## **Arizona Amended Corporation Income Tax Return**

2021

120X Arizona Amended Corporation Income Tax Return 2021

DO NOT USE THE 2021 FORM 120X TO AMEND A PRIOR TAXABLE YEAR. USE THE FORM 120X FOR THE TAXABLE YEAR BEING AMENDED.

	For the 🔲 calend	dar year 2021 or ☐ fiscal year beginning	<u> M,M D,D 2,0,</u>	2 , 1 :	and ending <u>M</u> ,M	D	D12	. O . Y .	Υ.	
Busir	ness Telephone Number							ion Numb		IN)
(with	area code)									
		Address – number and street or PO Box								
	ness Activity Code									
(trom	n federal Form 1120)	City, Town or Post Office		Sta	te ZIP Code	е				
65	Check box if: A	Name change <b>B</b> □Address change			VENUE USE ONLY. DO	NO	T MAR	K IN THI	S AR	EA.
	Reason for filing For			88						
	1 Finalized federa									
	2 Amended feder	ral return								
	3 Arizona adjustr	ments only (see instructions)								
В	This amended return	n changes Arizona filing method to: 1 ☐ Separate	company							
	2 Combined (unit	tary group) <b>3</b> Consolidated (generally, election of	cannot be made on	<u> </u>						
	amended return	n (see instructions))		81	РМ		66 R	CVD		
С	☐ Check this box if	this amended return includes a capital loss carryba	ick, and							
	enter the last day	$\prime$ of the tax year the capital loss originated: $\lfloor M_{\star}M_{ floor}$	$D_1D_1Y_1Y_1Y_1Y_1$							
D	<b>Multistate Corpora</b>	tions Only: This amended return changes the met	thod of apportionment	to Ariz	ona from the original	retu	ırn (ch	eck one	box)	):
	1 AIR CARRIER	2 STANDARD 3 SALES FACTOR ONLY								
Ε		the election to be treated as amultistate service pro	ovider <u>was made on th</u>	ne origi	nal return (b)	1		(c)		
F	-	hments only: 1 Adult Use only	As Origina		Amount					
		ected for-profit 3 Dual Lic. did not elect for-profit.			to Add or Subtract	_	Corre	cted Amo		
1	•	federal return		00						00
2		income from Schedule D, line D9		00						00
3		e: Add lines 1 and 2. Enter the total		00						00
4		exable income from Schedule E, line E11								00
5	•	come: Subtract line 4 from line 3. Enter the difference		00	00	5				00
_	· · · · · · · · · · · · · · · · · · ·	ations check box 5a □. Go to line 13. All others go to line 6 come from line 5. Multistate corporations only		00	00					00
6	•			00		7				00
7 8	• • •	r allocable amounts. Multistate corporations only come: Subtract line 7 from line 6. Enter the difference.		00		8				00
9	•	ent ratio from Schedule A or Schedule ACA		TIT	100	9			П	Ť
10		o Arizona: Multiply line 8 by line 9. Multistate corporations only		00	00	_				00
11	• • •	ited to Arizona. Multistate corporations only		00						00
12		o Arizona: Add lines 10 and 11. Multistate corporations onl		00						00
13	Arizona income befo	ore NOL from line 5 or line 12		00	00	13				00
14	Arizona basis net op	erating loss carryover: Include computation schedule		00	00	14				00
15	Arizona taxable inco	ome: Subtract line 14 from line 13		00	00	15				00
16	Enter tax: Tax is 4.9	9 percent of line 15 or \$50, whichever is greater		00	00	16				00
17	Tax from recapture of	of tax credits from Arizona Form 300, Part 2, line 25		00		17				00
18	Subtotal: Add lines	16 and 17		00			1			00
19		credits claimed from Arizona Form 300, Part 2, line 46		00		19				00
20	Credit type: Enter for	rm number for each nonrefundable credit claimed	201 3	202 3		$\blacksquare$	204	<u>3                                     </u>	—	
21		et line 19 from line 18		00						00
22		lits: Check box(es) and enter amount			T	<b>22</b> c			$\neg \neg$	00
23	Payments: Ext				=	<b>23</b> c				<u>00</u>
24		al return plus all payments after it was filed: from pa	-			24				00
25		d lines 22c, 23c, and 24. Enter total				25	<u> </u>			00
26		y, as shown on original return or as later adjusted: S				26	_			00
27		lied to amended tax liability: Subtract line 26 from line				27				00
28		21(c) is larger than line 27, subtract line 27 from line 21(c).				28				<u>00</u> 00
29 30	•	nd Interest				30			-	00
30 31		f line 27 is larger than line 21(c), subtract line 21(c) fror				31				00
32		be applied to 2022 estimated tax		32		JI			$\dashv$	<u> </u>
		ded: Subtract line 32 from line 31			, , , , , , , , , , , , , , , , , , , ,	33				00

