

**Arizona 140 - Full Year Resident Return**  
2D Barcode Record Layout

2015 FIELD NO	2016 FIELD NO	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
1	1	Header version	2	A		T1
2	2	Software Developer Code	4	A		NACTP assigned code
3	3	Specification Version Number	2	N		01; use 2 digits (leading zero)
4	4	Form Type	6	A		140
5	5	Form Year	4	N	140, TOP	2016
6	6	Tax Year Ending DateYY	8	A	140, 66	MMDDYYYY (Enter only if fiscal year filer)
7	7	Primary First Name	10	A	140, Line 1	
8	8	Primary Middle Initial	1	A	140, Line 1	
9	9	Primary Last Name	35	A	140, Line 1	
10	10	Primary SSN	9	N	140, Line 1	No hyphens
11	11	Spouse First Name	10	A	140, Line 1	Spouse Name required when MFJ or MFS
12	12	Spouse Middle Initial	1	A	140, Line 1	Spouse Name required when MFJ or MFS
13	13	Spouse Last Name	35	A	140, Line 1	Spouse Name required when MFJ or MFS
14	14	Spouse SSN	9	N	140, Line 1	Spouse Name required when MFJ or MFS; No hyphens
15	15	Address line 1	35	A/N	140, Line 2	Address line 1 or % (care of) line or recipient name if TP is deceased
16	16	Address line 2	35	A/N	140, Line 2	Address line 2 or Address line if 1 is % or deceased TP
17	17	City	21	A	140, Line 3	
18	18	State	2	A	140, Line 3	
19	19	Zip Code	9	N	140, Line 3	Include zip plus 4 in last 4 digits or zero fill if not available
20	20	Daytime Number	10	N	140, 94	
21	21	Married/Joint	1	A	140, Line 4	X or null
22	22	Head of Household	1	A	140, Line 5	X or null
23	23	Married filing Separate	1	A	140, Line 6	X or null
24	24	Single	1	A	140, Line 7	X or null
25	25	Age 65 or over	1	N	140, Line 8	
26	26	Blind	1	N	140, Line 9	
27	27	Dependents	2	N	140, Line 10	
28	28	Parents/Ancestors	1	N	140, Line 11	
29	29	6 Month Extension	1	A	140, Line 82F	X or null
30	30	Dependent Info More Space--Qualifying Dependents	1	A	140, Box 10	X or null
31	31	Dependent 1 First Name	10	A	140, 10A(A1)	
32	32	Dependent 1 Last Name	10	A	140, 10A(A2)	
33	33	Dependent 1 SSN	9	N	140, 10A(B)	No hyphens
34	34	Dependent 1 Relationship	12	A	140, 10A( C )	
35	35	Dependent 1 Months	2	A	140, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
36	36	Dependent 1 Name Not Qualifying	1	A	140, Box 10A( E )	X or null
37	37	Dependent 1 Name Education	1	A	140, Box 10A( F )	X or null
38	38	Dependent 2 First Name	10	A	140, 10B(A1)	
39	39	Dependent 2 Last Name	10	A	140, 10B(A2)	
40	40	Dependent 2 SSN	9	N	140, 10B(B)	No hyphens
41	41	Dependent 2 Relationship	12	A	140, 10B( C )	
42	42	Dependent 2 Months	2	A	140, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
43	43	Dependent 2 Name Not Qualifying	1	A	140, Box 10B( E )	X or null
44	44	Dependent 2 Name Education	1	A	140, Box 10B( F )	X or null
45	45	Dependent 3 First Name	10	A	140, 10C(A1)	
46	46	Dependent 3 Last Name	10	A	140, 10C(A2)	
47	47	Dependent 3 SSN	9	N	140, 10C(B)	No hyphens
48	48	Dependent 3 Relationship	12	A	140, 10C( C )	
49	49	Dependent 3 Months	2	A	140, 10C( D )	Valid Values are (0 - 12) & S (Stillborn)
50	50	Dependent 3 Name Not Qualifying	1	A	140, Box 10C( E )	X or null
51	51	Dependent 3 Name Education	1	A	140, Box 10C( F )	X or null
52	52	Dependent Info More Space--Qualifying Ancestors	1	A	140, Box 11	X or null
53	53	Dependent 1 Qual Anc First Name	10	A	140, Line 11a(a1)	
54	54	Dependent 1 Qual Anc Last Name	10	A	140, Line 11a(a2)	
55	55	Dependent 1 Qual Anc SSN	9	N	140, Line 11a(b)	No hyphens
56	56	Dependent 1 Qual Anc Relationship	12	A	140, Line 11a(c)	
57	57	Dependent 1 Qual Anc Months	2	A	140, Line 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
58	58	Dependent 1 Qual Anc Age 65+	1	A	140, Box 11a( e )	X or null
59	59	Dependent 1 Qual Anc Deceased In Tax Year	1	A	140, Box 11a(f)	X or null
60	60	Dependent 2 Qual Anc First Name	10	A	140, Line 11b(a1)	
61	61	Dependent 2 Qual Anc Last Name	10	A	140, Line 11b(a2)	
62	62	Dependent 2 Qual Anc SSN	9	N	140, Line 11b(b)	No hyphens
63	63	Dependent 2 Qual Anc Relationship	12	A	140, Line 11b(c)	
64	64	Dependent 2 Qual Anc Months	2	A	140, Line 11b(d)	Valid Values are (0 - 12) & S (Stillborn)
65	65	Dependent 2 Qual Anc Age 65+	1	A	140, Box 11b( e )	X or null
66	66	Dependent 2 Qual Anc Deceased In Tax Year	1	A	140, Box 11b(f)	X or null
67	67	Fed Adjusted Gross Income	10	N	140, Line 12	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

