



2013 Arizona ATS Test

Test: 400-00-7501

Form: **140EZ**

Description: Single Taxpayer with one W-2

Forms used

Form 140EZ

Other

NA

Income Information

	<u>Total</u>	<u>Arizona</u>
Wages from one W-2 Form	2,200	2,200
FAGI	2,200	

Deductions and Adjustments

	<u>Total</u>	<u>Arizona</u>
AZ Withholding		10

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 140EZ Resident Personal Income Tax Return (EZ Form)

FOR CALENDAR YEAR
2013

ONE STAPLE. NO TAPE.

1 Your First Name and Middle Initial EEEEEE	Last Name ZZZZZZ	Enter your SSN(s)	Your Social Security No. 400 00 7501
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 1040 EZ WAY		Apt. No.	Daytime Phone (with area code) 94
3 City, Town or Post Office PHOENIX	State AZ	ZIP Code 85014	Last Names Used in Prior Years

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88

81 PM **80** RCVD

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

STOP You must use Arizona Form 140 if:

- Your Arizona taxable income on line 8 is \$50,000 or more.
- You are claiming estimated payments.
- You are taking a subtraction for:
 - active duty military pay
 - wages earned on Indian reservation(s)

Place any required federal and AZ schedules or other documents after 140EZ; staple to upper left corner.

FILING STATUS: Check one box.

4 Married filing joint return

5 Single

6 Federal adjusted gross income from your federal return	6	2,200	00
7 Standard deduction and personal exemption: If you checked filing status box 4, enter \$14,083; if you checked filing status box 5, enter \$7,045	7	7,045	00
8 Arizona taxable income: Subtract line 7 from line 6. If less than zero, enter zero	8		00
9 Amount of tax from Optional Tax Tables	9		00
10 Family income tax credit from worksheet on page 5 of instructions.....	10	40	00
11 Balance of tax: Subtract line 10 from line 9. If line 10 is more than line 9, enter zero.....	11		00
12 Arizona income tax withheld during 2013	12	10	00
13 2013 Arizona extension payment (Form 204)	13		00
14 Increased Excise Tax Credit from worksheet on page 5 of the instructions.....	14	25	00
15 Total payments/credits: Add lines 12 through 14	15	35	00
16 TAX DUE / AMOUNT OWED: If line 11 is more than line 15, subtract line 15 from line 11. Skip line 17. Make check payable to Arizona Department of Revenue; include SSN on payment	16		00
17 REFUND / OVERPAYMENT: If line 15 is more than line 11, subtract line 11 from line 15	17	35	00

Direct Deposit of Refund: Check box **17A** if your deposit will be ultimately placed in a **foreign account**; see instructions.... **17A**

ROUTING NUMBER: **98** 1 2 3 4

ACCOUNT NUMBER: 0 2 1 3 5 7 6 3

Checking or Savings

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.

CLERK

YOUR SIGNATURE _____ DATE _____ OCCUPATION _____

SPOUSE'S SIGNATURE _____ DATE _____ SPOUSE'S OCCUPATION _____

H&R BLOCK

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

101 ROBIN LANE P77777777

PAID PREPARER'S STREET ADDRESS _____ PAID PREPARER'S TIN _____

DUBLIN OH 43017 (614) 659-1505

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 400-00-7501		OMB No. 1545-0008				
b Employer identification number (EIN) 11-6321571			1 Wages, tips, other compensation 2,200.00		2 Federal income tax withheld 300.00			
c Employer's name, address, and ZIP code THE BOND COURT HOTEL 1617W CLEVELAND AVE PHOENIX AZ 85007			3 Social security wages 2,200.00		4 Social security tax withheld 124.00			
			5 Medicare wages and tips		6 Medicare tax withheld			
			7 Social security tips 2,200.00		8 Allocated tips 29.00			
d Control number			9		10 Dependent care benefits			
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a C o o l l e
EEEE ZZZZ		ZZZZZ						12b C o o l l e
1040 EZ WAY		PHOENIX AZ 85014		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				12c C o o l l e
f Employee's address and ZIP code				14 Other				12d C o o l l e
15 State	Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name	
AZ	11-6321571		2,200.00	10.00				

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

2013

Department of the Treasury—Internal Revenue Service