SCHEDULE A Apportionment Formula (Multistate Co	rporations Only)		
IMPORTANT: Qualifying air carriers must use Arizona Schedule ACA.	COLLIMALA	COLUMNIA	COLLIMAN
Qualifying multistate service providers must include Arizona Schedule	COLUMN A Total Within Arizona	COLUMN B Total Everywhere	COLUMN C Ratio Within Arizona
MSP. If the "SALES FACTOR ONLY" box on page 1, line D, is checked,	Round to nearest dollar	Round to nearest dollar.	A ÷ B
complete only Section A3, Sales Factor, lines a through f. See instructions.			
A1 Property Factor - STANDARD APPORTIONMENT ONLY			
Value of real and tangible personal property (by averaging the value of owned property at the beginning and end of the tax period; rented property at capitalized value).			
a Owned Property (at original cost):			
1 Inventories			-
Depreciable assets (do not include construction in progress)			
3 Land			-
4 Other assets (describe):			-
5 Less: Nonbusiness property (if included in above totals)			
6 Total of section a (the sum of lines 1 through 4 less line 5)			
<b>b</b> Rented property (capitalize at 8 times net rent paid)			
c Total owned and rented property (Total of section a plus section b)			
A2 Payroll Factor - STANDARD APPORTIONMENT ONLY  Total wages, salaries, commissions and other compensation to			
employees (per federal Form 1120, or payroll reports)			
A3 Sales Factor			
a Sales delivered or shipped to Arizona purchasers			
<b>b</b> Sales from services or from designated intangibles <b>for</b>			
qualifying multistate service providers only (see instructions; include Schedule MSP)			
c Other gross receipts			
d Total sales and other gross receipts (the sum of lines a through c)			
e Weight AZ sales: (STANDARD x 2; SALES FACTOR ONLY x 1)	×2 OR ×1		
f Sales Factor (for Column A, multiply line d by line e; for			
Column B, enter the amount from line d; for Column C, divide Column A by Column B.)			
STANDARD Apportionment, continue to A4.			
SALES FACTOR ONLY Apportionment, enter the amount from			
Column C on page 1, line 9, column (c)			
A4 STANDARD Apportionment Total Ratio: Add Column C of lines A1o	c, A2, and A3f. Enter the to	otal	
A5 Average Apportionment Ratio for STANDARD Apportionment: Div	ride line A4, Column C, by	four (4). Enter the result	
on page 1, line 9, column (c). (If one of the factors is "0" in both Colum			
SCHEDULE B Schedule of Payments (List payment da		,	
B1 Payment with original return		MID, DIY, Y, Y, Y, B	00
B2 Payment after original return filed			
B3 Payment after original return filed		MID, DIY, Y, Y, Y	
B4 Total: Add lines B1, B2 and B3		B4	

EIN

Name (as shown on page 1)

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**SCHEDULE C** Explanation of Changes (See instructions, page 8.)

