

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

Employer Identification Number (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.

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88		
81	PM	66 RCVD

Taxpayer Information	
Name	
Number and street or PO Box	
City or town, state and ZIP Code	
Business telephone number (with area code)	

IMPORTANT: Arizona law requires certain taxpayers to make withholding tax payments at the same time as federal withholding deposits are due. 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 and include EIN on payment.
- Mail top portion with payment to: Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.

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 should not use this form. Employers making withholding payments by electronic funds transfer or on the Internet should 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 A.R.S. § 42-1129 and the related Arizona Administrative Code rules (A.A.C. 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.

NOTE: Employers required to make withholding payments via EFT that fail to do so will be subject to a penalty of 5% of the amount of the payment not made by EFT. See A.R.S. § 42-1125(O).

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.

Participants in the Electronic Funds Transfer program must enroll online at www.AZTaxes.gov at least 30 days prior to the first applicable transaction.

Taxpayer Information

Type or print the name, address, and phone number in the boxes in the Taxpayer Information section. If the taxpayer has a foreign address, enter the information in the following order: city, province or state, and country. Follow the country's practice for entering the postal code. Do not abbreviate the country's name.

Employer Identification Number (EIN)

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

Quarter and Year

The charts below identify which months or payments are included in each 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

For this payment:	Enter this number for the quarter:
Extension payment for Form A1-APR	4

Enter the quarter from one of the charts 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).