

Include with your return.

For the calendar year 2017 or fiscal year beginning M M D D 2 0 1 7 and ending M D D D 2 0 Y Y .

All businesses must be certified by the Arizona Commerce Authority and the Department of Revenue before applying for this credit.

Name as shown on Form 140, 140PY, 140NR, 140X, 99T, 120, 120A, 120S, 120X or 165	Social Security or Employer Identification Number
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Part 1 Healthy Forest Enterprise Information

- 1 Name of Healthy Forest Enterprise: _____
- 2 Employer identification number: _____
- 3 Reserved
- 4 Check one box to indicate the year this form represents for claiming the employment credit under A.R.S. §§ 43-1076 or 43-1162:
 First Year Second Year Third Year Fourth Year Fifth Year Sixth Year or more
- 5 Check one box to indicate the year this form represents for claiming the training credit under A.R.S. §§ 43-1076.01 or 43-1162.01:
 First Year Second Year Third Year Fourth Year Fifth Year Sixth Year or more

Part 2 Average Number of Full-Time Employees

6 Average number of full-time employees in the healthy forest enterprise during the current taxable year.....	6	
7 Average number of full-time employees in the healthy forest enterprise during the immediately preceding taxable year.....	7	
8 Net increase in average number of full-time employees: Subtract line 7 from line 6. Enter the difference.	8	

Part 3 Net Increase in Qualified Employment Positions

9 Total number of filled, qualified employment positions created in the current year	9	
10 Net increase in average number of full-time employees: Enter the amount from Part 2, line 8	10	
11 Net increase in qualified employment positions for this healthy forest enterprise: Enter the lesser of line 9 or line 10.	11	

Part 4 Limitation on Number of Qualified Employment Positions

12 Maximum number of filled, qualified employment positions on which a credit may be calculated	12	200
13 Maximum number of new qualified employment positions on which you may claim the credit: Enter the lesser of line 11 or line 12	13	

Part 5 Employment Credit Calculation

	(a) Number of Qualifying Employees	(b) Qualifying Wages	(c) Percentage	(d) Allowable Credit
14 Qualified new employees		00	25%	00
15 Previously qualified employees in the second year of continuous employment.....		00	33.33%	00
16 Previously qualified employees in the third year of continuous employment.....		00	50%	00
17 Employment credit passed through from partnerships and S corporations. See instructions.				00
18 Add the amounts in column (d) for lines 14 through 17. Enter the total. This is the total employment credit....				00

Continued on page 2 →

Name (as shown on page 1):	EIN:
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Part 6 Training Credit Calculation

		(a) Number of Qualifying Employees	(b) Net Training and Certifying Costs
19 Qualified new employees	19		00
20 Previously qualified employees in the second year of continuous employment.....	20		00
21 Previously qualified employees in the third year of continuous employment	21		00
22 Training credit passed through from partnerships and S corporations. See instructions.....	22		00
23 Add the amounts in column (b) for lines 19 through 22. Enter the total. This is the total training credit	23		00

Part 7 Recapture of the Employment Credit

24 Enter the taxable year in which the certification of the business as a healthy forest enterprise was revoked or terminated...	24	YYYY	
25 Enter the first taxable year in which the employment credit for healthy forest enterprises was allowed	25	YYYY	
26 Number of years between when the employment credit was first allowed and when the certification was revoked or terminated	26		
27 Enter the recapture percentage based on the number of years entered on line 26. See instructions.....	27		%
28 Enter the total amount of all employment credits previously allowed	28		00
29 Recapture of employment credit for healthy forest enterprises. Multiply line 28 by the percentage on line 27. Enter the result	29		00
30 Enter the total amount of the credit subject to recapture passed through to you from partnerships and/or S Corporations from Form 332-P, Part 3, line 10, and/or Form(s) 332-S, Part 3, line 10	30		00
31 Add lines 29 and 30. Enter the total. This is the total amount of the employment credit subject to recapture.	31		00

