

For the  calendar year 2022 or  fiscal year beginning 12022 and ending 12022.

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

**IMPORTANT: Do not use Form 120A to file an Arizona combined or consolidated return. Use Form 120.**

Check box if return is filed under extension:

82F

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88

81 PM

66 RCVD

**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  
If "Yes", list EIN of common parent from consolidated return .....
- B 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1  Dissolved      2  Withdrawn      3  Merged/Reorganized  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 .....
- C **Marijuana Establishments only:**  
1  Adult Use only    2  Dual Lic. elected for-profit    3  Dual Lic. did not elect for-profit

**Arizona Taxable Income Computation**

1 Taxable income per included federal return.....	1		00
2 Additions to taxable income from page 2, Schedule A, line A9.....	2		00
3 Total taxable income: Add lines 1 and 2. Enter the total.....	3		00
4 Subtractions from taxable income from page 2, Schedule B, line B11.....	4		00
5 Adjusted income: Subtract line 4 from line 3. Enter the difference.....	5		00
6 Arizona basis net operating loss carryover: Include computation schedule.....	6		00
7 Arizona taxable income: Subtract line 6 from line 5. Enter the difference.....	7		00

**Arizona Tax Liability Computation**

8 Enter tax: <b>Tax is 4.9 percent of line 7 or fifty dollars (\$50), whichever is greater.</b> .....	8		00
9 Tax from recapture of tax credits from Arizona Form 300, Part 2, line 24.....	9		00
10 Subtotal: Add lines 8 and 9. Enter the total.....	10		00
11 Nonrefundable tax credits from Arizona Form 300, Part 2, line 44.....	11		00
12 Credit type: Enter form number for each nonrefundable credit used: 121 <u>3</u> 122 <u>3</u> 123 <u>3</u> 124 <u>3</u>			
13 Tax liability: Subtract line 11 from line 10. Enter the difference.....	13		00

**Tax Payments**

14 Refundable tax credits: Check box(es) and enter amount: 141 <input type="checkbox"/> 308 142 <input type="checkbox"/> 349.....	14		00
15 Extension payment made with Form 120/165EXT or online: See instructions.....	15		00
16 Estimated tax payments: 16a <u>00</u> Claim of Right: 16b <u>00</u> Add 16a and 16b ...	16c		00
17 Total payments: Add lines 14, 15, and 16c. Enter the total.....	17		00

**Computation of Total Due or Overpayment**

18 Balance of tax due: If line 13 is larger than line 17, subtract line 17 from line 13. Enter the difference. Skip line 19..	18		00
19 Overpayment of tax: If line 17 is larger than line 13, subtract line 13 from line 17. Enter the difference.....	19		00
20 Penalty and interest.....	20		00
21 Estimated tax underpayment penalty: If Form 220/PTE is included, check box..... 21A <input type="checkbox"/>	21		00
22 <b>TOTAL DUE:</b> See instructions.....	22		00
23 <b>OVERPAYMENT:</b> See instructions.....	23		00
24 Amount of line 23 to be applied to 2023 estimated tax.....	24	<u>00</u>	
25 Amount to be refunded: Subtract line 24 from line 23. Enter the difference.....	25		00

Continued on page 2 →

Name (as shown on page 1)	EIN
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**SCHEDULE A Additions to Taxable Income**

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

**SCHEDULE B Subtractions From Taxable Income**

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

**SCHEDULE C Additional Information**

C1 Date business began in Arizona: MM/DD/YYYY

C2 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 return and authorizes the disclosure of confidential information to this individual. (See instructions.)  
Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
Title: \_\_\_\_\_ (Area Code)  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
(Area Code)

C4 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.)

C5 Indicate tax accounting method:  Cash  Accrual  Other (Specify method.) \_\_\_\_\_

Continued on page 3 →

Name (as shown on page 1)	EIN
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<b>Declaration</b>	The following declaration must be signed by one of the following officers: president, treasurer, or any other principal officer.		
	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.		
<b>Please Sign Here</b>	_____ OFFICER'S SIGNATURE	_____ DATE	_____ TITLE
	_____ OFFICER'S PRINTED NAME		
<b>Paid Preparer's Use Only</b>	_____ 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 Corporate Contributions to School Tuition Organizations.....
- F** Credit for Corporate Contributions to School Tuition Organizations for Displaced Students or Students with Disabilities.....
- G** Total Additions Related to Arizona Tax Credits.  
Enter this amount on page 2, Schedule A, line A6.....

<b>A1</b>		00
<b>A2</b>		00
<b>B</b>		00
<b>C</b>		00
<b>D</b>		00
<b>E</b>		00
<b>F</b>		00
<b>G</b>		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** Amounts Repaid in Current Taxable Year.....
- F** Excess Federal Capital Loss Carryover Under a Claim of Right Restoration.....
- G** Domestic International Sales Corporations.....
- H** Expenditures for the Americans With Disabilities Act.....
- I** Total Other Additions to Federal Taxable Income.  
Enter this amount on page 2, Schedule A, line A8.....

<b>A</b>		00
<b>B</b>		00
<b>C1</b>		00
<b>C2</b>		00
<b>D</b>		00
<b>E</b>		00
<b>F</b>		00
<b>G</b>		00
<b>H</b>		00
<b>I</b>		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.....

<b>A</b>		00
<b>B</b>		00
<b>C</b>		00
<b>D</b>		00
<b>E</b>		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 Federally Taxable Arizona Obligations Evidenced by Bonds.....
- H** Expenses and Interest Relating to Tax-Exempt Income.....
- I** Claim of Right Adjustment.....
- J** Dividends from Domestic International Sales Corporation (DISC).....
- K** Expenditures for the Americans with Disabilities Act.....
- L** Contribution in Aid of Construction (see instructions).....
- M** Marijuana Establishments **only** (see instructions)
  - 1** Federal Disallowed Expenses, **or**.....
  - 2** Federal Taxable Income Attributable to NMMD Operations.....
- N** Total Other Subtractions from Federal Taxable Income.  
Enter this amount on page 2, Schedule B, line B10.....

<b>A</b>		00
<b>B</b>		00
<b>C</b>		00
<b>D</b>		00
<b>E</b>		00
<b>F1</b>		00
<b>F2</b>		00
<b>G</b>		00
<b>H</b>		00
<b>I</b>		00
<b>J</b>		00
<b>K</b>		00
<b>L</b>		00
<b>M1</b>		00
<b>M2</b>		00
<b>N</b>		00