ARIZONA FORM 99T

Arizona Exempt Organization Business Income Tax Return 2003

		For two days and a street or					CHECK ONE:			
		ror taxab	For taxable year beginning , and ending					Original Amended		
Mail to: Arize			Arizona Department of Reven	zona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079			CHECK ONE:			
					-	_	ndar year	Fiscal year		
Business telephone number		Please Type or Print	Name			Federal employer ID number (FEIN)				
Unrelated business activity codes			Number and street or PO Box				AZ withholding tax number			
			City or town, state and ZIP coo	de		AZ tra	ansaction pr	rivilege tax number		
		•			F	OR DOR U	ISE ONLY			
68	Check box if:	This is a	first return Name cha	nge Address change						
				<u> </u>						
	Date Arizona operations began									
3 [Date of letter granting exemption from Arizona income tax									
0 1	Nature of unrelated trade or	business	activities							
) C	Did you file an Arizona Form	199?	Yes No		81	6	6			
Ε (Check federal form filed:	990T	Other (specify)		CHECK BOX I					
						sion used to file return. 82 F				
	Enter tax - tax is 6.968 per Clean Elections Fund Tax Enter the amount of the table Clean Elections Fund Tax	ercent of ling Reduction ax reduction Credit. SI	Arizona Tax Lia Arizona Tax Lia ne 3, or \$50, whichever is gre n. Check this box to send \$5 on	corenter amount from line 1 bility Computation eater to the fund and reduce the tale E COMPLETING THIS LINE.	, if 100% Arizona) 			0 0	00	
			Tax P	ayments						
8	Extension payment made	with Arizo	ona Form 120EXT - see instru	-	8	00]			
9	Estimated tax payments -	see instru	uctions		9	00				
10	Total payments - add line	s 8 and 9.	Amended returns - see instru	ıctions			10	0	0	
			Computation of Tota	I Due or Overpayment						
11	Balance of tax due - If line	e 7 is larae	er than line 10, enter balance	• •			11	0	00	
12		-	rger than line 7, enter overpay	· ·			12		0	
13	· •						13	0	0	
14			y. If Form 220 is attached, o				14	0	0	
15	15 Donation to Citizens Clean Elections Fund - Enter the amount of the donation. Amended returns - see instructions						15		0	
16			11, 13, 14, and 15. If money i		=		16		0	
17							17	0	0	
18			004 estimated tax		[18]	00	40	1.	_	
10	Amount to be refunded -	suhtract lir	ne 18 from line 17				19	10	M	

Schedule A - Apportionment Formula (Multistate Organizations Only) See instruction pages 5 and 6

Limited to Unrelated Trade or Business Amounts

A1 Property	Factor	Column A	Column B	Column C			
Value of real a	nd tangible personal property (by averaging the value of	Total	Total Within	Ratio Within			
	y at the beginning and end of the tax period; rented	Within	and	Arizona			
property at car	pitalized value)	Arizona	Without Arizona	A ÷ B			
Total own	ed and rented property						
A2 Payroll F	actor						
Total wages, s	alaries, commissions and other compensation of employees						
A3 Sales Fac	ctor						
a. Total sale	s and other gross receipts						
b. Double we	eight Arizona sales and gross receipts	X 2					
c. Sales fact	tor (for column A, multiply item a by item b; for column B,						
enter amo	ount from item a)						
A4 Total ratio - add A1, A2 and A3(c), in column C							
A5 Average	apportionment ratio - divide A4 by four (4). Enter the result in o	column C and on page 1, lin	e 2				
Certification	Under penalties of perjury, I declare that I have examined this retubelief, it is a true, correct and complete return, made in good faith,						
	belier, it is a true, correct and complete return, made in good failir,	for the taxable year stated pur	suant to the income tax laws of	the State of Anzona.			
Please			1				
	0: 1 ("		T:0				
Sign Here	Signature of officer	Date	Title				
Paid	Preparer's signature	Date					
Preparer's	Tropard o digitatoro	24.0	i				
Use Only							
	Firm's name (or preparer's, if self-employed)		Preparer's TIN				
	Firm's address		Zip code				