RESET

ARIZONA FORM 140

Resident Personal Income Tax Return

Or fiscal year beginning M M D D 2 0 0 5 and ending M M D D 2 0 0 6 . 66

2005

YOUR FIRST NAME AND INITIAL 1	LAST NAME	YOUR SOCIAL SECURITY NO.
IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL 1	LAST NAME	SPOUSE'S SOCIAL SECURITY NO.
PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE 2 — APT. NO.	DAYTIME PHONE: ( ) 94 HOME PHONE: ( )	↑ IMPORTANT ↑ You **must** enter your SSNs.
CITY, TOWN OR POST OFFICE 3 — STATE — ZIP CODE		82 ***CHECK ONE if filing under an extension:*** **4 month extension 82D ☐** **6 month extension 82F ☐**

FOR DOR USE ONLY

88

81 80

Filing Status

4 ☐ Married filing joint return

5 ☐ Head of household - name of qualifying child or dependent:

6 ☐ Married filing separate return. Enter spouse's Social Security Number above and full name here. ►

7 ☐ Single

Exemptions

Enter the number claimed. *Do not put a check mark.*

8 ☐ Age 65 or over (you and/or spouse)

9 ☐ Blind (you and/or spouse)

10 ☐ Dependents. *From page 2, line A2* - ***do not include self or spouse.***

11 ☐ Qualifying parents and ancestors of your parents. *From page 2, line A5.*

ATTACH PAYMENT HERE. Attach W-2 to back of last page of the return. If itemizing, attach your federal Schedule A and Arizona Schedule A if required.

12	Federal adjusted gross income (from your federal return)	12	00
13	Additions to income *(from page 2, line B13)*	13	00
14	*Add lines 12 and 13*	14	00
15	Subtractions from income ***(from page 2, line C18 or line C29)***. *If applicable, enter the number from line C27a:* 151	15	00
16	Arizona adjusted gross income. *Subtract line 15 from line 14*	16	00
17	**Deductions.** ***Check box and enter amount.*** *See instructions, page 13.* 17I ☐ **ITEMIZED** 17S ☐ **STANDARD**	17	00
18	Personal exemptions. *See page 13 of the instructions*	18	00
19	Arizona taxable income. *Subtract lines 17 and 18 from line 16. If less than zero, enter zero*	19	00
20	Compute the tax using amount on line 19 and Tax Rate Table X, Y or Optional Tax Rate Tables	20	00
21	Tax from recapture of credits from Arizona Form 301, line 26	21	00
22	Subtotal of tax. *Add lines 20 and 21*	22	00
23 - 24	Clean Elections Fund Tax Reduction. *See instructions, page 14.* 231 ☐ **YOURSELF** 232 ☐ **SPOUSE**	24	00
25	Reduced tax. *Subtract line 24 from line 22*	25	00
26	Family income tax credit from worksheet on page 15 of instructions	26	00
27	Credits from Arizona Form 301, line 49, or Forms 310, 321, 322, and 323 if Form 301 is not required	27	00
28	Credit type. *Enter form number of each credit claimed:* 28 3 3 3 3		
29	Clean Elections Fund Tax Credit. *From worksheet on page 17 of the instructions*	29	00
30	Balance of tax. *Subtract lines 26, 27 and 29 from line 25. If the sum of lines 26, 27 and 29 is more than line 25, enter zero*	30	00
31	Arizona income tax withheld during 2005	31	00
32	Arizona estimated tax payments for 2005	32	00
33	Amount paid with 2005 Arizona extension request (Form 204)	33	00
34	Increased Excise Tax Credit *from worksheet on page 17 of the instructions*	34	00
35	Property Tax Credit from Form 140PTC	35	00
36	Other refundable credits. *Check box(es) and enter amount(s):* 36A1 ☐ 329 36A2 ☐ 330	36	00
37	Total payments/refundable credits. *Add lines 31 through 36*	37	00
38	**TAX DUE.** *If line 30 is larger than line 37, subtract line 37 from line 30 and enter amount of tax due. Skip lines 39, 40 and 41*	38	00
39	**OVERPAYMENT.** *If line 37 is larger than line 30, subtract line 30 from line 37 and enter amount of overpayment*	39	00
40	Amount of line 39 to be applied to 2006 estimated tax	40	00
41	Balance of overpayment. *Subtract line 40 from line 39*	41	00

42 - 49 Voluntary Gifts to:

Aid to Education *(entire refund only)*	42	00	Arizona Wildlife	43	00	Citizens Clean Elections	44	00
Child Abuse Prevention	45	00	Domestic Violence Shelter	46	00	Neighbors Helping Neighbors	47	00
Special Olympics	48	00	Political Gift	49	00			

