



Remediation of Contaminated Land Credit Transfer Schedule

Last Name or Business Name ●		First Name ●		Middle Initial ●
SSN ●	Colorado Account Number ●	FEIN ●	Tax Year Ending ●	

Part A: Donor's Transfer Of Credit. Complete this part if you transferred credit for this tax year.

Credit Amount Available (Total credit amount available from Line 9e of the Remediation of Contaminated Land Certificate DR 0349)	Credit Amount Available
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Detail of credit you transferred for this tax year.

● Name of Transferee	● SSN	● Colorado Account Number	● Date of Transfer	● Amount of Credit
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Total Transferred				\$
Credit remaining (credit available, less total transferred).				\$

Photocopy and submit additional pages as needed.

For additional information regarding the credit, see FYI Income 42 and the Tax Information Index at www.TaxColorado.com or contact the Department of Revenue at 303-238-7378.

