



# 2013 Arizona ATS Test

Test: 400-00-7502

Form: **140A**

**Description:** HOH Taxpayer with one W-2, one child, daycare expenses and EIC eligible

**Forms used**

Form 140A, W-2 (1)

**Other**

NA

**Income Information**

	<b><u>Total</u></b>	<b><u>Arizona</u></b>
Wages from one W-2 Form	20,000	20,000
FAGI	20,000	

**Deductions and Adjustments**

	<b><u>Total</u></b>	<b><u>Arizona</u></b>
AZ Withholding		900

**Preparer Information**

Name = Kathleen Taxpro  
Firm = H&R Block  
Address = Dublin OH 43017  
Phone = 614-659-1505  
Self Employed = No  
EIN = 43-1632899

# Arizona Form 140A Resident Personal Income Tax Return (Short Form)

FOR  
CALENDAR YEAR

## 2013

**STOP** If your Arizona **taxable income** is \$50,000 or more, you **must** use Arizona Form 140.

ONE STAPLE. NO TAPE.

**82F**  Check box 82F if filing under extension

<b>1</b> Your First Name and Middle Initial <b>SINGLE</b>	Last Name <b>PARENT</b>	<b>Enter your SSN(s)</b> Your Social Security No. 400-100-7502
Spouse's First Name and Middle Initial (if box 4 or 6 checked)	Last Name	Spouse's Social Security No.
<b>2</b> Current Home Address - number and street, rural route <b>111 DESPERATE WAY</b>		Apt. No.
City, Town or Post Office <b>TEMPE</b>		State <b>AZ</b>
ZIP Code <b>85280</b>		Daytime Phone (with area code) <b>94 (602) 123-4567</b>
<b>3</b> Last Names Used in Prior Years		

<b>4</b> <input type="checkbox"/> Married filing joint return	<b>REVENUE USE ONLY. DO NOT MARK IN THIS AREA.</b> <b>88</b>
<b>5</b> <input checked="" type="checkbox"/> Head of household - Enter name of qualifying child or dependent on next line: <b>LIVewithPARENT</b>	
<b>6</b> <input type="checkbox"/> Married filing separate return. Enter spouse's name and Social Security No. above.	
<b>7</b> <input type="checkbox"/> Single	
<b>↓ Enter the number claimed. Do not put a check mark.</b>	
<b>8</b> <input type="checkbox"/> Age 65 or over (you and/or spouse)	<b>81</b> PM <b>80</b> RCVD
<b>9</b> <input type="checkbox"/> Blind (you and/or spouse)	
<b>10</b> <input type="checkbox"/> Dependents. From page 2, line A2 - <b>do not include self or spouse.</b>	
<b>11</b> <input type="checkbox"/> Qualifying parents and grandparents. From page 2, line A5.	

<b>12</b> Federal adjusted gross income (from your federal return) .....	<b>12</b>	20,000	00
<b>13</b> Exemption - Age 65 or over: Multiply the number in box 8 by \$2,100 .....	<b>13</b>		00
<b>14</b> Exemption - Blind: Multiply the number in box 9 by \$1,500 .....	<b>14</b>		00
<b>15</b> Exemption - Dependents: Multiply the number in box 10 by \$2,300 .....	<b>15</b>	2,300	00
<b>16</b> Exemption - Qualifying parents and grandparents: Multiply the number in box 11 by \$10,000 .....	<b>16</b>		00
<b>17</b> Total subtractions: Add lines 13 through 16 .....	<b>17</b>	2,300	00
<b>18</b> <b>Arizona adjusted gross income:</b> Subtract line 17 from line 12 .....	<b>18</b>	17,700	00
<b>19</b> Standard deduction: If you checked filing status box 4 or 5, enter \$9,883. If you checked box 6 or 7, enter \$4,945.	<b>19</b>	9,883	00
<b>20</b> Personal exemptions. See pages 6 and 7 of the instructions .....	<b>20</b>	4,200	00
<b>21</b> Arizona taxable income: Subtract lines 19 and 20 from line 18. If less than zero, enter zero. If \$50,000 or more, use Form 140 .	<b>21</b>	3,617	00
<b>22</b> Amount of tax from Optional Tax Tables .....	<b>22</b>	94	00
<b>23</b> Family income tax credit (from worksheet on page 8 of the instructions) .....	<b>23</b>	80	00
<b>24</b> <b>Balance of tax:</b> Subtract line 23 from line 22. If less than zero, enter zero .....	<b>24</b>	14	00
<b>25</b> Arizona income tax withheld during 2013 .....	<b>25</b>	900	00
<b>26</b> 2013 Arizona extension payment (Form 204) .....	<b>26</b>		00
<b>27</b> Increased Excise Tax Credit (from worksheet on page 9 of the instructions) .....	<b>27</b>		00
<b>28</b> Property Tax Credit (from Form 140PTC) .....	<b>28</b>		00
<b>29</b> <b>Total payments/credits:</b> Add lines 25 through 28 .....	<b>29</b>	900	00
<b>30</b> <b>TAX DUE:</b> If line 24 is larger than line 29, subtract line 29 from line 24, and enter amount of tax due. Skip line 31 .....	<b>30</b>		00
<b>31</b> <b>OVERPAYMENT:</b> If line 29 is larger than line 24, subtract line 24 from line 29, and enter the amount of overpayment .....	<b>31</b>	886	00

