Arizona Corporation Income Tax Return

2015

		lar year 2015 or ☐ fiscal year beginning <u>M,M,D,D,2,0,1,5</u> and ending		
	ness Telephone Number area code)	Name	Employer lo	dentification Number (EIN)
		Address – number and street or PO Box		
	ness Activity Code			
(fron	n federal Form 1120)	City, Town or Post Office State	ZIP Code	
	-			
68	Check box if:		return file	ed under extension:
		filed on a consolidated basis?		
	If "Yes", list EIN of c	ommon parent from consolidated return	NLY. DO N	OT MARK IN THIS AREA.
B	ARIZONA filing me	thod: See instructions (check only one):		
	1 Separate compa	any 2 Combined (unitary group) 3 Consolidated		
С		ethod is consolidated, enter the last day of		
		122 were filed to make the election $[M,M,D,D,Y,Y,Y]$		
D		ethod is combined or consolidated, see Form 51		
		m 51 included?		66 RCVD
E		ment for multistate corporations only (check one box):		
F		e Provider Election and Computation (Arizona Schedule MSP) is included.		
		of the election cycle \Box Yr 1 \Box Yr 2 \Box Yr 3 \Box Yr 4 \Box Yr 5		
G		n's final ARIZONA return under this EIN? Yes No		
		Dissolved Withdrawn Merged/Reorganized		
		essor corporation, if any		
1		included federal return		00
2		income from page 2, Schedule A, line A8		00
3		e: Add lines 1 and 2		00
4		xable income from page 2, Schedule B, line B11		00
5	•	ubtract line 4 from line 3. WHOLLY ARIZONA CORPORATIONS GO TO LINE 13		00
6	•	mome from line 5. MULTISTATE CORPORATIONS ONLY		00
7		r allocable amounts from page 2, Schedule C, line C8. Multistate corporations only		00
8		ncome: Subtract line 7 from line 6. Multistate corporations only	8	00
9		ent ratio from Schedule E or Schedule ACA		00
10		ncome apportioned to Arizona: Line 8 multiplied by line 9. Multistate corporations only		00
11		ted to Arizona from page 2, Schedule D, line D6. Multistate corporations only		00
12		ributable to Arizona: Add lines 10 and 11. Multistate corporations only		00
13		bre Net Operating Loss (NOL) from line 5 if wholly Arizona, or line 12 if multistate		00
		carryover: Include computation schedule		00
15		me: Subtract line 14 from line 13		00
16		D percent of line 15 or fifty dollars (\$50), whichever is greater		00
17		of tax credits from Arizona Form 300, Part 2, line 31 16 and 17		00
18 19		redits from Arizona Form 300, Part 2, line 56		00
20		iouio ποιη Απέσηα τ οπη σου, τ αιτ 2, IIIe συ	19	
20		or each nonrefundable credit used: 20 3 1 13 13 13 13 13 13 13 13 13 13 13 13		
21		t line 19 from line 18		00
22			00	
23			00	
24			00	
25		e instructions		00
26		If line 21 is larger than line 25, enter balance of tax due. Skip line 27		00
27		If line 25 is larger than line 21, enter overpayment of tax		00
28				00
29	,	payment penalty. If Form 220 is included, check this box	_	00
30		nstructions		00
31		See instructions		00
32			00	
		led: Subtract line 32 from line 31		00

EIN

SCHEDULE A Additions to Taxable Income

A1	Total federal depreciation	A1	00	0
	Taxes based on income paid to any state (INCLUDING ARIZONA), local governments or foreign governments	A2	00	0
A3	Interest on obligations of other states, foreign countries, or political subdivisions	A3	00	0
A4	Special deductions claimed on federal return	A4	00	0
A5	Federal net operating loss deduction claimed on federal return	A5	00	0
A6	Additions related to Arizona tax credits: Include detailed schedule	A6	00	0
A7	Other additions to federal taxable income: Include detailed schedule	A7	00	0
A8	Total: Add lines A1 through A7. Enter the total here and on page 1, line 2	A8	00	0

