

DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F Check box 82F if filing under extension OR FISCAL YEAR BEGINNING [M,M,D,D] 2,0,1,7 AND ENDING [M,M,D,D] 2,0,Y,Y. 66F

1 Your First Name and Middle Initial Last Name Enter your SSN(s) Your Social Security Number

1 Spouse's First Name and Middle Initial (if box 4 or 6 checked) Last Name Spouse's Social Security No.

2 Current Home Address - number and street, rural route Apt. No. Daytime Phone (with area code) 94

3 City, Town or Post Office State ZIP Code Last Names Used in Last Four Prior Year(s) (if different) 97

FILING STATUS: 4 Married filing joint return 4a Injured Spouse Protection of Joint Overpayment 5 Head of household 6 Married filing separate return 7 Single. EXEMPTIONS: 8 Age 65 or over 9 Blind 10 Dependents. Includes instructions for completing lines 8-10.

11-13 Residency Status (check one): 11 Nonresident 12 Nonresident Active Military 13 Composite Return

(Box 10): Dependent Information: Children and other dependents. For more space, (check) and complete page 3.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2017, (e) if this person did not qualify as a dependent, (f) if you did not claim this person.

Table for Arizona Income and Additions. Columns include 2017 FEDERAL Amount from Federal Return and 2017 ARIZONA Source Amount Only. Rows 14-40 cover various income types and adjustments.

Place any required federal and AZ schedules or other documents after Form 140NR.

Your Name (as shown on page 1) _____ Your Social Security Number _____

Subtractions - cont. from page 1	41	Enter the amount from page 1, line 40	41		00
	42	Interest on U.S. obligations such as U.S. savings bonds and treasury bills.....	42		00
	43	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)	43		00
	44	Agricultural crops contributed to Arizona charitable organizations.....	44		00
	45	Other Subtractions from Income: See instructions and include your own schedule.....	45		00

Exemptions	46	Subtract lines 42 through 45 from line 41.....	46		00
	47	Age 65 or over: Multiply the number in box 8 by \$2,100.....	47		00
	48	Blind: Multiply the number in box 9 by \$1,500	48		00
	49	Dependents: Multiply the number in box 10 by \$2,300	49		00
	50	Add lines 47, 48, and 49. Enter the total	50		00

Balance of Tax	51	Multiply line 50 by the Arizona ratio on line 27	51		00
	52	Arizona adjusted gross income: Subtract line 51 from line 46.....	52		00
	53	Deductions: Check box and enter amount. See instructions..... 53I <input type="checkbox"/> ITEMIZED 53S <input type="checkbox"/> STANDARD	53		00
	54	Personal exemptions: See instructions.....	54		00
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero, enter "0"	55		00
	56	Compute the tax using amount from line 55 and Tax Table X or Y.....	56		00

Total Payments and Refundable Credits	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 40	57		00
	58	Subtotal of tax: Add lines 56 and 57 and enter the total	58		00
	59	Credits from Arizona Form 301, Part 2, line 76	59		00
	60	Balance of tax: Subtract line 59 from line 58. If line 59 is greater than line 58, enter "0"	60		00
	61	2017 AZ income tax withheld.....	61		00

Tax Due or Overpayment	62	2017 AZ estimated tax payments. 62a <input type="text"/> 00 Claim of Right 62b <input type="text"/> 00 Add 62a and 62b..	62c		00
	63	2017 AZ extension payment (Form 204)	63		00
	64	Other refundable credits: Check the box(es) and enter the total amount..... 641 <input type="checkbox"/> 308-I 642 <input type="checkbox"/> 342 643 <input type="checkbox"/> 349	64		00
	65	Total payments and refundable credits: Add lines 61 through 64 and enter the total.....	65		00

Voluntary Gifts	66	TAX DUE: If line 60 is larger than line 65, subtract line 65 from line 60, and enter amount of tax due. Skip lines 67, 68 and 69.....	66		00
	67	OVERPAYMENT: If line 65 is larger than line 60, subtract line 60 from line 65, and enter amount of overpayment.....	67		00
	68	Amount of line 67 to be applied to 2018 estimated tax.....	68		00
	69	Balance of overpayment: Subtract line 68 from line 67.....	69		00
	70	Voluntary Gifts to: Solutions Teams Assigned to Schools..... 70 <input type="text"/> 00	71	Arizona Wildlife.....	00
	72	Child Abuse Prevention	73	Domestic Violence Shelter	00
	75	Neighbors Helping Neighbors.....	76	Special Olympics	00
	78	I Didn't Pay Enough Fund.....	79	Sustainable State Parks and Road Fund.....	00

Penalty	81	Political Party (if amount is entered on line 74 - check only one): 811 <input type="checkbox"/> Democratic 812 <input type="checkbox"/> Green Party 813 <input type="checkbox"/> Libertarian 814 <input type="checkbox"/> Republican			
	82	Estimated payment penalty and Arizona Long-Term Health Care Saving Account (AZLTHSA) penalty.....	82		00
	83	831 <input type="checkbox"/> Annualized/Other 832 <input type="checkbox"/> Farmer or Fisherman 833 <input type="checkbox"/> Form 221 included 834 <input type="checkbox"/> AZLTHSA Penalty			

Refund or Amount Owed	84	Add lines 70 through 80 and 82; enter the total.....	84		00
	85	REFUND: Subtract line 84 from line 69. If less than zero, enter amount owed on line 86	85		00

Direct Deposit of Refund: Check box 85A if your deposit will be ultimately placed in a **foreign account**; see instructions. 85A

C Checking or S Savings

ROUTING NUMBER:

ACCOUNT 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 140NR.**

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

Dependent Information - Continuation Sheet from Page 1 Dependents

Include with your return **only** if listing additional dependents.

Complete this form **only** if you need additional space from page 1 to list your dependents.
If you do not list **all** dependents claimed on page 1 of your income tax return, you may lose the exemptions.

Children and other dependents, continued from page 1.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2017	(e) ✓ if this person did not qualify as a dependent on your federal return	(f) ✓ if you did not claim this person on your federal return due to educational credits
10e					<input type="checkbox"/>	<input type="checkbox"/>
10f					<input type="checkbox"/>	<input type="checkbox"/>
10g					<input type="checkbox"/>	<input type="checkbox"/>
10h					<input type="checkbox"/>	<input type="checkbox"/>
10i					<input type="checkbox"/>	<input type="checkbox"/>
10j					<input type="checkbox"/>	<input type="checkbox"/>
10k					<input type="checkbox"/>	<input type="checkbox"/>
10l					<input type="checkbox"/>	<input type="checkbox"/>
10m					<input type="checkbox"/>	<input type="checkbox"/>
10n					<input type="checkbox"/>	<input type="checkbox"/>
10o					<input type="checkbox"/>	<input type="checkbox"/>
10p					<input type="checkbox"/>	<input type="checkbox"/>
10q					<input type="checkbox"/>	<input type="checkbox"/>
10r					<input type="checkbox"/>	<input type="checkbox"/>
10s					<input type="checkbox"/>	<input type="checkbox"/>
10t					<input type="checkbox"/>	<input type="checkbox"/>
10u					<input type="checkbox"/>	<input type="checkbox"/>
10v					<input type="checkbox"/>	<input type="checkbox"/>