	165EX		••					of Time to File ganization Retur	ns	2024
	ions and Part individual shar	<b>tnerships։</b> և	Use Form 204	to requ	iest an ex	xtension of t				on Form 140NR for
For the [	•		•	-	-			.4. and ending ⊾ week taxable year.		 2_0_Y_Y
Name				<u></u>			0_,	Employer Identificat		nber (EIN)
Address – number and street or PO Box								Business Telephone	e Numb	er (with area code)
City, Town or P	City, Town or Post Office State ZIP Code REVENUE USE OF								/. DO NO	OT MARK IN THIS AREA.
Check if	this is the first	tax return file	ed under this r	name an	id EIN.	1				
3 Check if	name and/or a	address has c	changed.							
Check if	EIN has chang	jed. Enter pr	ior EIN:			1		81 PM		66 RCVD
Check type o	of return to be	filed: □ 99T	□ 99M	□ 12	20S	165				
return, unles a legal holida on or before or legal holid	-	due date falls e, the applicat	s on Saturday, ition must be p	, Sunday postmarl	∕, or Ar ked gr day, th	n Arizona ext ranted for mo le return. A	tension ore tha Arizona of time	n for a partnership an six months beyo will accept a valio covered by the Ariz	or S Co ond the d feder zona ex	
CHECK ONE Form 120,	BOX Form 120A, F	Form 99T, or	Form 99M:					Extension Date	<u> </u>	xable Year Ending
	equest for an a		en-month ex	tension	until	<u></u>	M	<u>MID,DIY,Y,Y,`</u>	<u>Y M.</u>	MID, DIY, Y, Y, Y
	S, or Form 16		the system	· * · · · ·····						
	equest for an a							ing used to transm	<u>Υ</u> ΙΜι vit the Δ	MIDIDITITIT
payment.				1. 000 1	1511 1101101	15 11 1113 1011		ing used to transm	It uic /	
EXTENSION	PAYMENT	COMPUTATI	ON Forms	120, 120	0A, 120S	, 99T, or 16	5 (for p	artnerships that electe	ed to pay	y tax at the entity level)
1 Tax liability	/ for the taxabl	e year: See in	structions						. 1	00
	nated tax paym								. 2	00
										00
	unt of extensio							ENT ENCLOSED	. 4	00
<ul> <li>Make ch</li> <li>Mail app Arizona</li> <li>Mail app</li> </ul>	eck payable to lication and pa Department of lication <b>withou</b> Department of	o Arizona Dep ayment to: Revenue, PC u <b>t</b> payment to	Dartment of Re D Box 29085, D:	evenue a Phoenix	and <b>inclu</b> k, AZ 850	<b>ide EIN on p</b> 038-9085.				
penalty if at the return h return. Tax	r will be liab least 90 perc as not been p cpayers subjec ot subject to th	cent of the t paid by the o ect to the e	tax liability d original due o extension und	lisclosed date of derpaym	l by tai the <b>Ta</b> nent <b>ye</b>	axpayers th	h the o	original due date	of the <b>of \$50</b>	on any additional e return until paid. 00 or more for tax y electronic funds
Declaration								npanying schedules a norized to prepare this		ements, and to the
Please										
Sign	SIGNATURE	OF OFFICER	URAGENT			DATE		TITLE		
Here								= (with area code)	AGEN	
	PRINTED NAME BUSINESS PHONE (with area code) AGENT'S									

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