68	68	Non-AZ Mun Interest	10	N	140, Line 13	
69	69	Partnership Income Adjustment Add	10	N	140, Line 14	Name Change Only
70	70	Total Federal Depreciation	10	N	140, Line 15	
71	71	Other Additions	10	N	140, Line 16	
72	72	Subtotal	10	N	140, Line 17	Use existing "Reported <=> Calculated" TAS suspense rule if the value of Line 17 does not equal the sum of adding lines 12 through 16.
73	73	Net Capital Gain/Loss	10	N	140, Line 18	
74	74	Total Net Short-Term Capital Gain/Loss	10	N	140, Line 19	
75	75	Total Net Long-Term Capital Gain/Loss	10	N	140, Line 20	
76	76	Net Long-Term Capital Gain From Assets	10	N	140, Line 21	
77	77	Capital Gain Allowable Subt. Calculation	10	N	140, Line 22	Multiply Line 21 by 25% (.25) and enter the result
78	78	Net Capital Gain - Investment In Qual. Small Business	10	N	140, Line 23	
79	79	Recalculated Arizona Depreciation	10	N	140, Line 24	
80	80	Partnership Income Adjustment Sub	10	N	140, Line 25	Name Change Only
81	81	IRC 179 Expense Not Allowed	10	N	140, Line 26	
82	82	Int Savings Bond	10	N	140, Line 27	
83	83	Exclusive Govt Pens	10	N	140, Line 28	
84	84	AZ Lottery Winnings	10	N	140, Line 29	
85	85	SS or RR Benefits	10	N	140, Line 30	
86	86	Wages Native American	10	N	140, Line 31	
87	87	Active Duty Military Pay	10	N	140, Line 32	
88	88	Net Operating Loss Adjust	10	N	140, Line 33	
89	89	Contributions To 529 College Savings Plans	10	N	140, Line 34	
90	90	Other Subtractions	10	N	140, Line 35	
91	91	Total Subtractions	10	N	140, Line 36	Subtract lines 22 through 35 from line 17
92	92	Total Subtractions From Additions--Page 2	10	N	140, Line 37	
93	93	Exemption Age 65 or Over	10	N	140, Line 38	Multiply the number in Box 8 by \$2100
94	94	Exemption Blind	10	N	140, Line 39	Multiply the number in Box 9 by \$1500
95	95	Exemption Dependents	10	N	140, Line 40	Multiply the number in Box 10 by \$2300
96	96	Exemption Parents and Grand Parents	10	N	140, Line 41	Multiply the number in Box 11 by \$10000
97	97	AZ Adjusted Gross	10	N	140, Line 42	Subtract Lines 38 through 41 from 37
98	98	Itemized Deduction	1	A	140 Box 43-I	X or null
99	99	Standard Deduction	1	A	140 Box 43-S	X or null
100	100	Deduction Amount	10	N	140 Line 43	Single, Married Filing Separate = \$5,099 Married Filing Jointly, Head of Household = \$10,189
101	101	Personal Exemptions	10	N	140 Line 44	
102	102	AZ Taxable Income	10	N	140 Line 45	"Subtract lines 43 and 44 from line 42"
103	103	Compute Tax	10	N	140 Line 46	Compute the tax using amount on line 45 and Tax Table X, Y or Optional Tax Tables
104	104	Tax from Recapture Credits	10	N	140 Line 47	
105	105	Subtotal Tax	10	N	140 Line 48	add lines 46 and 47
106	106	Family Income Credit	10	N	140 Line 49	
107	107	Credits from Arizona Credit Forms	10	N	140 Line 50	
108	108	Balance of Tax	10	N	140 Line 51	subtract lines 49 and 50 from line 48. Cannot be less than Zero
109	109	Withholding	10	N	140 Line 52	
110	110	Estimated Payments	10	N	140 Line 53a	
111	111	Claim of Right	10	N	140 Line 53b	Added for TY2016
112	112	Total Estimated Payments	10	N	140 Line 53c	Added for TY2016
111	113	Extension Amount (Extension Payments)	10	N	140 Line 54	
112	114	Increase Excise Tax Credit	10	N	140 Line 55	Use worksheet to determine amount.
113	115	Property Tax Credit	10	N	140 Line 56	
114	116	Refundable Credit Form 308-I	1	A	140 Line 57-1	value "1" if checked; "0" or null if blank
115	117	Refundable Credit Form 342	1	A	140 Line 57-2	value "2" if checked; "0" or null if blank
116	118	Refundable Credit Form 349	1	A	140 Line 57-3	value "3" if checked; "0" or null if blank
117	119	Other Refundable Credits	10	N	140 Line 57	
118	120	Total Payments	10	N	140 Line 58	"add lines 52 through 57"
119	121	Tax Due	10	N	140 Line 59	"If line 51 is larger than line 58, subtract line 58 from line 51"
120	122	Overpayment	10	N	140 Line 60	If line 58 is larger than line 51, subtract line 51 from line 58"
121	123	Next Year Est Payment	10	N	140 Line 61	Amount of Line 60 to be Applied to 2017 Estimated Tax
122	124	Balance Overpayment	10	N	140 Line 62	"subtract line 61 from line 60"
123	125	Solutions Teams Assigned To Schools Contrib	10	N	140 Line 63	
124	126	AZ Wildlife Contrib	10	N	140 Line 64	
125	127	Child Abuse Contrib	10	N	140 Line 65	
126	128	Domestic Violence Contrib	10	N	140 Line 66	
127	129	Political Gift	10	N	140 Line 67	
128	130	Neighbors Help Contrib	10	N	140 Line 68	
129	131	Spec Olympic Contrib	10	N	140 Line 69	
130	132	Veterans' Donations Fund	10	N	140 Line 70	
131	133	I Didn't Pay Enough Fund	10	N	140 Line 71	
132	134	Sustainable State Parks and Road Fund	10	N	140 Line 72	

