# INSTRUCTIONS FOR COMPLETING THE EZB-R

## Part 1 General Information

- Line 1: Enter legal name of the business.
- Line 2: Enter the business telephone number (including area code).
- Line 3: Enter the mailing address of the business
- Line 4: Enter the address of the business location in the enterprise zone/district or investment location.
- Line 5: Enter the social security number or the federal identification number of the business.
- Line 6: Check the appropriate organizational form of the business.
- Line 7: Enter the e-mail address
- Line 8: List the total number of employees at the zone/district location on the 15<sup>th</sup> of each month, add the column, divide by 12 and enter the number on line 8. **Example for Line 8:**

Example for Enter		
Date		Employees
Jan 15		30
Feb 15		30
Mar 15		30
Apr 15		30
May 15		30
Jun 15		45
Jul 15		45
Aug 15		45
Sep 15		25
Oct 15		25
Nov 15		30
Dec 15		30
Year Total	395	

395 ÷ 12 = 32.9 Enter 32.9 on line 8

- Line 9: List the total number of zone/district residents employed at the zone/district location of the 15<sup>th</sup> day of each month, divide the resulting figure by 12 and enter the number on line 9 (see example in line 8 instructions) **Every participating business must complete this line, even if your business does not utilize the hiring tax credits.**
- Line 10: Enter the total of all wages and salaries paid at the zone/district location for the calendar year for which you are filing.
- Line 11: Enter the total wages and salaries paid to zone/district resident employees at the zone/district location for the calendar year for which you are filing.
- Line 12: Enter the total number of Enterprise zone/district Qualified Employee Certificates (IT-40QEC) issued for the calendar year for which you are filing.
- Line 13: Enter the total number of new jobs created at the zone/district location during the calendar year for which you are filing.
- Line 14: Enter the total number of new jobs filled by zone/district residents during the calendar year for which you are filing.

#### Part II Tax Savings Summary

If you are a new business or have no tax savings to report for the calendar year for which this form applies, please skip to part III of this form.

- Line 15: Enter the total Enterprise zone/district Investment Deduction
- Line 15A: Enter the total Tax Savings from the Enterprise Zone Investment Deduction
- Line 16: Enter the employment expense credit amount from Schedule EZ
- Line 17: Add the amounts of line 15A through line 16

## Part III Registration Fee and Eligibility

- Line 18: If the total on line 17, Part II exceeds \$1,000, multiply the amount by .01 and enter that amount on this line. If a zone/district business receives tax saving incentives in excess of \$1,000 in any year, the business **MUST** pay an annual registration fee of one percent (1%) of its tax savings to the Association of Indiana Enterprise Zones, or be denied credits and incentives, and disqualified from further participation according to IC 5-28-15-7. **REMIT THE AMOUNT ON THIS LINE WITH THE ORIGINAL EZB-R TO:** ASSOCIATION OF INDIANA ENTERPRISE ZONES, P.O. BOX 1322, EVANSVILLE, IN 47706. **You must still submit an EZB-R even if your business does not owe a registration fee!** Line 19: Multiply the amount on 17, Part II of this form by the local UEA rate and enter that amount on this line (please contact the local UEA to
- Line 19: Multiply the amount on 17, Part II of this form by the local UEA rate and enter that amount on this line (please contact the local UEA to determine the rate) REMIT THE AMOUNT ON THIS LINE TO THE LOCAL UEA WITH A COPY OF THE EZB-R.

Line 20: New Capital Investment for the Calendar Year

- A. Enter the total dollar amount spent in the calendar year for zone/district business renovation and improvements at the zone location.
  B. Enter the total dollar amount spent in the calendar year for new equipment at the zone/district location.
- Line 21: Enter the amount of zone/district resident employee wages for the calendar year that exceeds each taxpayer's base period qualified wages AND/OR the total dollar amount spent on employee training.
- Line 22: Add lines 18,19, 20A, 20B, and 21 and enter that amount on this line.

#### **Signature Lines**

Corporate/firm officer must sign this form and print name below written signature. Failure to sign and print name and title may delay processing and may result in your form being returned to you. If someone other than the corporate/firm officer prepared this form, their name, signature, address and telephone number are required.