

Alaska Veteran Employment Tax Credit

SAVE UP TO \$3,000!

- \$3,000 for employing a disabled veteran
- \$2,000 for employing a veteran who is not disabled
- \$1,000 for employing a veteran in a seasonal position

APPLYING IS FAST AND EASY!

- Only one form
- No certification process
- Employers apply when they submit their annual corporate income taxes

Hour requirements:

Full-time: 1,560 (12 consecutive months immediately following employment)

Seasonal: 500 (three consecutive months immediately following employment)

Veteran eligibility requirements:

1. Must have been unemployed for more than four weeks *and*
2. Have been discharged or released from military service:
 - a. Less than 10 years before the date employment begins for disabled veteran (service-connected disability through the Veterans Administration); or
 - b. Less than two years before the date employment begins for veteran who is not disabled.



**ALASKA DEPARTMENT OF LABOR
& WORKFORCE DEVELOPMENT**

A proud partner of the [americanjobcenter](#) network

Apply with Alaska state form 6325 when employer files taxes, which can be found at:

tax.alaska.gov/programs/programs/forms/index.aspx?60380

For more info on how you can recruit veteran talent, contact your nearest job center: **(877) 724-2539**

We are an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Rev. 1/18

Attach to your tax return

EIN 12-3456789	Name Shown On Return Example Employer Name
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Part I: Employment Of Veterans In Permanent Positions

Name Of Qualifying Veteran A	Social Security Number B	Discharge Date C	Employment Date D	Disabled E	Hours F	Credit Claimed G	
1. John Doe	999-99-9991	11/17/2012	10/17/2014	X	1,700	\$3,000	
Robert Smith	999-99-9992	09/05/2013	11/01/2014		1,800	\$2,000	
Jane Doe	999-99-9993	04/15/2009	09/30/2014	X	1,878	\$3,000	
2. Enter sum of lines 1 column G						2	\$8,000

Part II: Employment Of Veterans In Seasonal Positions

Name Of Qualifying Veteran A	Social Security Number B	Discharge Date C	Employment Date D	Hours F	Credit Claimed G	
3. Rebekah Smith	999-99-9994	05/10/2014	05/11/2014	550	\$1,000	
Boyd Doe	999-99-9995	02/28/2014	04/01/2014	605	\$1,000	
4. Enter sum of lines 3 column G					4	\$2,000
5. Total current credit. Add lines 2 and 4					5	\$10,000

Report the amount on line 5 as indicated below:

- Corporations, Form 6300, line 25
- Partnerships, Form 6900, Schedule A, line 16

Alaska Certificate of Qualifying Veteran

Complete and provide to employer

Social Security Number 999-99-9991	Name of Veteran John Doe	Telephone Number 907-555-5555	
Mailing Address 1234 First Ave.	City Juneau	State AK	Zip Code 99801

Purpose of form: The certificate of qualifying veteran declares that the person qualifies as a veteran under AS 43.20.048 for purposes of the employer claiming a veteran employment tax credit

Required attachment: You must attach a copy of your federal Certificate of Discharge (DD-214 or other)

I certify the following (check the box of each item that applies):

- I served in and was honorably discharged from one of the following:
- the armed forces of the United States, including a reserve unit of the armed forces of the United States
 - Alaska Territorial Guard, the Alaska Army National Guard, the Alaska Air National Guard, or the Alaska Naval Militia
- I have been unemployed for at least 4 weeks immediately preceding the date employment begins
- I am a disabled veteran because I am one of the following:
- a veteran who is entitled to compensation under laws administered by the United States Department of Veterans Affairs
 - a person who was honorably discharged or released from activity duty because of service-connected disability
 - a person who was disabled in the line of duty while serving in the Alaska Territorial Guard

Veteran's sworn statement: The undersigned understands that the fraudulent use of this certificate will subject all guilty parties, upon conviction, to a fine not to exceed \$25,000 or imprisonment for not more than three years, or both, under AS 43.05.290.

I swear under penalty of perjury that I have examined this certificate and to the best of my knowledge and belief, it is a true, correct and complete statement.

Veteran's Signature <i>John Doe</i>	Date 1/1/16
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Alaska Certificate of Qualifying Veteran

Complete and provide to employer

Social Security Number	Name of Veteran	Telephone Number	
Mailing Address	City	State	Zip Code

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Veteran's Signature	Date
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