

Arizona Department of Revenue
PO Box 29009
Phoenix AZ 85038-9009

If you file Form A1-QRT, do not file this form. Instead, file Form A1-R.

EIN
Period End
12/31/2013

I. Taxpayer Information

Name
Number and street or PO Box
City or town, state and ZIP Code
Business telephone number (with area code)

Check box if: [] Amended Return [] Address Changed [] Final Return (CANCEL ACCOUNT)
[X] Software Vendor

If this is your final return, the department will cancel your withholding account. Complete the explanation section on page 2. (See Instructions.)

Enter date final wages paid [M,M|D,D|Y,Y,Y,Y]

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88
81 PM
66 RCVD

II. Arizona Withholding Tax Liability

1 Total Annual Withholding Tax Liability 1

III. Tax Payments (See instructions.)

2 Withholding tax payments previously made 2
3 Amount of tax paid when filing extension request 3
4 Total payments 4
5 Balance of tax due: If line 1 is larger than line 4, enter balance of tax due. Skip line 6. Non-EFT payment must accompany return 5
6 Overpayment of tax: If line 4 is larger than line 1, enter overpayment of tax 6

IV. Federal Form Transmittal Information

7 Total amount of Arizona income tax withheld (as shown on federal Forms W-2, W-2c, W-2G, and 1099-R) 7
8 Total wages paid to Arizona employees 8
9 Number of Arizona employees 9
10 Number of federal Forms W-2, W-2c, W-2G, and 1099-R 10

Instructions: If line 1 does not equal line 7, you have misreported your annual tax withholdings OR you have misreported your employee wage withholdings.

Declaration: Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, it is a true, complete and correct return.
Please Sign Here: TAXPAYER'S SIGNATURE, DATE, BUSINESS PHONE NUMBER
Paid Preparer's Use Only: PAID PREPARER'S SIGNATURE, DATE, PAID PREPARER'S PTIN, FIRM'S NAME, FIRM'S EIN OR SSN, FIRM'S STREET ADDRESS, CITY, STATE, ZIP CODE, FIRM'S PHONE NUMBER

Name (as shown on page 1)

EIN

V. Explain Why an Amended Form A1-APR is Being Filed:

VI. Reason for Cancellation of Employer's Withholding Account (check the applicable box):

- 1 Reorganization or change in business entity (example: from corporation to partnership).
- 2 Business sold.
- 3 Business stopped paying wages and will not have any employees in the future.
- 4 Business permanently closed.
- 5 Business has only leased or temporary agency employees.
- 6 Other (specify reason): _____

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- Make check payable to: Arizona Department of Revenue and **include EIN on payment.**
 - Send return and payment to: Arizona Department of Revenue, PO Box 29009, Phoenix, AZ 85038-9009
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