Legend

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133		Americans Elect Party	1	A	140 Line 73-1	Removed for TY2016
135	135	Democratic Party	1	A	140 Line 73-1	"2" or null
134	136	Green Party	1	A	140 Line 73-2	"3" or null - Name Change Only
136	137	Libertarian Party	1	A	140 Line 73-3	"4" or null
137	138	Republican Party	1	A	140 Line 73-4	"5" or null
138	139	Est Payment / MSA / AZLTHSA Penalties	10	N	140 Line 74	
139	140	Annualized Other	1	A	140 Line 75-1	Y or null
140	141	Farmer/Fisherman	1	A	140 Line 75-2	Y or null
141	142	Form 221 Attached	1	A	140 Line 75-3	Y or null
142	143	AZLTHSA Penalty	1	A	140 Line 75-4	Y or null
143	144	Total Contributions & Penalty	10	N	140 Line 76	Add lines 63 through 72 and 74
144	145	Refund Amount	10	N	140 Line 77	"subtract line 76 from line 62"
145	146	Foreign Account	1	A	140 Line 77A	Y or Null; if "Y", Fields 147-150 should be disabled
146	147	Dir Dep Routing Nbr	9	N	140 Line 98	For direct deposit; direct debit is not supported
147	148	Dir Dep Account Nbr	17	A/N	140 Line 98	For direct deposit; direct debit is not supported
148	149	Dir Dep Checking	1	A	140 Line 98	X or null; direct deposit only
149	150	Dir Dep Savings	1	A	140 Line 98	X or null; direct deposit only
150	151	Amount Owed	10	N	140 Line 78	"add lines 59 and 76"
151	152	Primary Occupation	16	A	140, pg2	
152	153	Spouse Occupation	16	A	140, pg2	
153	154	Preparer Name	35	A/N	140, pg2	
154	155	Preparer FEIN	9	N	140, pg2	No hyphens
155	156	Preparer Address	35	A/N	140, pg2	
156	157	Preparer City	21	A	140, pg2	
157	158	Preparer State	2	A	140, pg2	
158	159	Preparer Zip Code	9	N	140, pg2	
159	160	Paid Preparer Phone Number	10	N	140, pg2	
160	161	Prior Last Names	20	A	Front Page Line 97	Comma Delimited
161	162	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
162	163	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
163	164	Medical Allowance	10	N	FedSchA(2-D) 3	
164	165	Total Medical/Dental	10	N	FedSchA(2-D) 4	
165	166	State and Local Taxes	10	N	FedSchA(2-D) 5	
166	167	Real Estate Taxes	10	N	FedSchA(2-D) 6	
167	168	Personal Property Taxes	10	N	FedSchA(2-D) 7	
168	169	Other Taxes	10	N	FedSchA(2-D) 8	
169	170	Total Other Taxes	10	N	FedSchA(2-D) 9	
170	171	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
171	172	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
172	173	Deductible Points	10	N	FedSchA(2-D) 12	
173	174	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
174	175	Investment Interest	10	N	FedSchA(2-D) 14	
175	176	Total Interest	10	N	FedSchA(2-D) 15	
176	177	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
177	178	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	
178	179	Carryover Prior Year	10	N	FedSchA(2-D) 18	
179	180	Total Contrib	10	N	FedSchA(2-D) 19	
180	181	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