Part 8 Recapture of the Training Credit

32 Enter the taxable year in which the certification of the business as a healthy forest enterprise was revoked or terminated...	32	YYYY	
33 Enter the first taxable year in which the training credit for healthy forest enterprises was allowed	33	YYYY	
34 Number of years between when the training credit was first allowed and when the certification was revoked or terminated.....	34		
35 Enter the recapture percentage based on the number of years entered on line 34. See instructions.....	35		%
36 Enter the total amount of all training credits previously allowed.....	36		00
37 Recapture of training credit for healthy forest enterprises. Multiply line 36 by the percentage on line 35. Enter the result.	37		00
38 Enter the total amount of the credit subject to recapture passed through to you from partnerships and/or S Corporations from Form 332-P, Part 3, line 13 and/or Form(s) 332-S, Part 3, line 13	38		00
39 Add lines 37 and 38. Enter the total. This is the total amount of the training credit subject to recapture.....	39		00

Part 9 S Corporation Credit Elections

- 40 The S corporation has made an irrevocable election for the taxable year ending MM,MM,DD,YY,YY,YY to (check only one box):
- 40a Claim the *employment credit* for healthy forest enterprises, as shown on Part 5, line 18, column (d) (for the taxable year indicated above);
OR
- 40b Pass the *employment credit* for healthy forest enterprises, as shown on Part 5, line 18, column (d) (for the taxable year indicated above) through to its shareholders.

Signature Title Date

- 41 The S corporation has made an irrevocable election for the taxable year ending MM,MM,DD,YY,YY,YY to (check only one box):
- 41a Claim the *training credit* for healthy forest enterprises, as shown on Part 6, line 23, column (b) (for the taxable year indicated above);
OR
- 41b Pass the *training credit* for healthy forest enterprises, as shown on Part 6, line 23, column (b) (for the taxable year indicated above) through to its shareholders.

Signature Title Date

- If electing to claim the credit at the corporate level, continue to Part 11.
- If passing either, or both, credit(s) through to the shareholders, complete Form 332-S for each shareholder.
- Provide a copy of completed Form 332-S to each shareholder.
 - Include a copy of each Form 332-S completed with your tax return.
 - Keep a copy of each completed Form 332-S for your records.

If you are only passing one of these credits to the shareholders and claiming the other at the corporate level, see the instructions.
If you are passing both credits through to the shareholders, **STOP**. Do not complete the remainder of this form.

Name (as shown on page 1):	EIN:
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Part 10 Partner's Share of Credits and Credit Recaptures

Partnerships qualifying for either credit **must** pass the credit(s) through to their partners. When passing the credit(s) through to your partners, complete Form 332-P for each partner.

- Provide a copy of completed Form 332-P to each partner.
- Include a copy of each Form 332-P completed with your tax return.
- Keep a copy of each completed Form 332-P for your records.

After completing a Form 332-P for each partner, **STOP**. Do not complete the remainder of this form.

Part 11 Recapture Summary for Employment Credit

- 42** Enter the taxable year(s) in which you took an employment credit or credit carryover for a disqualified healthy forest enterprise: _____
- 43** Enter the total amount of the employment credit originally allowed
- 44** Enter the total amount of the employment credit to be recaptured from Part 7, line 31
- 45** Subtract line 44 from line 43 and enter the difference. This is the amount of current employment credit allowable.....
- 46** Amount of employment credit on line 43 that you have claimed on prior years' returns
- 47** Subtract line 46 from line 45 and enter the difference.
- If the difference is POSITIVE:
- *This is the amount of employment credit carryover you have remaining for use in future years.*
 - Adjust the amounts in Part 13, lines 54 through 58, column (d) so the total amount on line 59 equals the amount of the credit carryover remaining for use in future years. See instructions.
- If the difference is NEGATIVE:
- *This is the amount of employment credit carryover you must recapture.*
 - Adjust the amounts in Part 13, lines 54 through 58, column (d) to "0". There is no carryover amount for the employment credit. See instructions.
 - *Individuals:* Also, enter this amount as a POSITIVE number on *Form 301, Part 2, line 36.* (If you have a recapture of the employment credit *and* the training credit, add the amounts on Part 11, line 47 and Part 12, line 53. Enter the total on *Form 301, Part 2, line 36.*)
 - *C corporations, S corporations that claimed the training credit at the corporate level, and exempt organizations with UBTI:* Also enter this amount as a POSITIVE number on *Form 300, Part 2, line 27.* (If you have a recapture of the employment credit and the training credit, add the amounts on Part 11, line 47 and Part 12, line 53. Enter the total on *Form 300, Part 2, line 27.*)