SCHEDULE B Subtractions from Taxable Income

B1	Recalculated Arizona depreciation: See instructions	B1	00
B2	Basis adjustment for property sold or otherwise disposed of during the taxable year: See instructions	B2	00
B 3	Adjustment for IRC § 179 expense not allowed.	B3	00
	Dividends received from 50% or more controlled domestic corporations	B4	00
	Foreign dividend gross-up	B5	00
	Dividends received from foreign corporation	B6	00
	Interest on U.S. obligations	B7	00
	Agricultural crops charitable contribution	B8	00
	Expenses related to certain federal tax credits listed on the instructions: Include detailed schedule	B9	00
	Other subtractions from federal taxable income: Include detailed schedule	B10	00
B11	Total: Add lines B1 through B10. Enter the total here and on page 1, line 4	B11	00

SCHEDULE C Nonapportionable Income and Expenses (Multistate Corporations Only)

C1	Nonbusiness dividends and interest income:					1
	a Total nonbusiness dividends not deducted in Schedule B	C1a		00		
	b Interest from nonbusiness sources	C1b		00		
	c Total nonbusiness dividends and interest: Add lines C1a and C1b				C1c	00
C2	Net royalties: Include detailed schedule					1
	a Net royalties from nonbusiness real property and tangible personal property	C2a		00		
	b Net royalties from nonbusiness patents and copyrights	C2b		00		
	c Total net royalties from nonbusiness assets: Add lines C2a and C2b				C2c	00
C3	Net income or (loss) from rental of nonbusiness assets: Include detailed schedule				C3	00
C4	Net capital gain or (loss) from sale or exchange of nonbusiness assets utilized for prod	luction (of nonbusiness			1
	income: Include detailed schedule				C4	00
C5	Other income or (loss): Include detailed schedule				C5	00
C6	Subtotal: Add lines C1c, C2c, C3 through C5				C6	00
C7	Expenses attributable to income derived from a foreign corporation which is not itself s	ubject t	o Arizona			1
	income tax: Include detailed schedule				C7	00
C8	Total: Subtract line C7 from line C6. Enter the total here and on page 1, line 7			[C8	00

SCHEDULE D Other Income Allocated to Arizona (Multistate Corporations Only)

D1	Nonbusiness dividends and interest income:					
	a Total nonbusiness dividends	D1a		00		
	b Interest from nonbusiness sources	D1b		00		
	c Total nonbusiness dividends and interest: Add lines D1a and D1b	. <u></u>			D1c	00
D2	Net royalties from nonbusiness assets: Include detailed schedule					
	a Net royalties from nonbusiness real property and tangible personal property	D2a		00		
	b Net royalties from nonbusiness patents and copyrights	D2b		00		
	c Total net royalties from nonbusiness assets: Add lines D2a and D2b				D2c	00
D3	Net income or (loss) from rental of nonbusiness assets: Include detailed schedule				D3	00
D4	Net capital gain or (loss) from sale or exchange of nonbusiness assets utilized for pro	ductio	n of			
	nonbusiness income: Include detailed schedule				D4	00
D5	Other income or (loss) directly allocable to Arizona: Include detailed schedule				D5	00
D6	Total: Add lines D1c, D2c, D3 through D5. Enter the total here and on page 1, line 11	1		[D6	00

SCHEDULE E Apportionment Formula (Multistate Corporations Only)

