

For the [] calendar year 2023 or [] fiscal year beginning [M, M, D, D,] 2, 0, 2, 3 and ending [M, M, D, D,] 2, 0, Y, Y

[] Check this box if this return is based on a 52/53 week taxable year.

Business Telephone Number (with area code) Name Employer Identification Number (EIN) Address - number and street or PO Box Business Activity Code (from federal Form 1120) City, Town or Post Office State ZIP Code

- 68 Check box if: A [] This is a first return B [] Name change C [] Address change
A Is FEDERAL return filed on a consolidated basis? [] Yes [] No
B ARIZONA filing method: See instructions (check only one):
1 [] Separate company 2 [] Combined (unitary group) 3 [] Consolidated
C If ARIZONA filing method is consolidated, enter the last day of the tax year Forms 122 were filed to make the election [M, M, D, D,] Y, Y, Y, Y
D If ARIZONA filing method is combined or consolidated, see Form 51 instructions. Is Form 51 included? [] Yes [] No
E ARIZONA apportionment for Multistate corporations only (check one box):
1 [] AIR CARRIER 2 [] STANDARD 3 [] SALES FACTOR ONLY
F [] Check if Multistate Service Provider Election and Computation (Arizona Schedule MSP) is included. Indicate the year of the election cycle: [] Yr 1 [] Yr 2 [] Yr 3 [] Yr 4 [] Yr 5
G Is this the corporation's final ARIZONA return under this EIN? [] Yes [] No If "Yes", check one: 1 [] Dissolved 2 [] Withdrawn 3 [] Merged/Reorganized List EIN of the successor corporation, if any []

CHECK BOX IF return is filed under extension: [82] 82F []
REVENUE USE ONLY. DO NOT MARK IN THIS AREA.
[88]
[81] PM [66] RCVD

Table with 3 columns: Line number, Description, Amount. Includes lines 1-33 for tax calculation, ending with TOTAL DUE and OVERPAYMENT.

SCHEDULE A Additions to Taxable Income

A1 Total federal depreciation.....	A1		00
A2 Taxes based on income paid to any state (INCLUDING ARIZONA), local governments or foreign governments	A2		00
A3 Interest on obligations of other states, foreign countries, or political subdivisions	A3		00
A4 Special deductions claimed on federal return.....	A4		00
A5 Federal net operating loss deduction claimed on federal return.....	A5		00
A6 Additions related to Arizona tax credits: See instructions	A6		00
A7 Capital loss from exchange of legal tender.....	A7		00
A8 Other additions to federal taxable income: See instructions.....	A8		00
A9 Total: Add lines A1 through A8. Enter the total here and on page 1, line 2.....	A9		00

SCHEDULE B Subtractions from Taxable Income

B1 Recalculated Arizona depreciation: See instructions	B1		00
B2 Basis adjustment for property sold or otherwise disposed of during the taxable year: See instructions	B2		00
B3 Dividends received from 50% or more controlled domestic corporations.....	B3		00
B4 Foreign dividend gross-up	B4		00
B5 Dividends received from foreign corporations	B5		00
B6 Interest on U.S. obligations.....	B6		00
B7 Agricultural crops charitable contribution.....	B7		00
B8 Expenses related to certain federal tax credits: See instructions	B8		00
B9 Capital gain from exchange of legal tender	B9		00
B10 Other subtractions from federal taxable income: See instructions.....	B10		00
B11 Total: Add lines B1 through B10. Enter the total here and on page 1, line 4	B11		00

SCHEDULE C Nonapportionable Income and Expenses (Multistate Corporations Only)

C1 Nonbusiness dividends and interest income:					
a Total nonbusiness dividends not deducted in Schedule B.....	C1a		00		
b Interest from nonbusiness sources.....	C1b		00		
c Total nonbusiness dividends and interest: Add lines C1a and C1b	C1c				00
C2 Net royalties from nonbusiness assets: Include schedule.					
a Net royalties from nonbusiness real and tangible personal property.....	C2a		00		
b Net royalties from nonbusiness patents and copyrights	C2b		00		
c Total net royalties from nonbusiness assets: Add lines C2a and C2b	C2c				00
C3 Net income or (loss) from rental of nonbusiness assets: Include schedule.	C3				00
C4 Net capital gain or (loss) from sale or exchange of nonbusiness assets utilized for production of nonbusiness income: Include schedule.....	C4				00
C5 Other income or (loss): Include schedule.....	C5				00
C6 Subtotal: Add lines C1c, C2c, and C3 through C5.....	C6				00
C7 Expenses attributable to income derived from a foreign corporation which is not itself subject to Arizona income tax: Include schedule	C7				00
C8 Total: Subtract line C7 from line C6. Enter the total here and on page 1, line 7.....	C8				00

