

For the  calendar year 2012 or  fiscal year beginning 04/01/2012 and ending 03/31/2013 .

CHECK ONE: Original <input checked="" type="checkbox"/> Amended <input type="checkbox"/> Business telephone number (with area code) (480) 350-0900	Please <b>Type</b> or <b>Print</b>	Name THE ARIZONA SPORTS FOUNDATION Number and street or PO Box 7135 E. CAMELBACK RD City or town, state and ZIP code SCOTTSDALE, AZ 85251	Employer identification number (EIN) 86-0253821 AZ transaction privilege tax number
<b>68</b> Check box if: <input type="checkbox"/> This is a first return <input type="checkbox"/> Name change <input type="checkbox"/> Address change		<b>82</b> CHECK BOX IF: Return filed under extension. 82 F <input checked="" type="checkbox"/>	
A Date Arizona operations began: 1972		REVENUE USE ONLY. DO NOT MARK IN THIS AREA.	
B Nature of unrelated trade or business activities: SALES OF FIESTA BOWL AND GAME RELATED MERCHANDISE / RENTAL INCOME		<b>81</b>	
C Unrelated business activity codes: 453220		<b>66</b>	
D Arizona apportionment: (check only one) Multistate organizations only. <input type="checkbox"/> AIR Carrier <input type="checkbox"/> STANDARD Sales Factor <input type="checkbox"/> ENHANCED Sales Factor			
E Did you file an Arizona Form 99? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
F Check federal form filed: <input checked="" type="checkbox"/> 990-T <input type="checkbox"/> Other (specify)			
Attach a copy of the organization's federal return.			

**Arizona Unrelated Trade or Business Taxable Income Computation**

1 Unrelated trade or business taxable income - from federal Form 990-T . . . . .	1	0	00
2 Apportionment ratio. Multistate organizations only - see instructions . . . . .	2		
3 Taxable income attributable to Arizona - line 1 multiplied by line 2 (or enter amount from line 1, if 100% Arizona) . . . . .	3	0	00

**Arizona Tax Liability Computation**

4 Enter tax. Tax is 6.968 percent of line 3, or \$50, whichever is greater . . . . .	4	50	00
5 Clean Elections Fund Tax Credit. SEE INSTRUCTIONS BEFORE COMPLETING THIS LINE . . . . .	5		00
6 Tax liability after Clean Elections Fund tax credit - subtract line 5 from line 4 . . . . .	6	50	00

**Tax Payments**

7 Extension payment made with Arizona Form 120EXT or online . . . . .	7		00
8 Estimated tax payments . . . . .	8		00
9 Payment made with original return plus all payments made after it was filed - see instructions . . . . .	9		00
10 Subtotal payments - add lines 7 through 9 . . . . .	10		00
11 Overpayments of tax from original return or later adjustments - see instructions . . . . .	11		00
12 Total Payments - subtract line 11 from line 10 . . . . .	12	0	00

**Computation of Total Due or Overpayment**

13 Balance of tax due - If line 6 is larger than line 12, enter balance of tax due. Skip line 14 . . . . .	13	50	00
14 Overpayment of tax - If line 12 is larger than line 6, enter overpayment of tax . . . . .	14		00
15 Penalty and interest . . . . .	15		00
16 Estimated tax underpayment penalty. If Form 220 is attached, check box . . . . . 16A <input type="checkbox"/>	16		00
17 TOTAL AMOUNT DUE - Add lines 13, 15, and 16. If money is due, payment must accompany return . . . . .	17	50	00
18 OVERPAYMENT - see instructions . . . . .	18		00
19 Amount of line 18 to be applied to 2013 estimated tax . . . . .	19		00
20 Amount to be refunded - subtract line 19 from line 18 . . . . .	20		00

Continued on page 2 →

# SEE ATTACHED FEDERAL FORM 990-T

Name (as shown on page 1) <b>THE ARIZONA SPORTS FOUNDATION</b>	EIN <b>86-0253821</b>
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## Schedule A - Apportionment Formula (Multistate Organizations Only)

See instructions, pages 5 through 7.

### Limited to Unrelated Trade or Business Amounts

	Column A Total Within Arizona Round to the Nearest Dollar	Column B Total Everywhere Round to the Nearest Dollar	Column C Ratio Within Arizona A ÷ B
<b>A1 Property Factor</b> Value of real and tangible personal property (by averaging the value of owned property at the beginning and end of the tax period; rented property at capitalized value) Total owned and rented property .....			
<b>A2 Payroll Factor</b> Wages, salaries, commissions and other compensation paid to employees .....			
<b>A3 Sales Factor</b>			
a. Total sales and other gross receipts .....			
b. Weight AZ sales - (STANDARD uses X 2; ENHANCED uses X 8) .....	X 2 OR X 8		
c. Sales factor (for column A - multiply item a by item b; for column B - enter the amount from item a) .....			
<b>A4 Total ratio</b> - add A1, A2, and A3(c), in column C .....			
<b>A5 Average apportionment ratio</b> - divide line A4, column C, by the denominator (STANDARD divides by four (4); ENHANCED divides by ten (10)). Enter the result in column C, and on page 1, line 2 .....			

**Certification** Under penalties of perjury, I declare that I have examined this return, including the accompanying schedules and statements, and to the best of my knowledge and belief, it is a true, correct and complete return, made in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.

**Please**

**Sign**

**Here**

Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

*Mrenda Miesema*

2/13/14

**Paid**

**Preparer's**

**Use Only**

Preparer's Signature \_\_\_\_\_ Date \_\_\_\_\_ P00264669  
Preparer's PTIN

ERNST & YOUNG U.S. LLP 34-6565596  
Firm's Name (or Preparer's Name, if self-employed) Firm's  EIN or  SSN

2 NORTH CENTRAL AVENUE, SUITE 2300, PHOENIX, AZ 85004 602-322-3000  
Firm's Address ZIP Code Firm's Telephone Number

Firm's Address ZIP Code Firm's Telephone Number

**Mail to: Arizona Department of Revenue, PO Box 52153, Phoenix AZ 85072-2153**

**A COPY OF THE FEDERAL  
RETURN WAS ATTACHED TO  
THE FILING COPY OF THE  
STATE RETURN**