

2002 Tax Credit Worker Training

North Carolina Department of Revenue

Legal Name (First 10 Characters) <input style="width:95%;" type="text"/>	NAICS Code of Primary Business <input style="width:95%;" type="text"/>	SSN or FEIN <input style="width:95%;" type="text"/>
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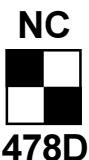
Part 1. Business Information (If you trained employees at more than one establishment, use a separate Form NC-478D for Parts 1 - 3 for each establishment.)

<p>Type of Business (Fill in applicable circle.)</p> <p><input type="radio"/> Air courier services</p> <p><input type="radio"/> Central office or aircraft facility</p> <p><input type="radio"/> Computer services</p> <p><input type="radio"/> Customer service center for telecommunications or financial services company in Tier 1, Tier 2, or Tier 3</p> <p><input type="radio"/> Data processing</p> <p><input type="radio"/> Electronic mail order house in Tier 1, Tier 2, or Tier 3</p> <p><input type="radio"/> Manufacturing</p> <p><input type="radio"/> Warehousing if primary business</p> <p><input type="radio"/> Warehousing if primary activity of an establishment in Tier 1, Tier 2, or Tier 3</p> <p><input type="radio"/> Wholesale trade</p>	<p>Name, Address, and County of Establishment</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>NAICS Code of Establishment <input style="width: 100px;" type="text"/></p> <p>Wage standard for county where employees trained are located <input style="width: 100px;" type="text"/></p> <p>Average weekly wage of employees trained <input style="width: 100px;" type="text"/></p> <p>Average weekly wage of all employees at this establishment <input style="width: 100px;" type="text"/></p>	<p>Tier, Development Zone, and Health Insurance Information (Fill in applicable circles.)</p> <p><input type="radio"/> Tier 1 <input type="radio"/> Tier 2 <input type="radio"/> Tier 3 <input type="radio"/> Tier 4 <input type="radio"/> Tier 5</p> <p><input type="radio"/> Tier based on letter of commitment</p> <p>Date letter signed (MM-DD-YY) <input style="width: 100px;" type="text"/></p> <p><input type="radio"/> Establishment in a development zone</p> <p>Date zone designated (MM-DD-YY) <input style="width: 100px;" type="text"/></p> <p>Health insurance carrier <input style="width: 100px;" type="text"/></p> <p>Health insurance policy number <input style="width: 100px;" type="text"/></p>
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Part 2. Computation of Credit for Worker Training Provided in 2002 (This credit may be taken on the 2002 tax return.)
(If establishment is in Tier 1 or in a development zone complete Lines 1-4 only; all others complete Lines 5-8 only.)

1. Number of employees trained during 2002 for Tier 1 locations	▶	<input style="width:95%;" type="text"/>
2. Maximum credit for employees at Tier 1 locations Multiply Line 1 by \$1000	▶	<input style="width:95%;" type="text"/> .00
3. Wages paid employees at Tier 1 locations during training (Not to exceed \$1000 of wages paid to each employee trained)	▶	<input style="width:95%;" type="text"/> .00
4. Enter lesser of Line 2 or Line 3	▶	<input style="width:95%;" type="text"/> .00
5. Number of employees trained during 2002 for Tier 2, 3, 4, or 5 locations	▶	<input style="width:95%;" type="text"/>
6. Maximum credit for employees at Tier 2, 3, 4, or 5 locations Multiply Line 5 by \$500	▶	<input style="width:95%;" type="text"/> .00
7. Wages paid employees at Tier 2, 3, 4, or 5 locations during training (Not to exceed \$500 of wages paid to each employee trained)	▶	<input style="width:95%;" type="text"/> .00
8. Enter lesser of Line 6 or Line 7	▶	<input style="width:95%;" type="text"/> .00

6990906004



Name

SSN or FEIN

Part 3. Information on Employees Trained *(Attach additional pages if needed.)*

Trained Employee's Name	SSN	Hire Date	Termination Date	Number of Hours Worked

Part 4. Computation of Amount Eligible to be Taken in 2002

	Franchise	Income
9. Credit for 2002 training Enter the amount from Part 2, Line 4 or Line 8	.00	.00
10. Carryforwards Credits not taken for worker training in 1997-2001	.00	.00
11. Eligible Credit Amount to Take in Tax Year 2002 Add Lines 9 and 10; enter here and on Form NC-478, Part 1, Line 4	.00	.00

