## ARIZONA FORM 99T

## **Arizona Exempt Organization Business Income Tax Return**

For the  $\square$  calendar year 2012 or  $\square$  fiscal year beginning  $[M,M_1D,D_1Y,Y,Y,Y]$  and ending  $[M,M_1D,D_1Y,Y,Y,Y]$ .

CHECK ONE:	Please	Name			Employ	er identification	on number (EIN)
Original	Amended Type Number and street or PO Box				1		
Business telephone number	or	Transcrand chock of 1 o Box			AZ trans	saction privile	ge tax number
(with area code)	Print	City or town, state and ZIP code					
				CHECK B	OX IE-		
68 Chaolahawita 🖂 Thiois	- f:tt	urn ☐ Name change ☐ Address change		82 Return filed		extension.	82 F
A Date Arizona operations b				REVENUE USE C			IN THIS AREA.
B Nature of unrelated trade							
C Unrelated business activity							
		y one) Multistate organizations only.					
		ales Factor  ENHANCED Sales Factor					
E Did you file an Arizona Fo	_						
•		Other (specify)					
				l			
Attach a copy of the organization's federal return.  81						66	
		usiness Taxable Income Computation ble income - from federal Form 990-T				1	00
2 Apportionment ratio. Multistate organizations only - see instructions							
3 Taxable income attributable to Arizona - line 1 multiplied by line 2 (or enter amount from line 1, if 100% Arizona)							00
Arizona Tax Liability C	omput	ation					
4 Enter tax. Tax is 6.968	4	00					
5 Clean Elections Fund Tax Credit. SEE INSTRUCTIONS BEFORE COMPLETING THIS LINE							00
6 Tax liability after Clean Elections Fund tax credit - subtract line 5 from line 4							00
Tau Daymanta							
Tax Payments	al a constitue And	zona Form 120EXT or online	_		00		
			00				
		and an all an arranged and an all and the arranged and an all and a second a second and a second	. 8		- 00		
	,	n plus all payments made after it was filed -			00		
		hrough 9			00		
			00				
	_	l return or later adjustments - see instructions				12	00
12 Total Payments - subtra	ici iirie 11	from line 10				12	100
Computation of Total I	Due or (	Overpayment					
•		ger than line 12, enter balance of tax due. Skip line 1	4		[	13	00
		larger than line 6, enter overpayment of tax				14	00
					Ī	15	00
•		alty. If Form 220 is attached, check box			1	16	00
		is 13, 15, and 16. If money is due, payment must acco			i i	17	00
		18				18	00
		2013 estimated tax			00		100
		line 19 from line 18			- '	20	00
/ IIIIO GITE TO DO TOTATIACA	Januari						100

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operty Factor lue of real and tangible personal property (by averaging the lue of owned property at the beginning and end of the tax riod; rented property at capitalized value) tal owned and rented property	Column A Total Within Arizona Round to the Nearest Dollar	Column Total Every Round to Nearest D	where the	Ra	Colum Atio W Arizo A÷I	/ithir na	<b>1</b>
lue of owned property at the beginning and end of the tax riod; rented property at capitalized value) tal owned and rented property  tyroll Factor ages, salaries, commissions and other compensation paid to aployees	Round to the Nearest Dollar	Round to	the		Arizo	na	
riod; rented property at capitalized value)  tal owned and rented property	Nearest Dollar						
riod; rented property at capitalized value)  tal owned and rented property		Nearest D	ollar		A÷I		
yroll Factor ages, salaries, commissions and other compensation paid to aployees	X2 OR X8						
yroll Factor ages, salaries, commissions and other compensation paid to aployees	X2 OR X8						
ages, salaries, commissions and other compensation paid to apployees	X2 OR X8				Π		
nployees	X2 OR X8			•		$\top$	
Total sales and other gross receipts	X2 OR X8				1 1	'	
• .	X2 OR X8						
• .	X2 OR X8						
š į	/ L OIL // O						
Sales factor (for column A - multiply item a by item b;							
for column B - enter the amount from item a)							
tal ratio - add A1, A2, and A3(c), in column C						Т	
tification Under penalties of perjury, I declare that I have examined the best of my knowledge and belief, it is a true, correct and to the income tax laws of the State of Arizona.							
ase							
1							
Officer's Signature	Date	Title					
i							
parer's Preparer's Signature	Date		Preparer's P	TIN			
Only							
Firm's Name (or Preparer's Name, if self-employed)			Firm's 🔲 EI	N or [	_ss	N	_
		ZIP Code					

Name (as shown on page 1)

EIN

Mail to: Arizona Department of Revenue, PO Box 52153, Phoenix AZ 85072-2153