

**ARIZONA FORM
120S**

Arizona S Corporation Income Tax Return - Tax Recovery 2004

For taxable year beginning _____, and ending _____

Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079

CHECK ONE:	
Original <input type="checkbox"/>	Amended <input type="checkbox"/>
CHECK ONE:	
Calendar year <input type="checkbox"/>	Fiscal year <input type="checkbox"/>
Employer identification number (EIN)	
AZ withholding tax number	
AZ transaction privilege tax number	

Business telephone number	Please Type or Print	Name
Business activity code number (from federal Form 1120S)		Number and street or PO Box
		City, or town, state, and ZIP code

69 Check box if: This is a first return Name change Address change

A Is this the corporation's final Arizona return? Yes No
If yes, check one: Dissolved Withdrawn Merged/Reorganized
List EIN of the successor corporation, if any _____

B Does the S corporation conduct business within and without Arizona? Yes No

C Will a composite return be filed on Form 140NR? Yes No

D Total number of nonresident individual shareholders _____

E Total number of resident individual shareholders _____

F Total number of entity shareholders (See instruction page 3) _____

FOR DOR USE ONLY

81 _____ **66** _____

82 CHECK BOX IF:
Federal extension used to file return. ^{82 F}

1 Total distributive income (loss) - from federal Form 1120S, Schedule K.....	1	00
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Complete lines 2-11 only if the S corporation has excess net passive income or capital gains/built-in gains. An S corporation that is not required to complete lines 2-11 must complete lines 12-34 if the S corporation has a tax liability from the recapture of tax credits or has elected to claim refundable tax credits.

2 Excess net passive income	2	00
3 Capital gains/built-in gains	3	00
4 Total federal income subject to corporate income tax - add lines 2 and 3. WHOLLY ARIZONA S CORPORATION GO TO LINE 11	4	00
5 Nonapportionable or allocable income - attach schedule. MULTISTATE S CORPORATIONS ONLY	5	00
6 Apportionable income - subtract line 5 from line 4. Multistate S corporations only.....	6	00
7 Arizona apportionment ratio - from Schedule B or Schedule ACA.....	7	.
8 Income apportioned to Arizona - line 6 multiplied by line 7. Multistate S corporations only.....	8	00
9 Other income allocated to Arizona - attach schedule. Multistate S corporations only	9	00
10 Total income attributable to Arizona - add lines 8 and 9.....	10	00
11 Net income subject to Arizona corporate income tax. Wholly Arizona S corporations - enter amount from line 4 Multistate S corporations - enter amount from line 10.....	11	00
12 Enter tax - see instructions before completing this line	12	00
13 Tax from recapture of tax credits - from Form 300, Part II, line 25.....	13	00
14 Subtotal - add lines 12 and 13.....	14	00
15 Clean Elections Fund Tax Reduction. Check this box to send \$5 to the fund and reduce the tax (line 14) by \$5. Enter the amount of the tax reduction.....	15A <input type="checkbox"/>	00
16 Nonrefundable tax credits - from Arizona Form 300, Part II, line 48.....	16	00
17 Credit type - enter form number for each credit claimed.....	17 <input type="checkbox"/> 3 <input type="checkbox"/> 3 <input type="checkbox"/> 3 <input type="checkbox"/> 3	
18 Tax liability - subtract the sum of lines 15 and 16 from line 14	18	00
19 Clean Elections Fund Tax Credit. SEE INSTRUCTIONS BEFORE COMPLETING THIS LINE.....	19	00
20 Tax liability after Clean Elections Fund tax credit - subtract line 19 from line 18.....	20	00
21 Refundable tax credits - see instructions.....	21	00
22 Credit type - enter form number for each refundable credit claimed....	22 <input type="checkbox"/> 3 <input type="checkbox"/> 3	
23 Extension payment made with Form 120EXT - see instructions	23	00
24 Estimated tax payments - see instructions	24	00
25 Total payments - add lines 21, 23 and 24. Amended returns - see instructions.....	25	00
26 Balance of tax due - If line 20 is larger than line 25, enter balance of tax due. Skip line 27.....	26	00
27 Overpayment of tax - If line 25 is larger than line 20, enter overpayment of tax	27	00
28 Penalty and interest.....	28	00
29 Estimated tax underpayment penalty. If Form 220 is attached, check box.....	29A <input type="checkbox"/>	00
30 Donation to Citizens Clean Elections Fund - see instructions	30	00
31 TOTAL DUE - payment must accompany return.....	31	00
32 OVERPAYMENT - see instructions.....	32	00
33 Amount of line 32 to be applied to 2005 estimated tax.....	33	00
34 Amount to be refunded - subtract line 33 from line 32.....	34	00