SCHEDULE D Other Income Allocated to Arizona (Multistate Corporations Only)

D1 Nonbusiness dividends and interest income:					
a Total nonbusiness dividends.....	D1a		00		
b Interest from nonbusiness sources.....	D1b		00		
c Total nonbusiness dividends and interest: Add lines D1a and D1b	D1c				00
D2 Net royalties from nonbusiness assets: Include schedule.					
a Net royalties from nonbusiness real and tangible personal property.....	D2a		00		
b Net royalties from nonbusiness patents and copyrights	D2b		00		
c Total net royalties from nonbusiness assets: Add lines D2a and D2b	D2c				00
D3 Net income or (loss) from rental of nonbusiness assets: Include schedule.	D3				00
D4 Net capital gain or (loss) from sale or exchange of nonbusiness assets utilized for production of nonbusiness income: Include schedule.....	D4				00
D5 Other income or (loss) directly allocable to Arizona: Include schedule.	D5				00
D6 Total: Add lines D1c, D2c, and D3 through D5. Enter the total here and on page 1, line 11	D6				00

SCHEDULE E Apportionment Formula (Multistate Corporations Only)

IMPORTANT: Qualifying air carriers must use Arizona Schedule ACA. Qualifying multistate service providers must include Arizona Schedule MSP. If the **"SALES FACTOR ONLY"** box on page 1, line E, is checked, *complete only Section E3, Sales Factor, lines a through f.* See instructions.

	COLUMN A Total Within Arizona Round to nearest dollar.	COLUMN B Total Everywhere Round to nearest dollar.	COLUMN C Ratio Within Arizona A ÷ B
E1 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 2 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 Rented property (capitalize at 8 times net rent paid)..... c Total owned and rented property (Total of section a plus section b).
E2 Payroll Factor - STANDARD APPORTIONMENT ONLY Total wages, salaries, commissions and other compensation to employees (per federal Form 1120, or payroll reports).
E3 Sales Factor a Sales delivered or shipped to Arizona purchasers b Sales from services or from designated intangibles for 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) f Sales Factor Only (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.) Skip line E4 and line E5 STANDARD Apportionment , continue to E4. SALES FACTOR ONLY Apportionment , enter the amount from Column C on page 1, line 9.....	x2 OR x1		.
E4 STANDARD Apportionment Total Ratio: Add Column C of lines E1c, E2, and E3f. Enter the total.....			.
E5 Average Apportionment Ratio for STANDARD Apportionment: Divide line E4, Column C, by four (4). Enter the result on page 1, line 9. (If one of the factors is "0" in both Column A and Column B, see instructions.).....			.

SCHEDULE F Schedule of Tax Payments (Include additional sheets if more space is needed.)

	(a) Name of Corporation	(b) EIN	(c) Payment Date	(d) Estimated Payment	(e) Extension Payment
F1			MM DD YY	00	00
F2			MM DD YY	00	00
F3			MM DD YY	00	00
F4			MM DD YY	00	00
F5			MM DD YY	00	00
F6			MM DD YY	00	00
F7	Total Tax Payments			00	00

SCHEDULE G Other Information

G1 Date business began in Arizona or date income was first derived from Arizona sources: MM,MM,DD,DD|Y,Y,Y,Y

G2 Address at which tax records are located for audit purposes:
 Number and Street: _____
 City: _____ State: _____ ZIP Code: _____

G3 The taxpayer designates the individual listed below as the person to contact to schedule an audit of this return and authorizes the disclosure of confidential information to this individual. (See instructions.)
 Name: _____ Office Phone: _____
 Title: _____ (Area Code)
 Email: _____ Cell Phone: _____
 (Area Code)

G4 List prior taxable years ending in MM/DD/YYYY format for which a federal examination has been finalized:

NOTE: A.R.S. § 43-327 requires the taxpayer, within ninety days after final determination, to report these changes under separate cover to the Arizona Department of Revenue or to file amended returns reporting these changes. (See instructions.)

G5 List the taxable years ending in MM/DD/YYYY format for which federal examinations are now in progress and final determination of past examinations is still pending:

G6 List the taxable years ending in MM/DD/YYYY format for which federal waivers of the statute of limitations are in effect and dates on which waivers expire:
 Taxable Year Ending: _____ Waiver Expiration Date: _____

G7 Indicate tax accounting method: Cash Accrual Other (Specify method.) _____

Multistate taxpayers:

G8 Are the nonbusiness items reported on Schedule C, lines C1 through C5, and/or are the apportionment factor amounts reported on Schedule E, Column B treated consistently on all state tax returns filed under the Uniform Division of Income for Tax Purposes Act?
 Yes No If "No", the taxpayer must disclose the nature and extent of the variance upon request by the department.

