Arizona Form 51

2018 Combined or Consolidated Return Affiliation Schedule

- Include Form(s) 51 immediately following Form 120.
 Be sure to check the "Yes" box on Form 120, line D.

For the calendar year 2018 or fiscal year beginning [M,M]D,D]2,0,1,8 and ending [M,M]D,D]2,0,Y,Y.

| Name | | | | | Employer Identification Number (EIN) | | | | |
|--------|--------------------------|------------------------------------------------------------------------------------------|--------------|------------|--------------------------------------|-----------------------|----------------------------------|--|--|
| Num | iber ar | nd Street or PO Box | | | REVENUE USE ONLY | . DO NOT MARK | IN THIS AREA. | | |
| City | or Tov | vn State ZIP C | ode | | | | | | |
| | | | | | 81 PM | 80 RC | | | |
| | | n 1): Affiliated Corporations: ed or Consolidated in This Return or Filing Separate F | Returns. | | 81 1 10 | 80 100 | | | |
| For | mor | e space, (check) □ and complete page 3. Listing of Affiliated Corporations | | | L | I | | | |
| Sec | ction | | | | | | | | |
| lf the | e Affilia ↓ | ated Company is an Arizona Filer, check the Arizona Filer box. | | | C = Combined S = S | eparate | | | |
| | (a) Arizona Filer? | (b) Affiliated Company Name | (c) F/C/S | (d) EIN | Pe | e) riod Through | (f) Business Activity Code | | |
| 1 | | | | | MM/YYYY | -MM/YYYY | | | |
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| 3 | | | | | MM/YYYY | -MM/YYYY | | | |
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| Name (as shown on page 1) | EIN | |
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(Section 2): Corporations Added to the Affiliated Group During the Taxable Year

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| Se | ction | 2 Corporations Added to the Affiliated Gro Do not complete Section 2 if Section 1 is co | | Taxal | ole Year | | | | |
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| | | ated Company is an Arizona Filer, check the Arizona Filer box changed its name during the taxable year, check the Name C | | F=C ↓ | F = Consolidated C = Combined S = Separate \checkmark | | | | |
| | (a) Arizona Filer? | (b) Affiliated Company Name | (c) Name Change? | (d) F/C/S | (e) EIN | (f) Month Added | (g) Business Activity Code | | |
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(Section 3): Corporations Deleted From the Affiliated Group During the Taxable Year

For more space, (check) \square and complete page 5.

| | | Corporations Deleted From the Affiliated Group During the Taxable Year Do not complete Section 3 if Section 1 is completed. | | | | | | | | |
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| | | ted Company is an Arizona Filer, check the Arizona Filer box. If the changed its name during the taxable year, check the Name Change b | Affiliated | F = Consolidated C = Combined S = Separate Ψ | | | arate | | | |
| | (a) Arizona Filer? | (b) Affiliated Company Name | (c) Name Change? | (d) F/C/S | (e) EIN | (f) Month Deleted | (g) Business Activity Code | | | |
| 1 | | | | | | MM | | | | |
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Reason for deletions:

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| f the Affiliate | Company is an Arizona Filer, check the Arizona Filer box. | | | F = Consolidated C = Combined S = Separate \checkmark | | | | | |
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| (a) Page Number | (b) Line Number | (c) Arizona Filer? | (d) Affiliated Company Name | (e) F/C/S | (f) EIN | (g) Period From – Through | (h) Business Activity Cod | | |
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| | ection 2 | Do n | ot com | ns Added to the Affiliated Group During the Taxable Year Continued blete Section 2 if Section 1 is completed. | | | | | |
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| If the Affiliated Company is an Arizona Filer, check the Arizona Filer box. If the Affiliated Company changed its name during the taxable year, check the Name Change box. | | | | | | | | | |
| | (a) Page | (b) Line | (c) Arizona | (d) | (e) Name | (f) | (g) | (h) | (i) Business |
| 00 | Number | Number | Filer? | Affiliated Company Name | Change? | F/C/S | EIN | Month Added | Activity Code |
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| Se | ection 3 | Cor Do r | porations I not complete | Deleted From the Affiliated Group During the Taxable Yea e Section 3 if Section 1 is completed. | r Continued | | | | |
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| If the Affiliated Company is an Arizona Filer, check the Arizona Filer box. If the Affiliated Company changed its name during the taxable year, check the Name Change box. | | | | | | | bined S = Separate | | |
| 00 | (a) Page | (b) Line Number | (c) Arizona Filer? | (d) | (e) Name | (f) F/C/S | (g) EIN | (h) | (i) Business |
| <u> </u> | Number | Number | Filer? | Affiliated Company Name | Change? | F/C/S | EIN | Month Deleted | Activity Code |
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