

ARIZONA FORM

Resident Personal Income Tax Return

140

FISCAL YEAR BEGINNING [M, M, D, D, Y, Y, Y, Y] AND ENDING [M, M, D, D, Y, Y, Y, Y]

66

2007

YOUR FIRST NAME AND INITIAL, LAST NAME, YOUR SOCIAL SECURITY NO. (required), IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL, LAST NAME, SPOUSE'S SOCIAL SECURITY NO. (required), PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO., DAYTIME PHONE (with area code), CITY, TOWN OR POST OFFICE, STATE, ZIP CODE, HOME PHONE (with area code)

IMPORTANT, Check this box if: 82F Filing under extension

Filing Status: 4 Married filing joint return, 5 Head of household, 6 Married filing separate return, 7 Single. Exemptions: 8 Age 65 or over, 9 Blind, 10 Dependents, 11 Qualifying parents and ancestors.

Table with 3 columns: Line number, Description, Amount. Lines 12-40 covering Federal adjusted gross income, deductions, tax due, and overpayment.

Table with 3 columns: Line number, Description, Amount. Lines 41-50 covering Voluntary Gifts to various organizations like AID TO EDUCATION, ARIZONA WILDLIFE, etc.

51 Check only one if making a political gift, 52 Estimated payment penalty, 53 Check applicable boxes, 54 Total of lines 41-50, 55 REFUND: Direct Deposit of Refund, 56 AMOUNT OWED



**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.			NO. OF MONTHS LIVED IN YOUR HOME IN 2007
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.

A4 List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet.			NO. OF MONTHS LIVED IN YOUR HOME IN 2007
FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	

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

**PART C: Subtractions from Income**

C14	Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100.....	C14	<input type="text"/>	00
C15	Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500.....	C15	<input type="text"/>	00
C16	Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300.....	C16	<input type="text"/>	00
C17	Exemption: Qualifying parents and ancestors of your parents. Multiply the number in box 11, page 1, by \$10,000.....	C17	<input type="text"/>	00
C18	Total exemptions: Add lines C14 through C17. If you have no other subtractions from income, skip lines C19 through C30 and enter the amount on line C18 on Form 140, Page 1, line 15.....	C18	<input type="text"/>	00
C19	Interest on U.S. obligations such as U.S. savings bonds and treasury bills.....	C19	<input type="text"/>	00
C20	Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer).....	C20	<input type="text"/>	00
C21	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only).....	C21	<input type="text"/>	00
C22	U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (the taxable amount).....	C22	<input type="text"/>	00
C23	Recalculated Arizona depreciation.....	C23	<input type="text"/>	00
C24	Certain wages of American Indians.....	C24	<input type="text"/>	00
C25	Income tax refund from other states. See instructions.....	C25	<input type="text"/>	00
C26	Deposits and employer contributions into MSAs. See page 11 of the instructions.....	C26	<input type="text"/>	00
C27	Construction of an energy efficient residence. See page 11 of the instructions. Enter number: C27a <input type="text"/> , then amount.....	C27	<input type="text"/>	00
C28	Compensation received for active service as a member of the reserves, national guard or the U.S. armed forces.....	C28	<input type="text"/>	00
C29	Other subtractions from income. See instructions and attach your own schedule.....	C29	<input type="text"/>	00
C30	Total: Add lines C18 through C29. Enter here and on the front of this form, line 15.....	C30	<input type="text"/>	00

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

D31

<b>PLEASE SIGN HERE</b>	<i>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.</i>		
	→ YOUR SIGNATURE	DATE	OCCUPATION
	→ SPOUSE'S SIGNATURE	DATE	SPOUSE'S OCCUPATION
	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.