## **Arizona Corporation Income Tax Return (Short Form)**

2024

	For the □ cale	ndar year 2024 or □ fiscal year beginning ∭,∭				<u>  2 , 0 , Y , Y j</u> .
Ruei	ness Telephone Number	Check this box if this fiscal year return is	s based on a 5	2/53 week taxable ye		dentification Number (EIN)
	area code)	r Name			Lilipioyei ic	dentinication Number (EIN)
		Address – number and street or PO Box				
Busi	ness Activity Code					
	federal Form 1120)	City, Town or Post Office		State	ZIP Code	
IMI	PORTANT: Do not	use Form 120A to file an Arizona combined	l or consolida	ted Check box if ret	urn is filed	d under extension:
	urn. Use Form 12			82 82F		
					NLY. DO N	OT MARK IN THIS AREA.
68	Check box if:			88		
		eturn B □Name change C □Address change				
Α		filed on a consolidated basis?	☐Yes ☐I	No		
	If "Yes", list EIN of co	ommon parent from consolidated return				
В		n's final ARIZONA return under this EIN?	□Yes □I	No		
	If "Yes", check one:			81 PM		66 RCVD
	1 Dissolved	2 ☐Withdrawn 3 ☐Merged/Reorganiz	ed			
	List EIN of the succe	essor corporation, if any				
С	Marijuana Establis					
	1 ☐ Adult Use only	2 ☐ Dual Lic. elected for-profit 3 ☐ Dual Lic. did	not elect for-prof	fit		
Δri	zona Tavahlo Ind	come Computation				
						00
1	•	included federal return				00
2		income from page 2, Schedule A, line A9			1 1	00
3		e: Add lines 1 and 2. Enter the total				00
4		xable income from page 2, Schedule B, line B11				00
5 6	-	ubtract line 4 from line 3. Enter the difference perating loss carryover: Include computation schedule				00
7		ome: Subtract line 6 from line 5. Enter the difference.				00
•	7 III ZONA IAXABIO III OO	who. Subtract line of from line of Enter the unicronice.				100
Ari	zona Tax Liabilit	y Computation				
8	Enter tax: Tax is 4.9	9 percent of line 7 or fifty dollars (\$50), whichever	is greater		8	00
9		of tax credits from Arizona Form 300, Part 2, line 22	_		1 - 1	00
10	•	8 and 9. Enter the total				00
11	Nonrefundable tax c	redits from Arizona Form 300, Part 2, line 40			11	00
12						
	Enter form number for	or each nonrefundable credit used: 121 [3] 122	<u>123</u> ∟ 123 L	3 <sub>124</sub>		
13	Tax liability: Subtract	ct line 11 from line 10. Enter the difference			13	00
Tox	Dovmente					
Idx	Payments					
14		its: Check box(es) and enter amount: 141 308 14			1 1	00
15		made with Form 120/165EXT or online: See instruction				00
16	Estimated tax payme			00 Add 16a and 16b	1 1	00
17	lotal payments: Add	d lines 14, 15, and 16c. Enter the total			17	00
Co	mputation of Tot	al Due or Overpayment				
18		If line 13 is larger than line 17, subtract line 17 from line	ne 13 Enterthe	difference Skin line 10	18	00
19		: If line 17 is larger than line 17, subtract line 17 from li			1 1	00
20		If the 17 is larger than line 13, subtract line 13 from			1 1	00
21	•	payment penalty: If Form 220/PTE is included, check		_		00
22		structions.				00
23		ee instructions.				00
24		be applied to 2025 estimated tax	<b>I</b>		00	
25		led: Subtract line 24 from line 23. Enter the difference			25	00

Nam	e (as shown on page 1) EIN						
90	HEDULE A Additions to Taxable Income						
	Total federal depreciation	A1	00				
A2	Taxes based on income paid to any state (INCLUDING ARIZONA), local governments or foreign governments		00				
A3	Interest on obligations of other states, foreign countries, or political subdivisions		00				
A4	Special deductions claimed on federal return		00				
A5	Federal net operating loss deduction claimed on federal return		00				
A6	Additions related to Arizona tax credits: See instructions		00				
A7			00				
A8	Other additions to federal taxable income: See instructions		00				
A9	Total: Add lines A1 through A8. Enter the total here and on page 1, line 2		00				
SC	HEDULE B Subtractions From Taxable Income		1				
В1	<b>'</b>		00				
<b>B2</b>	Basis adjustment for property sold or otherwise disposed of during the taxable year: See instructions		00				
В3	Dividends received from 50% or more controlled domestic corporations	B3	00				
В4	Foreign dividend gross-up	B4	00				
В5	Dividends received from foreign corporations	B5	00				
В6	Interest on U.S. obligations	B6	00				
В7	Agricultural crops charitable contribution	B7	00				
В8	Expenses related to certain federal tax credits: See instructions	B8	00				
В9	Capital gain from exchange of legal tender	В9	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				
SC	HEDULE C Additional Information						
C1	Date business began in Arizona: [M,M,D,D,Y,Y,Y,Y,						
	Address at which tax records are located for audit purposes: Number/Street:						
	City: State: ZIP Code:						
C3	The taxpayer designates the individual listed below as the person to contact to schedule an audit of this re		sclosure of				
	confidential information to this individual. (See instructions.)						
	Name: Office Pho	one.					
	Title:	(Area Code)					
	Email: Cell Phone	e·					
C4		(Aroa Codo)					
	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.)						
C5	Indicate tax accounting method:   Cash Accrual Other (Specify method.)						

