

Include with your return.

For the calendar year 2019 or fiscal year beginning [M, M, D, D, 2, 0, 1, 9] and ending [M, M, D, D, Y, Y, Y, Y].

Name as shown on Form 140, 140PY, 140NR, 140X, 99T, 120, 120A, 120S, or 120X	Social Security or Employer Identification Number
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Available Credit Carryover

	(a)	(b)	(c)	(d)
1 Taxable year				
2 Original credit amount	00	00	00	00
3 Amount previously used	00	00	00	00
4 Tentative carryover: Subtract line 3 from line 2.....	00	00	00	00
5 Amount unallowable: See instructions	00	00	00	00
6 Available carryover: Subtract line 5 from line 4.....	00	00	00	00
7 Total Available Carryover <ul style="list-style-type: none"> • <i>Individuals:</i> Also enter this amount on Form 301, Part 1, line 2, column (b). • <i>C Corporations, S corporations that elected to claim the credit at the corporate level, and exempt organizations with UBTI:</i> Also enter this amount on Form 300, Part 1, line 2, column (b) 	7			00