D1 Total federal depreciation.  D2 Taxes based on income paid to any state (INCLUDING ARIZONA).  D3 Interest on obligations of other states, foreign countries, or political subdivisions.  D4 Special deductions claimed on federal return	ame (as shown on	n page 1)		EIN			
D1   Total federal depreciation   National Programments of foreign governments of roting governments of governments government	CHEDULE	Adjustments to Additions to Taxable Incor	ne				
D2 Tixes based on income paid to any state (INCLUDING ARIZONA).  Interest on obligations of orieng governments.  D3 Interest on obligations of other states, foreign countries, or political  D4 Special deductions claimed on federal return.  D5 Special deductions claimed on federal return.  D6 Additions related to Arizona tax credits. See instructions.  D7 Capital loss from exchange of legal tender.  D7 Capital loss from exchange of legal tender.  D8 TOTALS. SAd lines D1 through D8 in each column. Enter the amounts here and in the corresponding column on page 1, line 2.  D8 CHEDULEE Adjustments to Subtractions from Taxable Income  SCHEDULEE Adjustments to Subtractions from Taxable Income Subtractions from Subtra			(a) As Originally	Amount		(c) Corrected Amount	
local governments or foreign governments	1 Total federa	l depreciation	00	00	D1		00
D3 Interest on obligations of other states, foreign countries, or political would wislons.  D4 Special deductions claimed on federal return	2 Taxes based	d on income paid to any state (INCLUDING ARIZONA),					
SCHEDULES Adjustments to Subtractions from Taxable Income  1 Recalculated Arizona depreciation  1 Recalculated Arizona depreciation  2 Recalculated Arizona depreciation  2 Recalculated Arizona depreciation  2 Recalculated Arizona depreciation  3 Received Arizona depreciation  3 Received Arizona depreciation  4 Recalculated Arizona depreciation  5 Received Arizona depreciation  5 Received Arizona depreciation  6 Reported or Arizona depreciation  7 Reported or Arizona depreciation  8 Reported or Arizona depreciation  8 Reported or Arizona depreciation  9 Reported or Arizona depreciation  9 Reported or Arizona depreciation  10 Reported or Arizona  10 Recalculated Arizona depreciation  10 Reported or Arizona  10 Recalculated Arizona depreciation or Received from 50% or more controlled domestic corporations  10 Reported or Arizona  10 Recalculated Arizona depreciation or Received from 50% or more controlled domestic corporations  10 Reported or Arizona  10 Received from 50% or more controlled domestic corporations  10 Reported or Arizona  10 Received from 50% or more controlled domestic corporations  10 Reported or Arizona  10 Received from 50% or more controlled domestic corporations  10 Received from 50% or more controlled domestic corporations  10 Received from 50% or more controlled domestic cor	local govern	nments or foreign governments	00	00	D2		00
D6 Federal net operating loss deduction claimed on federal return			00	00	D3		00
D6 Additions related to Arizona tax credits: See instructions	04 Special ded	uctions claimed on federal return	00	00	D4		00
D7 Capital loss from exchange of legal tender	5 Federal net	operating loss deduction claimed on federal return	00	00	D5		00
D8 Other additions to federal taxable income: See instructions	6 Additions re	elated to Arizona tax credits: See instructions		1.7			00
POP TOTALS: Add lines D1 through D8 in each column. Enter the amounts here and in the corresponding column on page 1, line 2	•	3 3					00
SCHEDULEE Adjustments to Subtractions from Taxable Income    Corrected A			00	00	D8		00
SCHEDULEE Adjustments to Subtractions from Taxable Income    As Originally   As Originally   Amount   Corrected A		Ü					
E1 Recalculated Arizona depreciation	here and in	the corresponding column on page 1, line 2	00		D9		00
E1 Recalculated Arizona depreciation	CHEDULE	Adjustments to Subtractions from Taxable		(1-)		(-)	
E2 Basis adjustment for property sold or otherwise disposed of during the taxable year.  B2 Dividends received from 50% or more controlled domestic corporations  B2 Foreign dividend gross-up.  B3 Dividends received from foreign corporation.  B4 Foreign dividend gross-up.  B4 Foreign dividend gross-up.  B5 Dividends received from foreign corporation.  B5 Dividends received from foreign corporation.  B6 Dividends received from 62 Dividence.  B6 Dividends received from 62 Dividence.  B6 Dividends received from 62 Dividence.			As Originally Reported or Adjusted	Amount to Add or Subtract		Corrected Amount	
taxable year		·	00	00	E1		00
Foreign dividend gross-up	-						00
