

CD-425

2023 CORPORATE TAX CREDIT SUMMARY (REVISION 8-21-23)

CHANGES FOR THE YEAR

- Barcode, line geometry, revision date, and tax year references updated.
- Credit for Income Tax Paid to another State or Country was removed.

Production Details:

| | |
|--|---|
| Submission Approval Start Date: | October 6, 2023 |
| Target Date for Initial Submission: | October 27, 2023 |
| Required Approval Date: | November 20, 2023 |
| Form Period Date Effective: | Calendar Year December 31, 2023; Fiscal Year November 30, 2024 |
| For Filing Periods | December 2023 and later |
| Form Placed in Software: | After December 31, 2023 |
| Unchanged/Updated: | Updated |

9-12 TEST SAMPLES REQUIRED:

- 1 Blank
- 1 Full Field
- 7 by PDF or 10 by Mail

Note: This form is part of a set; all forms in the set require approval.

BARCODE:

The barcode must read 63002XX025. Replace (XX) with your two-digit Software Developer Identification Number.

Align barcode between Row 33, Column 74-79 and Row 49, Column 74-79. Print the number either stacked or vertically to the right of the barcode.

USE:

- 12 point Courier for scanband
- All capital letters for variable text
- Correct barcode length
- Correct matching line geometry
- Data placement from SD version
- High resolution bitmap for barcodes
- Matching alignment between the full field and test samples
- Various ID numbers using the prefixes of 999, 900, 000 or 666 for FEINs/SSNs

BARCODE DIMENSIONS:

- MAKE SURE BARCODE READS AND IS PROPERLY PLACED BASED ON THE SPECIFICATIONS GIVEN
- SYMBOLOGY CODE 39
- DENSITY 4.18 CPI
- HEIGHT 0.500
- HIGH RESOLUTION BITMAP FOR BARCODES
- RATIO 3:1

TEST SAMPLES:

- CONFIRM DATA/TEXT PLACEMENT MATCHES THE SP VERSION
- PLEASE NOTE: BLANK AND FULL FIELD ARE REQUIRED BUT ARE NOT CONSIDERED TEST SAMPLES
- IF SENDING IN BY EXPRESS MAIL, PLEASE SEND ADDITIONAL TEST SAMPLES AS REQUIRED
- USE THE FIELD DESCRIPTION FORMATTING FOR PLACEMENT OF VARIABLE DATA
- INCLUDE ONE TEST SAMPLE EXCEEDING \$999.00
- USE A DIFFERENT AMOUNT FOR EACH FIELD
- ENSURE EACH LINE IS POPULATED ACROSS REQUIRED TEST SAMPLES

Placement of Variable Data

| Print Line Number | Identification | Begin Print Position | Maximum Field Length | End Print Position | Field Description |
|-------------------|----------------------|----------------------|----------------------|--------------------|--|
| 12 | Legal Name | 28 | 10 | 37 | Alphanumeric |
| 12 | FEIN | 70 | 9 | 78 | Numeric; No dashes Print number consecutively |
| 17 | Line 01 | 9 | 2 | 10 | 01 |
| 17 | Line 01 | 21 | 8 | 28 | Numeric |
| 17 | Line 12 | 34 | 2 | 35 | 12 |
| 17 | Line 12 | 46 | 8 | 53 | Numeric |
| 17 | Line 18B | 58 | 3 | 60 | 18B |
| 17 | Line 18B | 70 | 8 | 77 | Numeric |
| 19 | Line 02 | 9 | 2 | 10 | 02 |
| 19 | Line 02 | 21 | 8 | 28 | Numeric |
| 19 | Line 15A | 34 | 3 | 36 | 15A |
| 19 | Line 15A | 46 | 8 | 53 | Numeric |
| 19 | Line 19 | 58 | 2 | 59 | 19 |
| 19 | Line 19 | 70 | 8 | 77 | Numeric |
| 21 | Line 03 | 9 | 2 | 10 | 03 |
| 21 | Line 03 | 21 | 8 | 28 | Numeric |
| 21 | Line 15B | 34 | 3 | 36 | 15B |
| 21 | Line 15B | 46 | 8 | 53 | Numeric |
| 21 | Line 20 | 58 | 2 | 59 | 20 |
| 21 | Line 20 | 70 | 8 | 77 | Numeric |
| 23 | Line 04 | 9 | 2 | 10 | 04 |
| 23 | Line 04 | 21 | 8 | 28 | Numeric |
| 23 | Line 16A | 34 | 3 | 36 | 16A |
| 23 | Line 16A | 46 | 8 | 53 | Numeric |
| 23 | Line 21 | 58 | 2 | 59 | Line 21 |
| 23 | Recycling Facilities | 62 | 2 | 63 | RF |

| | | | | | |
|-------|----------------------|----|---|----|----------------------------------|
| 23 | Recycling Facilities | 67 | 1 | 67 | Alpha: Y or N Y: Yes N: NO |
| 23 | Cogeneration Plant | 71 | 2 | 72 | CP |
| 23 | Cogeneration Plant | 77 | 1 | 77 | Alpha: Y or N Y: Yes N: NO |
| <hr/> | | | | | |
| 25 | Line 05 | 9 | 2 | 10 | Line 05 |
| 25 | Line 05 | 21 | 8 | 28 | Numeric |
| 25 | Line 16B | 34 | 3 | 36 | 16B |
| 25 | Line 16B | 46 | 8 | 53 | Numeric |
| 25 | Line 21 | 58 | 2 | 59 | Line 21 |
| 25 | Line 21 | 70 | 8 | 77 | Numeric |
| <hr/> | | | | | |
| 27 | Line 06 | 09 | 2 | 10 | 06 |
| 27 | Recycling Facilities | 13 | 2 | 14 | RF |
| 27 | Recycling Facilities | 18 | 1 | 18 | Alpha: Y or N Y: Yes N: No |
| 27 | Additional Annual | 23 | 2 | 24 | AA |
| 27 | Additional Annual | 28 | 1 | 28 | Alpha: Y or N Y: Yes N: No |
| 27 | Line 17A | 34 | 3 | 36 | 17A |
| 27 | Line 17A | 46 | 8 | 53 | Numeric |
| 27 | Line 22 | 58 | 2 | 57 | 22 |
| 27 | Line 22 | 70 | 8 | 77 | Numeric |
| <hr/> | | | | | |
| 29 | Line 06 | 9 | 2 | 10 | 06 |
| 29 | Line 06 | 21 | 8 | 28 | Numeric |
| 29 | Line 17B | 34 | 3 | 36 | 17B |
| 29 | Line 17B | 46 | 8 | 53 | Numeric |
| 29 | Line 27 | 58 | 2 | 59 | 77 |
| 29 | Line 27 | 70 | 8 | 77 | Numeric |

| | | | | | |
|----|----------|----|---|----|---------|
| 31 | Line 07 | 9 | 2 | 10 | 07 |
| 31 | Line 07 | 21 | 8 | 28 | Numeric |
| 31 | Line 18A | 34 | 3 | 36 | 18A |
| 31 | Line 18A | 46 | 8 | 53 | Numeric |