IMPORTANT: Qualifying air carriers must use Arizona Schedule ACA. Qualifying multistate service providers must include Arizona Schedule MSP. See instructions.	COLUMN A Total Within Arizona Round to nearest dollar.	COLUMN B Total Everywhere Round to nearest dollar.	COLUMN C Ratio Within Arizona A ÷ B
 E1 Property Factor Value of real and tangible personal property (by averaging the value of owned property at the beginning and end of the tax period; rented property at capitalized value). a Owned property (at original cost): Inventories. 			
Depreciable assets: (do not include construction in progress) Land			- - -
 Other assets (describe): Less: Nonbusiness property (if included in above totals) Total of section a b Rented property (capitalize at 8 times net rental paid) c Total owned and rented property (section a total plus section b). d Weight AZ property: (STANDARD uses x 1; ENHANCED uses x 5.0) 	() 	()	
e Property factor (for column A, multiply line c by line d; for column B, enter amount from line c)			
 E2 Payroll Factor a Total wages, salaries, commissions and other compensation paid to employees (per federal Form 1120 or payroll reports) b Weight AZ payroll: (STANDARD uses x 1; ENHANCED uses x 5.0) c Payroll factor (for column A, multiply line a by line b; for column B, enter amount from line a) 	x1 OR x5.0		
 E3 Sales Factor a Sales delivered or shipped to Arizona purchasers b Sales of services for qualifying multistate service providers only (include Schedule MSP) c Other gross receipts d Total sales and other gross receipts e Weight AZ sales: (STANDARD uses x 2; ENHANCED uses x 90.0) 	×2 OR ×90.0	-	
 f Sales factor (for column A, multiply line d by line e; for column B, enter the amount from line d) 			
 E4 Total Ratio: Add lines E1e, E2c, and E3f, in column C E5 Average Apportionment Ratio: Divide line E4, column C, by the de ENHANCED divides by one hundred (100)). Enter the quotient in co 	enominator (STANDARD di	vides by four (4);	

SCHEDULE F Schedule of Tax Payments (Include additional sheets if more space is needed.)

Name of Corporation	EIN	Payment Date	Estimated Payment	Extension Payment
		MM DD YY	00	00
			00	00
			00	00
			00	00
		MM DD YY	00	00
		MM DD YY	00	00
TOTAL			00	00

Name (as shown o	n page 1)		EIN	
SCHEDULE	G Other Information		I	
	ness began in Arizona or date income was firs	t derived from Arizona sour	ces: IM,MID,DIY,Y	Y,Y.
	t which tax records are located for audit purpoind Street:			
			ZIP Code:	
confidentia	yer designates the individual listed below as t al information to this individual. (See instructio	and and		
G4 List prior ta	axable years for which a federal examination	has been finalized:		
	R.S. § 43-327 requires the taxpayer, within ni epartment of Revenue or to file amended retu		•	anges under separate cover to the
G5 List the tax	able years for which federal examinations ar	e now in progress and final o	determination of past exa	minations is still pending:
G6 List the tax	cable years for which federal waivers of the st	atute of limitations are in eff	ect and dates on which w	aivers expire:
G7 Amount of	Arizona taxable income for prior taxable year	r (2014 Form 120, line 15)		\$
G8 Indicate ta	x accounting method: Cash Accrual	Other (Specify method	.)	
☐ Yes [If "No", the 310 Has the ta: ☐ Yes [taxpayer must disclose the nature and exter xpayer changed the way income is apportion	t of the variance upon reque	est by the department.	
If "Yes", inc	clude explanation.			
Declaration	The following declaration must be signed b Under penalties of perjury, I(we), the unders including the accompanying schedules an complete return, made in good faith, for the	signed officer(s) authorized to d statements, and to the be	o sign this return, declare est of my(our) knowledge	that I(we) have examined this return, and belief, it is a true, correct and
Please Sign Here	OFFICER'S SIGNATURE	DATE	TITLE	
	OFFICER'S SIGNATURE	DATE	TITLE	
Paid	PAID PREPARER'S SIGNATURE		DATE	PAID PREPARER'S PTIN
Preparer's Use	FIRM'S NAME (OR PAID PREPARER'S NAME,	IF SELF-EMPLOYED)		
Only	FIRM'S STREET ADDRESS			FIRM'S TELEPHONE NUMBER
	CITY Mail to: Arizona Department of		STATE	ZIP CODE