**32 - 41 Voluntary Gifts to:**

Solutions Teams Assigned to School..	<b>32</b>	3	00	Arizona Wildlife .....	<b>33</b>	2	00
Child Abuse Prevention .....	<b>34</b>	4	00	Domestic Violence Shelter .....	<b>35</b>	5	00
I Didn't Pay Enough Fund .....	<b>36</b>	0	00	National Guard Relief Fund .....	<b>37</b>	6	00
Neighbors Helping Neighbors .....	<b>38</b>	7	00	Special Olympics .....	<b>39</b>	8	00
Veterans' Donations Fund .....	<b>40</b>	9	00	Political Gift .....	<b>41</b>	50	00

**42** Voluntary Political Gift (check only one):  
 421  Americans Elect    422  Democratic    423  Green    424  Libertarian    425  Republican

<b>43</b> Total voluntary gifts: Add lines 32 through 41 .....	<b>43</b>	94	00
<b>44</b> <b>REFUND:</b> Subtract line 43 from line 31. If less than zero, enter amount owed on line 45 .....	<b>44</b>	792	00

**Direct Deposit of Refund:** Check box 44A if your deposit will be ultimately placed in a foreign account; see instructions. 44A

ROUTING NUMBER <b>98</b> 0 2 1 2 3 4 5 6 7	ACCOUNT NUMBER 1 2 3 1 2 3 1 2 3	<input checked="" type="checkbox"/> Checking or <input type="checkbox"/> Savings
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**45** **AMOUNT OWED:** Add lines 30 and 43. Make check payable to Arizona Department of Revenue; include SSN on payment. ..

**PLEASE BE SURE TO SIGN THE RETURN ON THE REVERSE SIDE OF THIS PAGE.**

**PART A: Dependents, Qualifying Parents and Grandparents – do not list yourself or spouse**

**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 2013
LIVewithPARENT	600 00 1002	SON	12

**A2** Enter total number of persons listed in A1 here and on the front of this form, box 10 ..... TOTAL **A2** 1

**A3 a** Enter the names of the dependents listed above who do not qualify as your dependent on your federal return. See page 6 of the instructions.

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

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**A4** List qualifying parents and grandparents. 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 grandparent, see page 6 of the instructions.

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2013

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

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.

PLEASE SIGN HERE	→ YOUR SIGNATURE	DATE	<b>CLERK</b>	OCCUPATION	
	→ SPOUSE'S SIGNATURE	DATE	SPOUSE'S OCCUPATION		
	PAID PREPARER'S SIGNATURE	DATE	<b>H&amp;R BLOCK</b>		
	101 ROBIN LANE	PAID PREPARER'S STREET ADDRESS		P55555555	
	DULIN	OH	43017	(      )	
PAID PREPARER'S CITY	STATE	ZIP CODE	PAID PREPARER'S PHONE NO.		

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.

22222		a Employee's social security number 400-00-7502		OMB No. 1545-0008			
b Employer identification number (EIN) 64-1234567			1 Wages, tips, other compensation 20,000.00		2 Federal income tax withheld 1,000.00		
c Employer's name, address, and ZIP code UCAN WINABUNDLE RIVERBOAT 12 QUEEN OF DIAMONDS BLVD TEMPE AZ 85280			3 Social security wages 20,000.00		4 Social security tax withheld 1,240.00		
			5 Medicare wages and tips 20,000.00		6 Medicare tax withheld 290.00		
			7 Social security tips		8 Allocated tips		
d Control number			9		10 Dependent care benefits		
e Employee's first name and initial      Last name      Suff.  SINGLE PARENT 111 DESPERATE WAY TEMPE, AZ 85280			11 Nonqualified plans		12a C C C C e		
			13 Statutory employee      Retirement plan      Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C C C C e		
			14 Other		12c C C C C e		
					12d C C C C e		
f Employee's address and ZIP code							
15 State AZ	Employer's state ID number 64-1234567	16 State wages, tips, etc. 20,000.00	17 State income tax 900.00	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form **W-2** Wage and Tax Statement  
Copy 1—For State, City, or Local Tax Department

2013

Department of the Treasury—Internal Revenue Service