

DO NOT STAPLE ANY ITEMS TO THE RETURN.

Arizona Form 140X-SBI

Small Business Amended Income Tax Return For Forms 140-SBI, 140NR-SBI and 140PY-SBI

FOR CALENDAR YEAR 2024

OR FISCAL YEAR BEGINNING MM, DD, 20, 24 AND ENDING MM, DD, 20, YY. 66F

Your First Name and Middle Initial Last Name Your Social Security Number

Spouse's First Name and Middle Initial (if box 95a or 95b checked) Last Name Spouse's Social Security No.

Current Home Address - number and street, rural route Apt. No. Daytime Phone (with area code)

City, Town or Post Office State ZIP Code If you are claiming Injured Spouse Protection (Form 203) check 3a Filing Status. Must be the same as Form 140, 140NR or 140PY

4 Federal Schedule B. See instructions. 4 00 5a Federal Schedule C. See instructions. 5a 00 5b Enter your NAICS code shown on Schedule C: 6 Portion of Federal Schedule D. See instructions for amount. 6 00 7a Federal Schedule E. Enter the amount from each part. 7a 00 7b Rental, Real Estate, Royalties. 00 7e REMICS. 00 7c Partnerships/S Corporations. 00 7f Farm Rental. 00 7d Estates/Trusts. 00 8 Federal Schedule F. See instructions. 8 00 9 Federal Form 4797. Amount not included on line 6. See instructions. 9 00

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

95a Married filing joint return 95b Head of Household 95c Married filing separate return 95d Single

81 PM 80 RCVD

Small Business Income

10 Total Small Business income: Add lines 4, 5a, 6, 7a, 8 and 9. Enter the total. 10 00 11 Fiduciary Adjustment (positive) from Arizona Form 141AZ Schedule K-1. 11 00 12 Non-Arizona municipal interest. See instructions. 12 00 13 Partnership Income Adjustment. See instructions. 13 00 14 Total federal depreciation. 14 00 15 Net capital loss from the exchange of one kind of legal tender for another kind of legal tender. 15 00 16 Claim of Right adjustment for amounts repaid in 2024. 16 00 17 Claim of Right adjustment for amounts repaid in prior taxable years. 17 00 18 Agricultural Water Conservation expenses related to the tax credit claimed on Arizona Form 312. 18 00 19 Addition to S Corporation Income due to claiming pass-through credit (Form 312). 19 00 20 Depreciation or amortization related to tax credits claimed on Arizona Form 315 and Arizona Form 325. 20 00 21 Basis adjustment for property claimed as a credit on AZ Forms 315 and 325 that is sold or disposed of during the tax year. 21 00 22 Basis adjustment for property claimed as a credit on AZ Form 338 that is sold or disposed of during the tax year. 22 00 23 Adjustment for Net Operating Loss due to Claim of Right. 23 00 24 Americans with Disabilities Act - Access Expenditures. 24 00 25 Entity-Level Income Tax payment. See instructions. 25 00 26 Sole Proprietorship loss of an AZ Nonprofit Medical Marijuana Dispensary included in Schedule C. See instructions. 26 00 27 Motion Picture Production Costs. See instructions. 27 00 28 Subtotal: Add lines 10 through 27. Enter the total. 28 00

29 Total net capital gain or (loss). See instructions. 29 00 30 Total net short-term capital gain or (loss). See instructions. 30 00 31 Total net long-term capital gain or (loss). See instructions. 31 00 32 Net long-term capital gain from assets acquired after December 31, 2011. See instructions. 32 00 33 Multiply line 32 by 25% (.25) and enter the result. See instructions. 33 00 34 Fiduciary Adjustment (negative) from Arizona Form 141AZ Schedule K-1. 34 00 35 Net capital gain derived from investment in qualified small business. 35 00 36 Net capital gain from the exchange of one kind of legal tender for another kind of legal tender. 36 00 37 Recalculated Arizona depreciation. 37 00 38 Partnership Income adjustment. See instructions. 38 00 39 Interest on U.S. obligations such as U.S. savings bonds and treasury bills. 39 00 40 Net operating loss adjustment from tax years 2008 and 2009. See instructions. 40 00 41 Installment sale income from another state taxed by the other state in a prior year. 41 00 42 Amount of wages or salaries paid or incurred during the tax year and used to claimed certain federal tax credits. 42 00 43 Basis adjustment for property sold or otherwise disposed of during the tax year. 43 00 44 Americans with Disabilities Act - Access Expenditures. 44 00 45 Claim of Right Adjustment for amounts repaid in prior years. 45 00 46 Sole Proprietorship income of an AZ Nonprofit Medical Marijuana Dispensary included in Schedule C. 46 00 47 Sole Proprietorship - AZ Marijuana Establishment, Testing Facilities and for-profit dual licensees - enter the ordinary and necessary business expenses related to the sales of recreational use products from Schedule DFE. 47 00

Additions Related to Small Business Income

Subtractions Related to Small Business Income

Place any required federal and AZ schedules or other documents after Form 140X-SBI.