E5 Dividends received from foreign corporation	3 Dividends re	eceived from 50% or more controlled domestic corporations					00
E6 Interest on U.S. obligations	4 Foreign divi	dend gross-up					00
E7 Agricultural crops charitable contribution	5 Dividends re	eceived from foreign corporation					00
E8 Expenses related to certain federal tax credits. See instructions	6 Interest on l	U.S. obligations					00
E9 Capital gain from exchange of legal tender	7 Agricultural	crops charitable contribution					00
Ceto Other subtractions from federal taxable income. See instructions	E8 Expenses re	elated to certain federal tax credits. See instructions					00
The following declaration must be signed by one of the following officers: president, treasurer, or any other principal officer  Under penalties of perjury, I, the undersigned officer authorized to sign this return, declare that I have examined this return the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complemade in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.  Please  OFFICER'S SIGNATURE  DATE  TITLE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  DATE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN	<b>9</b> Capital gain	from exchange of legal tender					00
The following declaration must be signed by one of the following officers: president, treasurer, or any other principal officer  Under penalties of perjury, I, the undersigned officer authorized to sign this return, declare that I have examined this return the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complemade in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.  Please Sign Here  OFFICER'S SIGNATURE  DATE  TITLE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  DATE  PAID PREPARER'S TIN  PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN			00	00	E10		00
The following declaration must be signed by one of the following officers: president, treasurer, or any other principal officer  Under penalties of perjury, I, the undersigned officer authorized to sign this return, declare that I have examined this return the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complemade in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.  Please Sign Here  OFFICER'S SIGNATURE  DATE  TITLE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  DATE  PAID PREPARER'S TIN PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN							_
Declaration  Under penalties of perjury, I, the undersigned officer authorized to sign this return, declare that I have examined this return the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complements in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.  Please Sign Here  OFFICER'S SIGNATURE  DATE  TITLE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S PRINTED NAME  PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN	amounts he	re and in the corresponding column on page 1, line 4	00	00	E11		00
the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complemate in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.  Please OFFICER'S SIGNATURE  DATE  TITLE  Sign Here  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S TINE  PAID PREPARER'S PRINTED NAME  PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN		The following declaration must be signed by one of the follow	ving officers: president	, treasurer, or any othe	er prin	cipal officer.	
Sign Here  OFFICER'S PRINTED NAME  PAID PREPARER'S SIGNATURE  PAID PREPARER'S SIGNATURE  PAID PREPARER'S PRINTED NAME  PAID PREPARER'S PRINTED NAME  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN	Declaration	the accompanying schedules and statements, and to the be	est of my knowledge an	nd belief, it is a true, co			
Here OFFICER'S PRINTED NAME  PAID PREPARER'S SIGNATURE DATE DATE  PAID PREPARER'S TIN  PAID PREPARER'S PRINTED NAME  Use Only FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN		OFFICER'S SIGNATURE	DATE	TITLE			
Preparer's PAID PREPARER'S PRINTED NAME  Use Only FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) FIRM'S EIN	_	OFFICER'S PRINTED NAME	_				
Paid Preparer's PAID PREPARER'S PRINTED NAME  Use Only FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) FIRM'S EIN							
Use Only FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) FIRM'S EIN	Paid	PAID PREPARER'S SIGNATURE	DATE	PAID	PREP	ARER'S TIN	
Only  FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)  FIRM'S EIN	•	Preparer's PAID PREPARER'S PRINTED NAME					
		FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLO	YED)	FIRM	'S EIN		_
FIRM'S STREET ADDRESS FIRM'S TELEPHONE N		FIRM'S STREET ADDRESS		FIRM	'S TEL	EPHONE NUMBER	_