43			00
44			00
45			00
46			00
47			00

Part 12 Recapture Summary for Training Credit

- 48** Enter the taxable year(s) in which you took a training credit or credit carryover for a disqualified healthy forest enterprise: _____
- 49** Enter the total amount of the training credit originally allowed
- 50** Enter the total amount of the training credit to be recaptured from Part 8, line 39.....
- 51** Subtract line 50 from line 49 and enter the difference. This is the amount of current training credit allowable.....
- 52** Amount of credit on line 49 that you have claimed on prior years' returns.....
- 53** Subtract line 52 from line 51 and enter the difference.
- If the difference is POSITIVE:
- *This is the amount of training credit carryover you have remaining for use in future years.*
 - Adjust the amounts in Part 14, lines 60 through 64, column (d) so the total amount on line 65 equals the amount of the credit carryover remaining for use in future years. See instructions.
- If the difference is NEGATIVE:
- *This is the amount of training credit carryover you must recapture.*
 - Adjust the amounts in Part 14, lines 60 through 64, column (d) to "0". There is no carryover amount for the employment credit. See instructions.
 - *Individuals:* Also, enter this amount as a POSITIVE number on *Form 301, Part 2, line 36.* (If you have a recapture of the employment credit *and* the training credit, add the amounts on Part 11, line 47 and Part 12, line 53. Enter the total on *Form 301, Part 2, line 36.*)
 - *C corporations, S corporations that claimed the training credit at the corporate level, and exempt organizations with UBTI:* Also enter this amount as a POSITIVE number on *Form 300, Part 2, line 27.* (If you have a recapture of the employment credit and the training credit, add the amounts on Part 11, line 47 and Part 12, line 53. Enter the total on *Form 300, Part 2, line 27.*)

49			00
50			00
51			00
52			00
53			00

Name (as shown on page 1): _____ EIN: _____

Part 13 Available Employment Credit Carryover

	(a) Taxable Year	(b) Original Credit Amount	(c) Amount Previously Used Expired or Recaptured	(d) Available Credit Carryover: Subtract column (c) from column (b).
54		00	00	00
55		00	00	00
56		00	00	00
57		00	00	00
58		00	00	00
59	Total Available Carryover: Add lines 54 through 58 in column (d). Enter the total.....			59 00

Part 14 Available Training Credit Carryover

	(a) Taxable Year	(b) Original Credit Amount	(c) Amount Previously Used Expired or Recaptured	(d) Available Credit Carryover: Subtract column (c) from column (b).
60		00	00	00
61		00	00	00
62		00	00	00
63		00	00	00
64		00	00	00
65	Total Available Carryover: Add lines 60 through 64 in column (d). Enter the total.....			65 00