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 licensees: 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
	49 Exploration expenses deferred before January 1, 1990.....	49	00
	50 Agricultural Crops given to Arizona Charitable Organizations.....	50	00
	51 Virtual Currency and Non-Fungible Tokens. See instructions.....	51	00
	52 Gas Fees and Non-Fungible Token Basis. See instructions	52	00
Balance of Tax	53 Arizona Small Business Taxable Income. Subtract lines 33 through 52 from line 28. If less than zero, enter "0"	53	00
	54 Small Business Income Tax: Multiply line 53 by 2.5% (.025).....	54	00
	55 Tax from recapture of of credits from Arizona Form 301-SBI, Part 2, line 23.....	55	00
	56 Subtotal of tax: Add lines 54 and 55. Enter the total.....	56	00
	57 Nonrefundable Credits from Arizona Form 301-SBI, Part 2, line 42.....	57	00
58 Balance of Tax: Subtract line 57 from line 56. If line 57 is greater than line 56, enter "0".....	58	00	
Payments and Refundable Credits	59 2024 AZ estimated tax payments 59a <input type="text" value="00"/> Claim of Right 59b <input type="text" value="00"/> Add 59a and 59b 59c	59c	00
	60 2024 AZ extension payment (Form 204-SBI)	60	00
	61 Refundable credits: Check the box(es) and enter the total amount..... 611 <input type="checkbox"/> 308-I 612 <input type="checkbox"/> 334 613 <input type="checkbox"/> 349	61	00
	62 Payment made with original return plus all payments made after it was filed.....	62	00
	63 Total payments and refundable credits: Add lines 59c, 60, 61 and 62. Enter the total.....	63	00
Overpayment	64 Overpayment from original return or as later adjusted. See instructions.....	64	00
	65 Balance of credits: Subtract line 64 from line 63.....	65	00
	66 OVERPAYMENT: If line 58 is less than line 65, subtract line 58 from line 65. Enter amount of overpayment	66	00
67 Amount of line 66 to be applied to 2025 estimated tax.....	67	00	
Refund or Amount Owed	68 REFUND: Subtract line 67 from line 66. If less than zero, enter amount owed on line 69.....	68	00
	Direct Deposit of Refund: Check box 68A if your deposit will be ultimately placed in a foreign account ; see instructions. 68A <input type="checkbox"/>		
	<input checked="" type="checkbox"/> 98 <input type="checkbox"/> C Checking or <input type="checkbox"/> S Savings	ROUTING NUMBER <input type="text" value=""/>	ACCOUNT NUMBER <input type="text" value=""/>
69 AMOUNT OWED: If line 58 is more than line 65, subtract line 65 from line 58. Enter amount owed.....	69	00	

Sign and date your return. If you paid someone to prepare your return, that person must also sign and date the return. The paid preparer must provide their street address, Paid Preparer TIN and phone number.

Under penalties of perjury, I declare that I have read this return and any documents with it, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

PLEASE SIGN HERE →

YOUR SIGNATURE _____ DATE _____ OCCUPATION _____

→ SPOUSE'S SIGNATURE _____ DATE _____ SPOUSE'S OCCUPATION _____

PAID PREPARER'S SIGNATURE _____ DATE _____ FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) _____

PAID PREPARER'S STREET ADDRESS _____ PAID PREPARER'S TIN _____

PAID PREPARER'S CITY _____ STATE _____ ZIP CODE _____ PAID PREPARER'S PHONE NUMBER _____

- 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

Your Name (as shown on page 1)	Your Social Security Number
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Complete Parts 1(A) and 1(B), Part 2 and Part 3 to report changes made to your original tax return or most recent amended tax return and the reason(s) for each change.

NOTE: *If you are rescinding your small business election, check box 70R and complete Form 140X-SBI and Form 140X. Include Form 140X-SBI with your amended income tax return (Form 140X), when filed. See the instructions for Form 140X-SBI for information to rescind your small business election.*

INCOME, DEDUCTIONS, CREDITS: In column (a), list the items you are changing. In column (b), enter the amount claimed on your original return or most recent amended return. In column (c), enter the amount of the change. In column (d), enter the corrected amount for the item you are changing.

	(a) INCOME, DEDUCTIONS, AND CREDITS YOU ARE CHANGING	(b) ORIGINAL AMOUNT REPORTED	(c) AMOUNT TO ADD OR SUBTRACT	(d) CORRECTED AMOUNT
PART 1 (A)	70a _____	\$	\$	\$
	70b _____	\$	\$	\$
	70c _____	\$	\$	\$

NET CAPITAL GAIN OR (LOSS): If you are changing any amount on lines 71a through 71e, complete columns (b), (c), and (d).

	(a) ITEM	(b) ORIGINAL AMOUNT REPORTED	(c) AMOUNT TO ADD OR SUBTRACT	(d) CORRECTED AMOUNT
PART 1 (B)	71a Total net capital gain or (loss) reported on Form 140-SBI, line 29; Form 140NR-SBI, line 28; or Form 140PY-SBI, line 29	\$	\$	\$
	71b Total net short-term capital gain or (loss) reported on Form 140-SBI, line 30; Form 140NR-SBI, line 29; or Form 140PY-SBI, line 30.....	\$	\$	\$
	71c Total net long-term capital gain or (loss) reported on Form 140-SBI, line 31; Form 140NR-SBI, line 30; or Form 140PY-SBI, line 31.....	\$	\$	\$
	71d Net long-term capital gains from assets acquired after December 31, 2011 reported on Form 140-SBI, line 32; Form 140NR-SBI, line 31; or Form 140PY-SBI, line 32.....	\$	\$	\$
	71e Amount of allowable subtraction reported on Form 140-SBI, line 33; Form 140NR-SBI, line 32; or Form 140PY-SBI, line 33.....	\$	\$	\$

72 REASON FOR THE CHANGE: Give the reason for each change listed in Part 1 (A) and B):

PART 2

Check box **73a** if your address on this amended return is not the same as it was on your original return (or latest return filed). Complete Part 3 with your current address.

PART 3	73b Name	73c Number and Street, R.R.	Apt. No.
	73d City, Town or Post Office	State	ZIP Code