

For taxable year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079

CHECK ONE:	
Original	Amended
CHECK ONE:	
Calendar year	Fiscal year
Federal employer ID number (FEIN)	
AZ withholding tax number	
AZ transaction privilege tax number	

Please Type or Print	Name
	Number and street or PO Box
	City or town, state and ZIP code
Business telephone number	

<p><b>Check box if:</b>    <b>This is a first return</b>    <b>Name change</b>    <b>Address change</b></p> <p><b>A</b> Date Arizona operations began _____</p> <p><b>B</b> Date of letter granting exemption from Arizona income tax _____</p> <p><b>C</b> Nature of Arizona activities _____</p> <p><b>D</b> Check federal form filed:    990    990-EZ    Other (specify) _____</p> <p><b>Attach copy of federal return.</b></p>	FOR DOR USE ONLY	
	<b>81</b>	<b>66</b>

<b>Sources of Income</b>	<b>1</b>	Gross sales or receipts from business activities.....	<b>1</b>		<b>00</b>	
	<b>2</b>	Less: Cost of goods sold or of operations - <i>attach itemized statement</i> .....	<b>2</b>		<b>00</b>	
	<b>3</b>	Gross profit from business activities - subtract line 2 from line 1 .....	<b>3</b>		<b>00</b>	
	<b>4</b>	Interest.....	<b>4</b>		<b>00</b>	
	<b>5</b>	Dividends.....	<b>5</b>		<b>00</b>	
	<b>6</b>	Rents and royalties.....	<b>6</b>		<b>00</b>	
	<b>7</b>	Gain or (loss) from sales of assets, excluding inventory items.....	<b>7</b>		<b>00</b>	
	<b>8</b>	Dues, assessments, etc., from members .....	<b>8</b>		<b>00</b>	
	<b>9</b>	Dues, assessments, etc., from affiliated organizations .....	<b>9</b>		<b>00</b>	
	<b>10</b>	Contributions, gifts, grants, etc., received .....	<b>10</b>		<b>00</b>	
	<b>11</b>	Other income - <i>attach itemized statement</i> .....	<b>11</b>		<b>00</b>	
		<b>12</b>	Total income - <i>add lines 3 through 11</i> .....		<b>12</b>	<b>00</b>
<b>Administrative Expenses</b>	<b>13</b>	Compensation of officers, directors, trustees, etc. ....	<b>13</b>		<b>00</b>	
	<b>14</b>	Salaries and wages - other than amounts included on line 2 .....	<b>14</b>		<b>00</b>	
	<b>15</b>	Interest.....	<b>15</b>		<b>00</b>	
	<b>16</b>	Taxes .....	<b>16</b>		<b>00</b>	
	<b>17</b>	Rent expense .....	<b>17</b>		<b>00</b>	
	<b>18</b>	Depreciation - <i>attach schedule</i> .....	<b>18</b>		<b>00</b>	
	<b>19</b>	Miscellaneous expenses - <i>attach itemized statement</i> .....	<b>19</b>		<b>00</b>	
		<b>20</b>	Total expenses - <i>add lines 13 through 19</i> .....		<b>20</b>	<b>00</b>
	<b>Disbursements from Current Income for the Organization's Exempt Purposes</b>	<b>21</b>	Dues, assessments, etc., to affiliated corporations .....	<b>21</b>		<b>00</b>
<b>22</b>		Contributions, gifts, grants, etc., paid .....	<b>22</b>		<b>00</b>	
<b>23</b>		Benefit payments to or for members or their dependents:				
		a. Death, sickness, hospitalization, disability, or pension benefits .....	<b>23a</b>		<b>00</b>	
		b. Other benefits.....	<b>23b</b>		<b>00</b>	
<b>24</b>		Dividends and other distributions to members, shareholders, or depositors .....	<b>24</b>		<b>00</b>	
<b>25</b>		Other.....	<b>25</b>		<b>00</b>	
	<b>26</b>	Total - <i>add lines 21 through 25</i> .....		<b>26</b>	<b>00</b>	
<b>Disbursements from Principal for the Organization's Exempt Purposes</b>	<b>27</b>	Dues, assessments, etc., to affiliated corporations .....	<b>27</b>		<b>00</b>	
	<b>28</b>	Contributions, gifts, grants, etc., paid .....	<b>28</b>		<b>00</b>	
	<b>29</b>	Benefit payments to or for members or their dependents:				
		a. Death, sickness, hospitalization, disability, or pension benefits .....	<b>29a</b>		<b>00</b>	
		b. Other benefits.....	<b>29b</b>		<b>00</b>	
	<b>30</b>	Dividends and other distributions to members, shareholders, or depositors .....	<b>30</b>		<b>00</b>	
	<b>31</b>	Other.....	<b>31</b>		<b>00</b>	
	<b>32</b>	Total - <i>add lines 27 through 31</i> .....		<b>32</b>	<b>00</b>	
<b>Other</b>	<b>33</b>	Other disbursements not itemized above - <i>attach schedule</i> .....	<b>33</b>		<b>00</b>	
<b>Accumulation of Income</b>	<b>34</b>	Accumulation of income in current year - <i>line 12 minus the sum of lines 20, 26, 32, and 33</i> .....	<b>34</b>		<b>00</b>	
	<b>35</b>	Accumulation of income at beginning of year.....	<b>35</b>		<b>00</b>	
	<b>36</b>	Accumulation of income at end of year - <i>add lines 34 and 35</i> .....	<b>36</b>		<b>00</b>	
<b>Penalty</b>	<b>37</b>	Penalty for late filing or incomplete filing ( \$500.00 ) .....	<b>37</b>		<b>00</b>	