Part 15 Total Available Credit

66	Current year's <i>employment credit</i> : <ul style="list-style-type: none"> Individuals, C corporations, S corporations claiming this credit at the corporate level, or exempt organizations with UBTI: Enter the amount from Part 5, line 18, column (d) Partnerships: Enter "0". S corporations that passed the credit through to shareholders: Enter "0"..... 	66	00
67	Current year's <i>training credit</i> : <ul style="list-style-type: none"> Individuals, C corporations, S corporations claiming this credit at the corporate level, or exempt organizations with UBTI: Enter the amount from Part 6, line 23, column (b). Individuals: Also enter the total of lines 66 and 67 (total current year credit) on Form 301, Part 1, line 17, column (a) Partnerships: Enter "0". S corporations that passed the credit through to shareholders: Enter "0". C corporations, S corporations electing to claim this credit at the corporate level, and exempt organizations with UBTI: Also enter the total of lines 66 and 67 (total current year credit) on Form 300, Part 1, line 11, column (a)..... 	67	00
68	Enter the available <i>employment credit</i> carryover from Part 13, line 59, column (d), if any	68	00
69	Enter the available <i>training credit</i> carryover from Part 14, line 65, column (d), if any. <ul style="list-style-type: none"> Individuals: Also enter the total of lines 68 and 69 (total carryover) on Form 301, Part 1, line 17, column (b) C corporations, S corporations electing to claim the credit at the corporate level, and exempt organizations with UBTI: Also enter the total of lines 68 and 69 (total carryover) on Form 300, Part 1, line 11, column (b)..... 	69	00
70	Total available credit: Add lines 66 through 69. <ul style="list-style-type: none"> Individuals: Also, enter this amount on Form 301, Part 1, line 17, column (c). C corporations, S corporations electing to claim this credit at the corporate level, and exempt organizations with UBTI: Also enter this amount on Form 300, Part 1, line 11, column (c)..... 	70	00

Form 332-1

Qualified Employees of Healthy Forest Enterprise

2017

Complete a Form 332-1 for each qualified employee of the Healthy Forest Enterprise. See instructions for Form 332-1 (included with Instructions for Form 332) about providing the requested information in an alternative format.

1 Employee name: _____

2 Employee's taxpayer identification number (TIN) _____

3 Did employee reside in Arizona on date of hire? Yes No

4 Brief description of employee's job duties:

5 Current date of employment | M | M | D | D | Y | Y | Y | Y |

6 If employee was previously employed by the business, list the previous date of employment. See instructions. | M | M | D | D | Y | Y | Y | Y |

7a Is the employee in a permanent full time position? Yes No

7b If the answer to line 7a is "Yes", list the number of hours the employee actually worked during the taxable year _____

7c If the answer to line 7b is less than 1550 hours annually, explain:

8 Employee's annual compensation for the taxable year \$

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9a Total cost of health insurance provided by employer for employee. See instructions. \$

	00
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9b Total cost of health insurance for employee paid by employer. See instructions. \$

	00
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10 Is this employee in a new qualified employment position? Yes No

11 Check only one box: First year employee Second year employee Third year employee

Form 332-2 **Qualified Employees for Which You are Taking the Employment Credit** **2017**

	(a) Employee's Name	(b) Social Security Number	(c) Type of Employee Check the appropriate box. This employee is a:			(d) Total Wages Paid to the Employee During the Current Tax Year	(e) Maximum Allowable Wages: Enter the lesser of column (d) or the maximum allowed below.			
			(c1) 1 st Year Employee	(c2) 2 nd Year Employee	(c3) 3 rd Year Employee		(e1) Year 1 \$2000	(e2) Year 2 \$3000	(e3) Year 3 \$3000	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15 TOTAL:										

• For column (c), add the number of employees in each column (c1), (c2) and (c3), and enter the total for each column on line 15.
 • For columns (d) and (e), add the amounts in each column and enter the total for each column on line 15 **15**

Form 332-3 **Qualified Employees for Which You are Taking the Training Credit** **2017**

	(a) Employee's Name	(b) Social Security Number	(c) Type of Employee Check the appropriate box. This employee is a:			(d) Net Cost of Training and Certifying the Employee during the Current Tax Year	(e) Maximum Allowable Credit: Enter the lesser of column (d) or the maximum allowed below.			
			(c1) 1 st Year Employee	(c2) 2 nd Year Employee	(c3) 3 rd Year Employee		(e1) Year 1 \$3000	(e2) Year 2 \$3000	(e3) Year 3 \$3000	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15 TOTAL:										

• For column (c), add the number of employees in each column (c1), (c2) and (c3), and enter the total for each column on line 15.
 • For columns (d) and (e), add the amounts in each column and enter the total for each column on line 15 **15**