G9 Has the taxpayer changed the way income is apportioned or allocated to Arizona from prior taxable year returns?
 Yes No
 If "Yes", include explanation.

	The following declaration must be signed by one of the following officers: president, treasurer, or any other principal officer.		
Declaration	Under penalties of perjury, I, the undersigned officer authorized to sign this return, declare that I have examined this return, including the 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	_____ OFFICER'S SIGNATURE	_____ DATE	_____ TITLE
	_____ OFFICER'S PRINTED NAME		
Paid Preparer's Use Only	_____ 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
	_____ FIRM'S STREET ADDRESS		_____ FIRM'S TELEPHONE NUMBER
	_____ CITY	_____ STATE	_____ ZIP CODE

**This form must be e-filed unless the corporation has a waiver or is exempt from e-filing.
 See instructions for details.**

SCHEDULE A Additions to Taxable Income Continued

A6 Additions related to Arizona tax credits:

- A** Pollution Control Credit:
 - 1** Excess Federal Depreciation or Amortization.....
 - 2** Excess in Federal Adjusted Basis.....
- B** Credit for Taxes Paid for Coal Consumed in Generating Electrical Power.....
- C** Credit for Employment of TANF Recipients.....
- D** Credit for Donation of School Site.....
- E** Credit for Motion Picture Production Costs.....
- F** Credit for Corporate Contributions to School Tuition Organizations.....
- G** Credit for Corporate Contributions to School Tuition Organizations for Displaced Students or Students with Disabilities.....
- H** Total Additions Related to Arizona Tax Credits.
Enter this amount on page 2, Schedule A, line A6.....

A1		00
A2		00
B		00
C		00
D		00
E		00
F		00
G		00
H		00

A8 Other additions to federal taxable income:

- A** Positive Partnership Income Adjustment.....
- B** Federal Exploration Expenses.....
- C** Federal Amortization or Depreciation for Facilities and Equipment Amortized Under Arizona Law:
 - 1** Pollution Control Devices.....
 - 2** Child Care Facilities.....
- D** Expenses and Interest Relating to Income Not Taxed by Arizona.....
- E** Tax-Exempt Insurance Company Loss.....
- F** Amounts Repaid in Current Taxable Year.....
- G** Excess Federal Capital Loss Carryover Under a Claim of Right Restoration.....
- H** Domestic International Sales Corporations.....
- I** Expenditures for the Americans With Disabilities Act.....
- J** Treatment of Installment Obligations When Corporate Activities Cease in Arizona.....
- K** Total Other Additions to Federal Taxable Income.
Enter this amount on page 2, Schedule A, line A8.....

A		00
B		00
C1		00
C2		00
D		00
E		00
F		00
G		00
H		00
I		00
J		00
K		00

SCHEDULE B Subtractions from Taxable Income Continued

B8 Expenses related to certain federal tax credits:

- A** Work Opportunity Credit.....
- B** Empowerment Zone Employment Credit.....
- C** Credit for Employer-Paid Social Security Taxes on Employee Cash Tips.....
- D** Indian Employment Credit.....
- E** Total Expenses Related to Certain Federal Tax Credits.
Enter this amount on page 2, Schedule B, line B8.....

A		00
B		00
C		00
D		00
E		00

B10 Other subtractions from federal taxable income:

- A** Refunds of Taxes Based on Income.....
- B** Negative Partnership Income Adjustment.....
- C** Expense Recapture, Mine Explorations.....
- D** Deferred Exploration Expenses.....
- E** Exploration Expenses: Oil, Gas or Geothermal Resources.....
- F** Arizona Amortization of Facilities and Equipment:
 - 1** Pollution Control Devices.....
 - 2** Cost of Child Care Facilities.....
- G** Interest on Federal Taxable Arizona Obligations Evidenced by Bonds.....
- H** Expenses and Interest Relating to Tax-Exempt Income.....
- I** Tax-Exempt Insurance Company Income.....
- J** Claim of Right Adjustment.....
- K** Dividends from Domestic International Sales Corporation (DISC).....
- L** Income from Disaster Relief Efforts.....
- M** Expenditures for the Americans with Disabilities Act.....
- N** Contributions in Aid of Construction (see instructions).....
- O** Marijuana Establishments **only** (see instructions)
 - 1** Federal Disallowed Expenses, **or**.....
 - 2** Federal Taxable Income Attributable to NMMD Operations.....
- P** Total Other Subtractions from Federal Taxable Income.
Enter this amount on page 2, Schedule B, line B10.....

A		00
B		00
C		00
D		00
E		00
F1		00
F2		00
G		00
H		00
I		00
J		00
K		00
L		00
M		00
N		00
O1		00
O2		00
P		00