Arizona Form 2024 Arizona Exempt Organization Business Income Tax Return

For the
calendar year 2024 or
fiscal year beginning M,M1D,D12,0,2,4 and ending M,M1D,D12,0,Y,Y)

Check this box if this fiscal year return is based on a 52/53 week taxable year.					
CHECK ONE:	Name		Employer Identification Number (EIN)		
Original					
Amended	Address – number and street or PO Box				
Business Telephone Number					
(with area code)	City, Town or Post Office	State	ZIP Code		
		Check box if re	eturn filed under extension:		

68	Check box if: A This is a first return B Name change C Address change	82 82F			
Α		REVENUE USE	E ONLY. DO NO	T MARK IN THIS ARE	:A.
в	Nature of unrelated business activities:	00			
С	Unrelated business activity codes:				
D	ARIZONA apportionment for multistate organizations only (check one box):				
	1 AIR CARRIER 2 STANDARD 3 SALES FACTOR ONLY				
Е	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	81 PM		66 RCVD	
F	Check federal form filed: 1 990-T 2 Other (specify)				
		1			

Arizona Unrelated Business Taxable Income Computation

1	Unrelated business taxable income	1	00
2	Additions related to Arizona tax credits claimed	2	00
3	Subtotal: Add line 1 and line 2. Enter the total	3	00
4	Apportionment ratio for multistate organizations only: See instructions 4		
5	Taxable income attributable to Arizona: See instructions	5	00

Arizona Tax Liability Computation

99T

6	Enter tax: Tax is 4.9 percent of line 5, or \$50, whichever is greater	6	00
7	Tax from recapture of tax credits from Arizona Form 300, Part 2, line 22	7	00
8	Subtotal: Add line 6 and line 7. Enter the total	8	00
9	Nonrefundable tax credits from Arizona Form 300, Part 2, line 40	9	00
10	Credit type:		
	Enter form number for each nonrefundable credit claimed:101 13 102 13 102 13 103 103 104 13 104 13 104		
11	Tax liability: Subtract line 9 from line 8. Enter the difference	11	00

Tax Payments

12	Refundable tax credits: Check box(es) and enter amount: 121 308 122 334 123 349	12	00
13	Extension payment made with Arizona Form 120/165EXT or online	13	00
14	Estimated tax payments:	14	00
	Amended returns. Payment made with original return plus all payments made after it		
	was filed: See instructions	15	00
16	Subtotal payments: Add lines 12 through 15. Enter the total	16	00
17	Overpayments of tax from original return or later adjustments: See instructions	17	00
18	Total Payments: Subtract line 17 from line 16. Enter the difference.	18	00

Computation of Total Due or Overpayment

19	Balance of tax due: If line 11 is larger than line 18, subtract line 18 from line 11. Enter balance of tax due. Skip line 20	19	00
20	Overpayment of tax: If line 18 is larger than line 11, subtract line 11 from line 18. Enter overpayment of tax	20	00
21	Penalty and interest	21	00
	Estimated tax underpayment penalty: If Form 220PTE is included, check this box	22	00
23	TOTAL AMOUNT DUE: Add lines 19, 21, and 22. Enter the total. See instructions	23	00
24	OVERPAYMENT: See instructions	24	00
25	Amount of line 24 to be applied to 2025 estimated tax)	
26	Amount to be refunded: Subtract line 25 from line 24. Enter the difference.	26	00

Name (as shown on page 1)	EIN

SCHEDULE A Apportionment Formula (Multistate Organizations Only)

Qualifying multistate service providers must include Arizona COLUMN A COLUMN B COLUMN C Schedule MSP. If the "SALES FACTOR ONLY" box on page 1, line D, is checked, complete only Section A3, Sales Factor, lines a through f. COLUMN A Total Everywhere Round to nearest dollar. COLUMN C 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). Image: Column A COLUMN A COLUMN C Ratio Within Arizona A2 Payroll 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). Image: Column A COLUMN A COLUMN C Ratio Within Arizona A2 Payroll Factor - STANDARD APPORTIONMENT ONLY Total wages, salaries, commissions and other compensation to employees (per federal Form 990T, or payroll reports). Image: Column A Image: Colu
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A2 Payroll Factor - STANDARD APPORTIONMENT ONLY Total wages, salaries, commissions and other compensation to employees (per federal Form 990T, or payroll reports). A3 Sales Factor a Sales delivered or shipped to Arizona purchasers b Sales from services or from designated intangibles for qualifying
Total wages, salaries, commissions and other compensation to employees (per federal Form 990T, or payroll reports).
employees (per federal Form 990T, or payroll reports).
A3 Sales Factor a Sales delivered or shipped to Arizona purchasers
a Sales delivered or shipped to Arizona purchasers b Sales from services or from designated intangibles for qualifying
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) ×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 4
A4 STANDARD Apportionment Total Ratio: Add Column C of lines A1, A2, and A3f. Enter the total
A5 Average Apportionment Ratio for STANDARD Apportionment: Divide line A4, Column C, by four (4). Enter the result on page 1, line 4. (If one of the factors is "0", in both Column A and Column B, see instructions.)

Declaration	Under penalties of perjury, I 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		TLE	
Paid Preparer's	PAID PREPARER'S SIGNATURE		DATE		PAID PREPARER'S TIN
Use	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLO	DYED)			FIRM'S EIN
Only	FIRM'S STREET ADDRESS				FIRM'S TELEPHONE NUMBER
	CITY		STATE		ZIP CODE

Mail to: Arizona Department of Revenue, PO Box 52153, Phoenix, AZ 85072-2153