certify that the amounts noted above have been verified in a	ccordance with section 235-110.93, F	lawaii Revised Statutes.			
Signature of Certifying Officer Date of Cer		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	m a partnership an S corporation ar				
estate, or a trust, skip line 1 and begin on line 2.					
Total amount of certified tax credit allowed for tax year 2016 from Part I, line 7		1			
2 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 25					
b S corporation shareholder — enter amount from Schedule K-1 (Form N-35), line 16j					
c Beneficiary — enter amount from Schedule K-1 (Form N-40), line 9					
d Patron — enter the amount from federal Form 1099-PATR					
3 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					
	amitted to the Department of				
Enter the taxable year for which the certified written statement was not submitted to the Department of Agriculture		1			
2 Enter the amount of tax credit claimed for the taxable year in which the cer					
not submitted to the Department of Agriculture. Add this amount, rounded					
tax liability for the tax year in which the recapture occurred		2			

Part I	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 . A	allocation of the tax credit to its partners, shareholders, or beneficiaries as follows (if		attach	
(a) No.	(b) Name and Address of Partner, Shareholder, or Beneficiary	(c) Identifying No. of Part Shareholder, or Benefi	ner, ciary	(d) Amount of Tax Credit Allocated
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24				
3. T	otal from additional sheet(s)		3	
	otal amounts allocated (Must equal Part IV, line 1 above.)		4	