

Arizona Annual Payment Withholding Tax Return

DO NOT FILE MORE THAN ONE ORIGINAL FORM A1-APR PER EIN PER YEAR.
Form A1-APR is due on or before January 31, 2023.
If you file Form A1-QRT, do not file this form.

| Part 1 T | axpayer Information (Refer to the instructions before completing Part 1 | .) | | | |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|---------------------------|--|
| Business Name (As listed on the Arizona Joint Tax Application - Form JT-1) | | | Employer Identification Number (EIN) | | |
| Number and str | reet or PO Box | | | | |
| City or town, state and ZIP Code | | REVENUE US | REVENUE USE ONLY. DO NOT MARK IN THIS AREA. | | |
| Business teleph | none number (with area code) | | | | |
| Check box if: | | | | | |
| A □Amended | Return B Address Change C Final Return (CANCEL ACCOUNT) | | | | |
| | al return, the department will cancel your withholding account. Enter the date id and complete Part 6 | | | 66 RCVD | |
| | nis box if this return is an early-filed return for calendar year 2023 due cancellation during calendar year 2023. | to an | | | |
| | his box if this cancellation was due to a merger or acquisition and the gemployer is filing Forms W-2. | | | | |
| | rizona Withholding Tax Liability | | | | |
| | nual Withholding Tax Liability from all sources: Enter the total amount year | • | | | |
| Part 3 T | ax Payments (See instructions.) | | | | |
| | ing tax payments previously made for 2022 | | 2 | | |
| | of tax paid when filing extension request | | | | |
| 4 Total payments | | | | | |
| 5 Balance | of tax due: If line 1 is larger than line 4, subtract line 4 from line 1. E | Enter the difference. | | | |
| This is th | e balance of tax due. Skip line 6. Non-EFT payment must accompany | y return | 5 | | |
| 6 Overpay | ment of tax: If line 4 is larger than line 1, subtract line 1 from line 4. | Enter the difference | e. This | | |
| is the ove | erpayment of tax | | 6 | | |
| Part 4 F | ederal Form Transmittal Information | | | | |
| | ount of Arizona income tax withheld as shown on federal Forms W-2, | | 7 | | |
| 1099 for 2022 8 Total Arizona wages paid to employees for 2022 | | | | | |
| 9 Total number of employees paid Arizona wages for 2022 | | | | | |
| | nber of federal Forms W-2, W-2c, W-2G, and 1099 submitted to the d | | | | |
| | ons: If line 1 does not equal line 7, you have misreported your annu you have misreported your employee wage withholdings. | • | | | |
| Declaration | Under penalties of perjury, I declare that I have examined this return and to and correct return. | the best of my knowle | edge and belie | f, it is a true, complete | |
| Please | | | | | |
| Sign | | | | | |
| Here | TAXPAYER'S SIGNATURE | DATE | RUSINESS | PHONE NUMBER | |
| 1,010 | TAXLATER & GIGNATURE | DAIL | BOOMESS | THONE NOMBER | |
| Paid | PAID PREPARER'S SIGNATURE | DATE | PAID PREF | PARER'S TIN | |
| Preparer's Use | FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED) | | | N | |
| Only | FIRM'S STREET ADDRESS | | FIRM'S PHONE NUMBER. | | |
| | CITY | STATE | ZIP CODE | | |

| Name (as shown on page 1) | EIN | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--|
| Part 5 Amended Form A1-APR | | |
| f you checked the box "Amended Return" in Part 1, explain why an amended | Form A1-APR is being filed: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Part 6 Final Form A1-APR | | |
| f you checked the box "Final Return" in Part 1, check the box that indicates verse Reorganization or change in business entity (example: from corporate). | · | |
| 12 Business sold. | ation to partitionally). | |
| 13 ☐ Business stopped paying wages and will not have any employees in14 ☐ Business permanently closed. | the future. | |
| 15 Business has only leased or temporary agency employees. | | |
| 16 Other (specify reason): | | |
| 17 | address shown in Part 1. | |
| Name: | | |
| Number and Street: State: State: | ZIP Code: | |
| · | | |
| 18 ☐ Check this box if there is a successor employer. Name: | FINI: | |
| Number and Street: | | |
| City: State: | ZIP Code: | |
| | | |
| Part 7 Payment and Submission of Form A1-APR | | |

- ► Taxpayers with a 2022 tax liability of more than \$500 must pay that tax liability by EFT. See instructions.
- ► Taxpayers with a 2022 tax liability of \$500 or less may pay that liability by EFT or by check. See instructions.
- ▶ This form must be e-filed unless the taxpayer has a waiver or is exempt from e-filing. See instructions.