Web 12-05

2005 Tax Credit

Worker Training
North Carolina Department of Revenue

	Horar Carolina Boparamont or i	10101100			
Legal Name (First 10 Characters)	NAICS Code of Primary Business	SSN or FEIN			
Part 1. Business Information (If you trained employees at more than one establishment, use a separate Form NC-478D for Parts 1-3 for each establishment.)					
Type of Business (Fill in applicable circle.)	Name, Address, and County of	Tier, Development Zone, and Hea			
Air courier services	Establishment at which Credit is Generated	Information (Fill in applicable circles	s.)		
Central office or aircraft facility		▶ ○ Tier1 ○ Tier2 ○ Tier3 ○	Tier4 O Tier5		
Computer services			O V O N		
Customer service center for telecommunications or financial services company in Tier 1, Tier 2, or Tier 3		■ Tier based on letter of commitment Date letter signed	Yes O No		
O Data processing		(MM-DD-YY)			
Electronic mail order house in Tier 1, Tier 2, or Tier 3		Establishment in a development zone	○ Yes ○ No		
Manufacturing		Date zone designated (MM-DD-YY)	_		
Warehousing if primary business		Health insurance carrier			
Warehousing if primary activity of an establishment in Tier 1, Tier 2, or Tier 3					
○ Wholesale trade	NAICS Code of Establishment	Health insurance policy number			
	or Worker Training Provided in 2005 (es 1 through 4; all others complete Lines 5 through				
Number of eligible employees traid development zone locations	ined during 2005 for Tier 1 or	•			
2. Maximum credit for eligible employees at Tier 1 or development zone locations (Multiply Line 1 by \$1000)		•,00	0090606		
3. Wages paid to eligible employees at Tier 1 or development zone locations during training (Not to exceed \$1000 of wages paid to each employee trained)		•,	59		
4. Enter lesser of Line 2 or Line 3		•,			
5. Number of eligible employees tra for Tier 2, 3, 4, or 5 locations	ained during 2005	• ,			
6. Maximum credit for eligible emp Multiply Line 5 by \$500	loyees at Tier 2, 3, 4, or 5 locations	•,			
7. Wages paid to eligible employees at Tier 2, 3, 4, or 5 locations during training (Not to exceed \$500 of wages paid to each employee trained)		•,00			
8. Enter lesser of Line 6 or Line 7		•	NC		





Part 3. Information on Employees Trained (Attack	n additional pages if needed.)		
Trained Employee's Name	SSN	Hire Date	Number of Hours Worked
Part 4. Computation of Amount to be Taken in 20	05 Franchise		Income
Credit for 2005 trainingEnter the amount from Part 2, Line 4 or Line 8	•	00	
Carryforwards Portion of credit not taken for tax years 2000-2004	•	00	
11. Credit Amount to Take in Tax Year 2005 Add Lines 9 and 10; enter here and on Form NC-478, Part 1,	Line 4 Line 4	,	,