Continued on page 3 →

	The following declaration must be signed by one of the fol	lowing officers:	president, treas	asurer, 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						
		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 Star	ate of Arizona.			
Please	OFFICER'S SIGNATURE	DATE		TLE			
Sign							
Here	OFFICER'S PRINTED NAME						
	PAID PREPARER'S SIGNATURE		DATE	PAID PREPARER'S TIN			
Paid							
Preparer's	PAID PREPARER'S PRINTED NAME						
Use	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)			FIRM'S EIN			
Only	FIRM 3 NAME (OR FAID FREFARER 3 NAME, IF SELF-EMFLOTED)			THAN S LIN			
	FIRM'S STREET ADDRESS			FIRM'S TELEPHONE NUMBER			
	CITY		STATE	ZIP CODE			

EIN

Name (as shown on page 1)

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

Name (as shown on page 1)			EIN		
	`	· - ·			
<u>_</u>					
SC	HE	Additions to Taxable Income Continued			
A6	A	dditions related to Arizona tax credits:			
	Α	Pollution Control Credit:			_
		1 Excess Federal Depreciation or Amortization	A1	00	1
		2 Excess in Federal Adjusted Basis	A2	00	1
	В	Credit for Taxes Paid for Coal Consumed in Generating Electrical Power	В	00	7
	С	Credit for Employment of TANF Recipients	с	00	_
	D	Credit for Donation of School Site		00	_
	Ε	Credit for Motion Picture Production Costs		00	1
	F	Credit for Corporate Contributions to School Tuition Organizations	<b>F</b>	00	1
	G	Credit for Corporate Contributions to School Tuition Organizations for Displaced			
		Students or Students with Disabilities	<b>G</b>	00	-
	Н	Total Additions Related to Arizona Tax Credits.			
		Enter this amount on page 2, Schedule A, line A6	Н	00	
<b>A8</b>	O	ther additions to federal taxable income:			_
	Α	Positive Partnership Income Adjustment	A	00	1
		Federal Exploration Expenses		00	
	С	Federal Amortization or Depreciation for Facilities and Equipment Amortized			
		Under Arizona Law:		1	_
		1 Pollution Control Devices		00	1
		2 Child Care Facilities		00	1
		Expenses and Interest Relating to Income Not Taxed by Arizona		00	1
		Amounts Repaid in Current Taxable Year		00	1
		. ,		00	1
		Domestic International Sales Corporations		00	1
	Н	Expenditures for the Americans With Disabilities Act	H	00	-
	I	Total Other Additions to Federal Taxable Income.			
		Enter this amount on page 2, Schedule A, line A8	🔟	00	]
SC	lil:	Subtractions from Taxable Income Continued			
В8	E	xpenses related to certain federal tax credits:		1	-
	Α	Work Opportunity Credit	A	00	1
		Empowerment Zone Employment Credit		00	1
	С	Credit for Employer-Paid Social Security Taxes on Employee Cash Tips	С	00	7
	D	Indian Employment Credit	D	00	_
	Ε	Total Expenses Related to Certain Federal Tax Credits.			
		Enter this amount on page 2, Schedule B, line B8	E	00	
B10	01	ther subtractions from federal taxable income:		1	
	Α	Refunds of Taxes Based on Income		00	1
	В	Negative Partnership Income Adjustment		00	1
		Expense Recapture, Mine Explorations		00	1
		Deferred Exploration Expenses		00	7
		Exploration Expenses: Oil, Gas or Geothermal Resources	<u>E</u>	00	-
	F	Arizona Amortization of Facilities and Equipment:		1	-
		1 Pollution Control Devices		00	7
		2 Cost of Child Care Facilities		00	1
		Interest on Federally Taxable Arizona Obligations Evidenced by Bonds		00	1
	Н	Expenses and Interest Relating to Tax-Exempt Income		00	7
	1	Claim of Right Adjustment	_	00	1
	J	Dividends from Domestic International Sales Corporation (DISC)		00	1
		Expenditures for the Americans with Disabilities Act		00	7
		Contribution in Aid of Construction (see instructions)	<b>L</b>	00	1
	IVI	Marijuana Establishments <i>only</i> (see instructions)	844	00	
		1 Federal Disallowed Expenses, or		00	7
	ķ.	2 Federal Taxable Income Attributable to NMMD Operations	1712		-
	N	Total Other Subtractions from Federal Taxable Income.	l N	00	
		Enter this amount on page 2, Schedule B, line B10	N	100	J