

Arizona Form A1-WP

Payment of Arizona Income Tax Withheld

Arizona Department of Revenue

PO Box 29085
Phoenix AZ 85038-9085

Arizona law requires certain taxpayers to make withholding tax payments at the same time as federal withholding deposits are due.

Taxpayer Information

Name
Number and street or PO Box
City or town, state, and ZIP code
Business telephone number

Failure to make payment may result in a 25% penalty in addition to other penalties and interest required by law.

Return Top Portion with Payment

Make check payable to:

ARIZONA DEPARTMENT OF REVENUE (Include EIN on payment.)

Return Top Portion with payment to:

Arizona Department of Revenue, PO Box 29085, Phoenix AZ 85038-9085

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.
POSTMARK DATE

EIN:		
Qtr	Year	Amount of Payment
Q	Y Y Y Y	Dollars Cents

Enter Quarter (1, 2, 3, or 4)
Four digits of Year for which Payment is made.

Instructions

Employers required to make more than one Arizona withholding payment per calendar quarter use Form A1-WP to transmit Arizona withholding payments to the department. *Employers required to make quarterly withholding payments will not use this form. Employers making withholding payments by electronic funds transfer or on the Internet will not use this form.*

Internet payments: Employers that register may make their withholding payments on the Internet with e-check or credit card. There is a fee to pay by credit card. Visit www.aztaxes.gov for further information.

Electronic Funds Transfer (EFT)

Refer to ARS § 42-1129 and the related Arizona Administrative Code rules (AAC R15-10-301 through R15-10-307) for detailed information regarding electronic funds transfer.

Employers whose average Arizona quarterly withholding tax liability for the preceding taxable year was \$20,000 or more must make Arizona withholding payments via the electronic funds transfer program. *If the employer makes its withholding payments by electronic funds transfer (EFT), the employer should not submit Form A1-WP to the department.*

Employers required to make withholding payments via electronic funds transfer must complete the department's electronic funds transfer authorization agreement at least 30 days prior to initiation of the first applicable transaction.

Employers whose average Arizona quarterly withholding tax liability for the preceding taxable year was less than \$20,000 may elect voluntary participation in the electronic funds transfer program. Voluntary participants in the program must complete the department's electronic funds transfer authorization agreement at least 30 days prior to the first applicable transaction.

Employer Identification Number

Enter the employer identification number. An employer identification number can be obtained from the Internal Revenue Service.

Taxpayer Information

Type or print the name, address, and phone number in the boxes in the Taxpayer Information section.

Quarter and Year

The table below identifies which months are in which quarter:

For these months:	Enter this number for the Quarter:
January, February, March	1
April, May, June	2
July, August, September	3
October, November, December	4

Enter the quarter from the chart above. Enter the four-digit year.

Amount of Payment

Enter the amount of payment enclosed.

NOTE: Do not submit Form A1-WP if the payment is zero or no payment is enclosed. Do not submit Form A1-WP to list prior payments made during the quarter. Do not submit Form A1-WP for a negative amount (to apply a credit as a payment or to claim a credit as an overpayment).