

**Complete this form only if you file Form A1-QRT.** Arizona Form A1-R is an information return. Do not submit any liability owed or try to claim refunds with this return. To submit additional liability or claim a refund, file amended quarterly withholding tax Form(s) A1-QRT. **Form A1-R is due on or before February 28, 2017.**

**Part 1 Taxpayer Information**

Name	Employer Identification Number (EIN)
Number and street or PO Box	<b>REVENUE USE ONLY. DO NOT MARK IN THIS AREA.</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">88</div>          <div style="display: flex; justify-content: space-between; width: 100%;"> <span><div style="border: 1px solid black; padding: 2px; display: inline-block;">81</div> PM</span> <span><div style="border: 1px solid black; padding: 2px; display: inline-block;">66</div> RCVD</span> </div>
City or town, state and ZIP Code	
Business telephone number (with area code)	
<p><b>Check box if:</b> <input type="checkbox"/> Amended Return <input type="checkbox"/> Address Change</p> <input type="checkbox"/> Check this box if return is an early-filed return for calendar year 2017 due to an account cancellation during 2017. <input type="checkbox"/> Check this box if cancellation was due to a merger or acquisition and surviving employer is filing Forms W-2. <input type="checkbox"/> Check this box if this form is being filed by the surviving employer and the amount on line 10 is less than the amount on line 1 because the difference was remitted by the predecessor employer. Also enter the following: Predecessor Employer Name ..... _____ Predecessor Employer EIN ..... _____	

**Part 2 Federal Transmittal Information**

1 Total Arizona Tax Withheld per federal Forms W-2, W-2c, W-2G and 1099-R .....	1	
2 Total wages paid to Arizona employees for 2016 .....	2	
3 Total number of Arizona employees in 2016 .....	3	
4 Total number of federal Forms W-2, W-2c, W-2G, and 1099-R submitted .....	4	
5 Information Return Penalty .....	5	00

**Part 3 Annual Summary of Amounts Reported on 2016 Arizona Forms A1-QRT**

		Liability Reported
6 First Quarter .....	6	
7 Second Quarter .....	7	
8 Third Quarter .....	8	
9 Fourth Quarter .....	9	
10 Total Annual Withholding Reported .....	10	

**Part 4 Explain Why an Amended Form A1-R is Being Filed (include additional sheet, if necessary)**

<b>Declaration</b>	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.		
<b>Please Sign Here</b>	_____	_____	_____
	TAXPAYER'S SIGNATURE	DATE	BUSINESS TELEPHONE NUMBER
<b>Paid Preparer's Use Only</b>	_____	_____	_____
	PAID PREPARER'S SIGNATURE	DATE	PAID PREPARER'S PTIN
	_____		FIRM'S <input type="checkbox"/> EIN OR <input type="checkbox"/> SSN
	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)		
	_____		FIRM'S TELEPHONE NUMBER
	FIRM'S STREET ADDRESS		
	_____		
	CITY	STATE	ZIP CODE

**Mail return to: Arizona Department of Revenue, PO Box 29009, Phoenix, AZ 85038-9009**