

Arizona Department of Revenue
PO Box 29009
Phoenix AZ 85038-9009

For the calendar year 2014.
Due on or before February 28, 2015.

Employer Identification Number (EIN)
Period End 12/31/2014

Taxpayer Information
Name
Number and street or PO Box
City or town, state and ZIP Code
Business telephone number (with area code)

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.	
88	
81 PM	66 RCVD

Check box if: Amended Return Address Changed

This Arizona Form A1-R is an information return. Do not submit any liability owed or try to claim refunds due with this return. To submit additional liability or claim a refund, file amended quarterly withholding tax Form(s) A1-QRT.

1 Total Arizona Tax Withheld per federal Forms W-2, W-2c, W-2G and 1099-R	1	
2 Total wages paid to Arizona employees for 2014	2	
3 Total number of Arizona employees in 2014	3	
4 Total number of federal Forms W-2, W-2c, W-2G, and 1099-R submitted	4	
5 Information Return Penalty	5	

Annual Summary of Amounts Reported on 2014 Arizona Forms A1-QRT

		Liability Reported
6 First Quarter	6	
7 Second Quarter	7	
8 Third Quarter	8	
9 Fourth Quarter	9	
10 Total Annual Withholding Reported	10	

Explain Why an Amended Form A1-R is Being Filed (include additional sheet, if necessary)

Declaration	Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is a true, complete and correct return.		
Please Sign Here	TAXPAYER'S SIGNATURE _____	DATE _____	BUSINESS TELEPHONE NUMBER _____
Paid Preparer's Use Only	PAID PREPARER'S SIGNATURE _____	DATE _____	PAID PREPARER'S PTIN _____
	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) _____	FIRM'S <input type="checkbox"/> EIN OR <input type="checkbox"/> SSN _____	
	FIRM'S STREET ADDRESS _____	FIRM'S TELEPHONE NUMBER _____	
	CITY _____	STATE _____	ZIP CODE _____

Mail return to: Arizona Department of Revenue, PO Box 29009, Phoenix, AZ 85038-9009