RETURN.			Arizona Form 140X-SBI	Small Business For Forms 140						FOR CALENDAR Y	
RE			OR FISCAL YEAR BEGI	NNING $[M,M]D,D]2$	0,2	2,2 AND	ENDING 📗	M_1D_1	0 2 0 Y Y .	66F	
뿙		Your F	First Name and Middle Initial		Last	Name			Enter	ır Social Security	Numbe
11S TO	 ;	Spous	se's First Name and Middle Initial (if b	ox 95a or 95b checked)	Last	Name			SSN(s).	ouse's Social Sec	urity No
ANY ITEMS	_	Curre	nt Home Address - number and stree	t, rural route			Apt. No.		Daytime Phon	e (with area cod	e)
		City, T	Town or Post Office	State ZIP Code		are claiming Ir tion (Form 20	njured Spouse 3) check 3a	95a 🔲 M	tus. Must be the same a arried filing joint return arried filing separate re	95b 🗖 Head of H	
STAPLE		4	Federal Schedule B. See instructions		4		00	REVEN	JE USE ONLY. DO		S AREA.
ST/	o		Federal Schedule C. See instructions				00	88			
		5b I	Enter your NAICS code shown on Schedul	e C: ,	1						
DO NOT	Incom	6 F	Portion of Federal Schedule D. See in	structions for amount	 6		00				
9	Business	7a l	Federal Schedule E. Enter the amou	nt from each part	7a		00				
_	is.		7b Rental, Real Estate, Royalties	•			, , , ,	1			
	B		7c Partnerships/S Corporations								
	Small	7	7d Estates/Trusts00					81 PM		80 RCVD	
	S	8 F	Federal Schedule F. See instructions		8		00				
		9 F	Federal Form 4797. Amount not include	ed on line 6. See instruction	s 9		00	<u> </u>			
		10	Total Small Business income: Add	l lines 4. 5a. 6. 7a. 8 and	9. Er	nter the tota	al		10		00
			Fiduciary Adjustment (positive) from								00
	a E		Non-Arizona municipal interest. See								00
	<u>2</u>		Partnership Income Adjustment. See								00
	SS		Total federal depreciation								00
	Business Income		Net capital loss from the exchange of								00
표.			Claim of Right adjustment for amour	•			ū				00
S	Small		Claim of Right adjustment for amour	•							00
nts after Form 140X-SB	S	18	Agricultural Water Conservation exp	enses related to the tax o	redit o	claimed on	Arizona Form	312	18	1	00
14	ed t	19	Depreciation or amortization related	to tax credits claimed on	Arizor	na Form 31	15 and Arizon	a Form 3	25 19)	00
Ξ	Related to	20 Addition to S Corporation Income due to claiming pass-through credit (Forms 312 and 315)					20		00		
ᅙ	ns R	21	Basis adjustment for property claimed	as a credit on AZ Forms 31	5 and	325 that is	sold or dispos	ed of duri	ng the tax year 21		00
er	tior		Basis adjustment for property claimed								00
aft	V dd		Adjustment for Net Operating Loss of	•							00
ts			Americans with Disabilities Act - Acc	•							00
a			Entity-Level Income Tax payment. S Sole Proprietorship loss of an AZ No						20		
E		20				-			26		00
၁၀		27	Subtotal: Add lines 10 through 26.	Enter the total							00
r d		28	Total net capital gain or (loss). See in	structions				28	00		
the		29	Total net short-term capital gain or (le	oss). See instructions			;	29	00		
ō		30	Total net long-term capital gain or (los	ss). See instructions			;	30	00		
S 0	Business Income	31	Net long-term capital gain from asse	ts acquired <i>after</i> Decemb	er 31,	2011. See	e instructions.	31	00		
ë	ᆵ	32	Multiply line 31 by 25% (.25) and ent	er the result. See instructi	ons				32		00
ğ	ess	33	Fiduciary Adjustment (negative) from	Arizona Form 141AZ So	hedul	e K-1			33		00
ç	usin		Net capital gain derived from investr	•							00
leral and AZ schedules or other docum	<u>B</u>	35	Net capital gain from the exchange of	of one kind of legal tende	for a	nother kind	d of legal tend	er	35		00
	Small		Recalculated Arizona depreciation								00
	\$			e adjustment. See instructions						00	
	ıted			ns such as U.S. savings bonds and treasury bills						00	
	Rela			nent from tax years 2008 and 2009. See instructionso Arizona Charitable Organizations						00	
eg	- Su										00
Ď	Subtractions Related		Installment sale income from anothe								00
any required federal	btra		 42 Amount of wages or salaries paid or incurred during the tax year and used to claimed certain federal tax credits 43 Basis adjustment for property sold or otherwise disposed of during the tax year 							00	
	Su			•	-	•					00
			Americans with Disabilities Act - Acc								00
an				or amounts repaid in prior yearsor amounts repaid in Prior yearsof an AZ Nonprofit Medical Marijuana Dispensary included in Schedule C							00
ace			Sole Proprietorship - AZ Marijuana E								
ന		- 7/	Solo i roprisionalip - AZ Manjudha E	owniamicm, icomiy Fa		and ioi-pi	ont dual libell		ioi uio	1	1

ordinary and necessary business expenses related to the sales of recreational use products from Schedule DFE. 47