Schedule A - Balance Sheet

Note: Amounts used in attached schedules and in this column should be end of year amounts.

(a) Beginning of year				(b) End of year	

**Assets**

<b>A1</b> Cash .....			00	<b>A1</b>		00
<b>A2a</b> Accounts receivable.....	<b>A2a</b>		00			
<b>b</b> Less: allowance for doubtful accounts.....	<b>A2b</b>		00			
<b>c</b> Line A2a less line A2b. Enter difference in column (b).....			00	<b>A2c</b>		00
<b>A3a</b> Other notes and loans receivable - <i>attach schedule</i> ..	<b>A3a</b>		00			
<b>b</b> Less: allowance for doubtful accounts.....	<b>A3b</b>		00			
<b>c</b> Line A3a less line A3b. Enter difference in column (b).....			00	<b>A3c</b>		00
<b>A4</b> Inventories .....			00	<b>A4</b>		00
<b>A5</b> Investments (securities) - <i>attach schedule</i> .....			00	<b>A5</b>		00
<b>A6</b> Investments (other) - <i>attach schedule</i> .....			00	<b>A6</b>		00
<b>A7a</b> Land, buildings, and equipment; basis .....	<b>A7a</b>		00			
<b>b</b> Less: accumulated depreciation - <i>attach schedule</i> .....	<b>A7b</b>		00			
<b>c</b> Line A7a less line A7b. Enter difference in column (b).....			00	<b>A7c</b>		00
<b>A8</b> Other assets - <i>describe</i> .....			00	<b>A8</b>		00
<b>A9 Total assets - add lines A1 through A8</b> .....			00	<b>A9</b>		00

**Liabilities**

<b>A10</b> Accounts payable and accrued expenses .....			00	<b>A10</b>		00
<b>A11</b> Mortgages and other notes payable - <i>attach schedule</i> .....			00	<b>A11</b>		00
<b>A12</b> Other liabilities - <i>describe</i> .....			00	<b>A12</b>		00
<b>A13 Total liabilities - add lines A10 through A12</b> .....			00	<b>A13</b>		00

**Net Assets**

<b>A14</b> Capital stock or trust principal.....			00	<b>A14</b>		00
<b>A15</b> Paid-in or capital surplus.....			00	<b>A15</b>		00
<b>A16</b> Retained earnings or accumulated income.....			00	<b>A16</b>		00
<b>A17 Total net assets - add lines A14 through A16</b> .....			00	<b>A17</b>		00
<b>A18 Total liabilities and net assets - add lines A13 and A17</b> .....			00	<b>A18</b>		00

**Certification** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complete return, made in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.

**Please Sign Here**

Signature of officer	Date	Title
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**Paid Preparer's Use Only**

Preparer's signature	Date	
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Firm's name (or preparer's, if self-employed)	Preparer's TIN
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Firm's address	Zip code
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