50 *Check only one* if making a political gift: 501 ☐ Democratic 502 ☐ Libertarian 503 ☐ Republican

51	Estimated payment penalty and MSA withdrawal penalty	51	00
52	*Check applicable boxes:* 521 ☐ Annualized/Other 522 ☐ Farmer or Fisherman 523 ☐ Form 221 attached 524 ☐ MSA Penalty		
53	Total of lines 42, 43, 44, 45, 46, 47, 48, 49, and 51	53	00
54	**REFUND.** *Subtract line 53 from line 41. If less than zero, enter amount owed on line 55*	54	00
55	**AMOUNT OWED.** Add lines 38 and 53. **Make check payable to Arizona Department of Revenue; include SSN on payment.**	55	00

Direct Deposit of Refund: See instructions.

98 ROUTING NUMBER ACCOUNT NUMBER C ☐ Checking or S ☐ Savings

☐ **Payment enclosed.** ***Check the box and attach payment.***

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PART A: Dependents and Qualifying Parents - do not list yourself or spouse

If completing Part A, also complete Part C, lines C16 and/or C17 and C18.

A1 List children and other dependents. If more space is needed, attach a separate sheet.

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2005

A2 Enter total number of persons listed in A1 here and on the front of this form, box 10. ***Also complete Part C below***..... TOTAL **A2**

A3 **a** Enter the names of the dependents listed above who do not qualify as your dependent on your federal return:

b Enter dependents listed above who were not claimed on your federal return due to education credits:

A4 List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 6 of the instructions.

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2005

A5 Enter total number of persons listed in A4 here and on the front of this form, box 11 ..... TOTAL **A5**

PART B: Additions to Income

B6	Non-Arizona municipal interest	**B6**	00
B7	Early withdrawal of Arizona Retirement System contributions not included on your federal return	**B7**	00
B8	Ordinary income portion of lump-sum distributions excluded on your federal return	**B8**	00
B9	Total federal depreciation	**B9**	00
B10	Medical savings account (MSA) distributions. *See page 7 of the instructions*	**B10**	00
B11	I.R.C. §179 expense in excess of allowable amount. *See page 7 of the instructions*	**B11**	00
B12	Other additions to income. *See instructions and attach your own schedule*	**B12**	00
B13	**Total.** *Add lines B6 through B12. Enter here and on the front of this form, line 13*	**B13**	00

PART C: Subtractions from Income

C14	Exemption: Age 65 or over. *Multiply the number in box 8, page 1, by $2,100*	**C14**	00		
C15	Exemption: Blind. *Multiply the number in box 9, page 1, by $1,500*	**C15**	00		
C16	Exemption: Dependents. *Multiply the number in box 10, page 1, by $2,300*	**C16**	00		
C17	Exemption: Qualifying parents and ancestors of your parents. *Multiply the number in box 11, page 1, by $10,000*	**C17**	00		
C18	Total exemptions: *Add lines C14 through C17.* **If you have no other subtractions from income, skip lines C19 through C29 and enter the amount on line C18 on Form 140, Page 1, line 15.**			**C18**	00
C19	Interest on U.S. obligations such as U.S. savings bonds and treasury bills			**C19**	00
C20	Exclusion for federal, Arizona state or local government pensions (up to $2,500 per taxpayer)			**C20**	00
C21	Arizona state lottery winnings included as income on your federal return (up to $5,000 only)			**C21**	00
C22	U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (the taxable amount)			**C22**	00
C23	Recalculated Arizona depreciation			**C23**	00
C24	Certain wages of American Indians			**C24**	00
C25	Income tax refund from other states. *See instructions*			**C25**	00
C26	Deposits and employer contributions into MSAs. *See page 10 of the instructions*			**C26**	00
C27	Construction of an energy efficient residence. *See page 11 of the instructions. Enter number:* **C27a** ____, *then amount.*			**C27**	00
C28	Other subtractions from income. *See instructions and attach your own schedule*			**C28**	00
C29	Total: *Add lines C18 through C28.* ***Enter here and on the front of this form, line 15***			**C29**	00

Part D: Last Name(s) Used in Prior Years if different from name(s) used in current year

D30 _____

PLEASE SIGN HERE

I have read this return and any attachments with it. Under penalties of perjury, I declare that 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.

➔ YOUR SIGNATURE _____ DATE _____

➔ SPOUSE'S SIGNATURE _____ DATE _____

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

PAID PREPARER'S TIN _____ DATE _____ PAID PREPARER'S ADDRESS _____

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.
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.