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

CITY

ZIP CODE

STATE

Name (as shown on page 1)	EIN			
		Page	of	

**SCHEDULE D** Adjustments to Additions to Taxable Income Continued

· · · · · · · · · · · · · · · · · · ·	(a) As Originally Filed	(b) Amount to Add or Subtract	(c) Corrected Amount
D6 Additions related to Arizona tax credits:			
A Environmental Technology Facility Credit:			
1 Excess Federal Depreciation or Amortization	00		A1 00
2 Excess in Federal Adjusted Basis	00	00	A2 00
B Pollution Control Credit:			
1 Excess Federal Depreciation or Amortization	00		<b>B1</b> 00
2 Excess in Federal Adjusted Basis	00	00	B2 00
C Credit for Taxes Paid for Coal Consumed in Generating			
Electrical Power	00		<b>c</b> 00
<b>D</b> Credit for Employment of TANF Recipients	00	00	<b>D</b> 00
E Credit for Donation of School Site	00	00	E 00
F Credit for Corporate Contributions to School Tuition			
Organizations	00	00	<b>F</b> 00
G Credit for Corporate Contributions to School Tuition			
Organizations for Displaced Students or Students with			
Disabilities	00	00	<b>G</b> 00
H Total Additions Related to Arizona Tax Credits:			
Enter this amount on page 3, Schedule D, line D6	00	00	н 00
D8 Other additions to federal taxable income:			
A Positive Partnership Income Adjustment	00	00	A 00
B Federal Exploration Expenses	00		в 00
C Federal Amortization or Depreciation for Facilities		100	100
and Equipment Amortized Under Arizona Law:			
1 Pollution Control Devices	00	00	C1 00
2 Child Care Facilities	00		<b>C2</b> 00
D Expenses and Interest Relating to Income Not			
Taxed by Arizona	00	00	<b>D</b> 00
E Tax-Exempt Insurance Company Loss	00	00	
F Amounts Repaid in Current Taxable Year	00	00	
G Excess Federal Capital Loss Carryover Under			
a Claim of Right Restoration	00	00	<b>G</b> 00
H Domestic International Sales Corporations	00	00	
Expenditures for the Americans with Disabilities Act	00	00	
J Treatment of Installment Obligations When Corporate			
Activities Cease in Arizona	00	00	J 00
K Total Other Additions from Federal Taxable Income:			
Enter this amount on page 3, Schedule D, line D8	00	00	<b>K</b> 00

Name (as shown on page 1)	EIN	
		Page of

**SCHEDULE E** Adjustments to Subtractions from Taxable Income Continued

		(a) As Originally Filed	(b) Amount to Add or Subtract	(c) Corrected Amount	
		Filed	Subtract	Amount	
E8	Expenses Related to Certain Federal Tax Credits:	00	00		00
	A Work Opportunity Credit	00	00		00
	B Empowerment Zone Employment Credit	00	00	В	00
	C Credit for Employer-Paid Social Security Taxes on Employee  Cash Tips	00	00		00
	<b>D</b> Indian Employment Credit	00	00	D	00
	E Total Expenses Related to Certain Federal Tax Credits				
	Enter this amount on page 3, Schedule E, line E8	00	00	E	00
E10	Other Subtractions From federal Taxable Income:				
	A Refunds of Taxes Based on Income	00	00	A	00
	B Negative Partnership Income Adjustment	00	00	В	00
	C Expense Recapture, Mine Explorations	00	00	С	00
	D Deferred Exploration Expenses	00	00	D	00
	E Exploration Expenses: Oil, Gas or Geothermal Resources	00	00	E	00
	<b>F</b> Arizona Amortization of Facilities and Equipment:				
	1 Pollution Control Devices	00	00	F1	00
	2 Cost of Child Care Facilities	00	00	F2	00
	G Interest on Federal Taxable Arizona Obligations Evidenced				
	by Bonds	00	00	G	00
	<b>H</b> Expenses and Interest Relating to Tax-Exempt Income	00	00	н	00
	I Tax-Exempt Insurance Company Income	00	00		00
	J Claim of Right Adjustment	00	00	J	00
	K Dividends from Domestic International Sales				
	Corporation (DISC)	00	00		00
	L Income from Disaster Relief Efforts	00	00		00
	M Expenditures for the Americans with Disabilities Act	00	00	М	00
	N Contribution in Aid of Construction	00	00	N	00
	O Marijuana Establishments only (see instructions)				
	1 Federal Disallowed Expenses, or	00	00	01	00
	2 Federal Taxable Income Attributable to NMMD Operations	00	00	O2	00
	P Total Other Subtractions from Federal Taxable Income				
	Enter this amount on page 3, Schedule E, line E10	00	00	P	00