	Your Name (as shown on page 1) Your Social	Security Number		
Subtractions continued	48 S Corporation shareholders of an AZ Marijuana Establishment, Testing Facilities and for-profit dual license enter the amount of your pro-rata share of expenses related to the sales of recreational products from Schedule. K-1, line 7 and/or Schedule K-1(NR), line 20	48	00	
	50 Arizona Small Business Taxable Income. Subtract lines 32 through 49 from line 27. If less than zero, ento		00	
of Tax	51 Small Business Income Tax: Multiply line 50 by 3.0% (.030) and enter the result		00	
	52 Tax from recapture of of credits from Arizona Form 301-SBI, Part 2, line 25		00	
e of	53 Subtotal of tax: Add lines 51 and 52. Enter the total		00	
Balance	54 Nonrefundable Credits from Arizona Form 301-SBI, Part 2, line 46		00	
Bal	55 Balance of Tax: Subtract line 54 from line 53. If line 54 is greater than line 53, enter "0"		00	
		1 56a and 56b 56c	00	
dits	57 2022 AZ extension payment (Form 204-SBI)		00	
Payments and Refundable Credits	58 Refundable credits: Check the box(es) and enter the total amount		00	
ymer			00	
Refu	59 Payment made with original return plus all payments made after it was filed			
Ħ	60 Total payments and refundable credits: Add lines 56c, 57, 58 and 59. Enter the total		00	
TOverpayment	61 Overpayment from original return or as later adjusted. See instructions		00	
erpa	62 Balance of credits: Subtract line 61 from line 60		00	
ŏ	63 OVERPAYMENT: If line 55 is less than line 62, subtract line 55 from line 62. Enter amount of overpayment		00	
•	64 Amount of line 63 to be applied to 2023 estimated tax.	64 65	00	
Amount Owed	65 REFUND: Subtract line 64 from line 63. If less than zero, enter amount owed on line 66		100	
Amor	66 AMOUNT OWED: If line 55 is more than line 62, subtract line 62 from line 55. Enter amount owed Sign and date your return. If you paid someone to prepare your return, that person no return. The paid preparer must provide their street address, Paid Preparer TIN and paid preparer must provide their street address.	nust also sign and date	e the	
RE .	Under penalties of perjury, I declare that I have read this return and any documents with it, and to the best true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which		•	
SIGN HERE	YOUR SIGNATURE DATE OCCUPATION			
	SPOUSE'S SIGNATURE DATE SPOUSE'S OCC	CUPATION		
PLEASE	PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF SELF-EMPL)	OYED)		
L	PAID PREPARER'S STREET ADDRESS PA	ID PREPARER'S TIN	RER'S TIN	

• If you are sending a payment with this return, mail to:

Arizona Department of Revenue

PO Box 52016

Phoenix, AZ 85072-2016

Include the payment with Form 140X-SBI. Write your SSN, Form 140X-SBI and tax year on your payment.

If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to:

Arizona Department of Revenue

PO Box 52138

Phoenix, AZ 85072-2138-

our Name (as shown on page 1)	Y	our Social Security Num	ber
Complete Parts 1(A) and 1(B), Part 2 and Part 3 to repo	-	-	return
or most recent amended tax return and the	ne reason(s) for ea	ich change.	
IOTE: If you are rescinding your small business election, check box 67Rand in your amended income tax return (Form 140X), when filed. See the instruction lection.			
NCOME, DEDUCTIONS, CREDITS: In column (a), list the items you are charter or most recent amended return. In column (c), enter the amount of the chartenging.			
(a) INCOME, DEDUCTIONS, AND CREDITS YOU ARE CHANGING	(b) ORIGINAL AMOUNT REPORTED	(c) AMOUNT TO ADD OR SUBTRACT	(d) CORRECTED AMOUNT
7a	\$	\$	\$
7ь	\$	\$	\$
7c	\$	\$	\$
IET CAPITAL GAIN OR (LOSS): If you are changing any amount on lines 68a	through 68e, complet	te columns (b), (c), and	(d).
(a) ITEM	(b) ORIGINAL AMOUNT REPORTED	(c) AMOUNT TO ADD OR SUBTRACT	(d) CORRECTED AMOUNT
8a Total net capital gain or (loss) reported on Form 140-SBI, line 28;			
Form 140NR-SBI, line 27; or Form 140PY-SBI, line 28	\$	\$	\$
8ь Total net short-term capital gain or (loss) reported on Form 140-SBI,			
line 29; Form 140NR-SBI, line 28; or Form 140PY-SBI, line 29	\$	\$	\$
8c Total net long-term capital gain or (loss) reported on Form 140-SBI,	•		
line 30; Form 140NR-SBI, line 29; or Form 140PY-SBI, line 30	\$	\$	\$
8d Net long-term capital gains from assets acquired after December 31, 2011 reported on Form 140-SBI, line 31; Form 140NR-SBI, line 30; or			
Form 140PY-SBI, line 31	\$	\$	\$
8e Amount of allowable subtraction reported on Form 140-SBI, line 32;	Ψ	Ψ	Ψ
Form 140NR-SBI, line 31; or Form 140PY-SBI, line 32	\$	\$	\$
REASON FOR THE CHANGE: Give the reason for each change listed in Pal		1Ψ	