

140

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

YOUR FIRST NAME AND INITIAL, LAST NAME, YOUR SOCIAL SECURITY NO., IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL, LAST NAME, SPOUSE'S SOCIAL SECURITY NO., PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE, APT. NO., DAYTIME PHONE W/AREA CODE: 94 HOME PHONE W/AREA CODE: 82 CHECK ONE if filing under an extension: 4 month extension 82D 6 month extension 82F

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: 8 Enter the number claimed. Do not put a check mark. 9 Age 65 or over (you and/or spouse) 88 10 Blind (you and/or spouse) 11 Dependents. From page 2, line A2 - do not include self or spouse. 12 Qualifying parents and ancestors of your parents. From page 2, line A5. 81 80

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

42 - 49 Voluntary Gifts to: Aid to Education (entire refund only) 42 Arizona Wildlife 43 Citizens Clean Elections 44 Child Abuse Prevention 45 Domestic Violence Shelter 46 Neighbors Helping Neighbors 47 Special Olympics 48 Political Gift 49 50 Check only one if making a political gift: 501 Democratic 502 Libertarian 503 Republican 51 Estimated payment penalty and MSA withdrawal penalty 51 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 54 REFUND. Subtract line 53 from line 41. If less than zero, enter amount owed on line 55. Direct Deposit of Refund: See instructions. ROUTING NUMBER ACCOUNT NUMBER 55 AMOUNT OWED. Add lines 38 and 53. Make check payable to Arizona Department of Revenue; include SSN on payment. Payment enclosed. Check the box and attach payment. CO Checking or SO Savings

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

**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**

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

**PART C: Subtractions from Income**

<b>C14</b> Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100.....	<b>C14</b>	
<b>C15</b> Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500.....	<b>C15</b>	
<b>C16</b> Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300.....	<b>C16</b>	
<b>C17</b> Exemption: Qualifying parents and ancestors of your parents. Multiply the number in box 11, page 1, by \$10,000.....	<b>C17</b>	
<b>C18</b> 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.....	<b>C18</b>	
<b>C19</b> Interest on U.S. obligations such as U.S. savings bonds and treasury bills.....	<b>C19</b>	
<b>C20</b> Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer).....	<b>C20</b>	
<b>C21</b> Arizona state lottery winnings included as income on your federal return (up to \$5,000 only).....	<b>C21</b>	
<b>C22</b> U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (the taxable amount).....	<b>C22</b>	
<b>C23</b> Recalculated Arizona depreciation.....	<b>C23</b>	
<b>C24</b> Certain wages of American Indians.....	<b>C24</b>	
<b>C25</b> Income tax refund from other states. See instructions.....	<b>C25</b>	
<b>C26</b> Deposits and employer contributions into MSAs. See page 10 of the instructions.....	<b>C26</b>	
<b>C27</b> Construction of an energy efficient residence. See page 11 of the instructions. Enter number: <b>C27a</b> <input type="text"/> , then amount.....	<b>C27</b>	
<b>C28</b> Other subtractions from income. See instructions and attach your own schedule.....	<b>C28</b>	
<b>C29 Total:</b> Add lines C18 through C28. Enter here and on the front of this form, line 15.....	<b>C29</b>	

**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.