181	182	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
182	183	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
183	184	Tot Other Exp	10	N	FedSchA(2-D) 23	
184	185	Gross Misc Ded	10	N	FedSchA(2-D) 24	
185	186	Miscellaneous Allow	10	N	FedSchA(2-D) 26	
186	187	Total Misc Deduct	10	N	FedSchA(2-D) 27	
187	188	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28	
188	189	Total Item Deduct	10	N	FedSchA(2-D) 29	
189	190	Med/Dent Expenses	10	N	AzSchA 1	
190	191	MSA Distribut Used	10	N	AzSchA 2	
191	192	Fed Med Deductions	10	N	AzSchA 3	
192	193	Total Med Deducts	10	N	AzSchA 4	
193	194	Medical Add Adjust	10	N	AzSchA 5	
194	195	Medical Subt Adjust	10	N	AzSchA 6	
195	196	Fed Credit Int Paid	10	N	AzSchA 7	
196	197	Wagering Loss Fed	10	N	AzSchA 8	
197	198	Gambling Winnings	10	N	AzSchA 9	
198	199	AZ Lottery Subt	10	N	AzSchA 10	
199	200	Max Gamble Loss Deduct	10	N	AzSchA 11	
200	201	Gamble Subt Adjust	10	N	AzSchA 12	
201	202	Contribution Adjust	10	N	AzSchA 13	
202	203	Other Adjustments	10	N	AzSchA 14	
203	204	Sum Add Adjust	10	N	AzSchA 15	
204	205	Sum Subt Adjust	10	N	AzSchA 16	
205	206	Tot Fed Item Deduct	10	N	AzSchA 17	

## Legend

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206	207	Sum Az Item Deduct	10	N	AzSchA 19
207	208	Az Item Deductions	10	N	AzSchA 21
208	209	Employer ID (1)	10	N	W-2 (1st Wage Statement)
209	210	Employee SSN (1)	10	N	W-2 (1st Wage Statement)
210	211	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)
211	212	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)
212	213	Employer ID (2)	10	N	W-2 (2nd Wage Statement)
213	214	Employee SSN (2)	10	N	W-2 (2nd Wage Statement)
214	215	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)
215	216	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)
216	217	Employer ID (3)	9	N	W-2 (3rd Wage Statement)
217	218	Employee SSN (3)	9	N	W-2 (3rd Wage Statement)
218	219	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)
219	220	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)
220	221	Employer ID (4)	9	N	W-2 (4th Wage Statement)
221	222	Employee SSN (4)	9	N	W-2 (4th Wage Statement)
222	223	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)
223	224	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)
224	225	Payer's ID (1)	9	N	1099-R (1st Statement)
225	226	Recipient's SSN (1)	9	N	1099-R (1st Statement)
226	227	1099 Gross Amt (1)	10	N	1099-R (1st Statement)
227	228	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)
228	229	1099 Az WH (1)	10	N	1099-R (1st Statement)
229	230	Payer's ID (2)	9	N	1099-R (2nd Statement)
230	231	Recipient's SSN (2)	9	N	1099-R (2nd Statement)
231	232	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)
232	233	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)
233	234	1099 Az WH (2)	10	N	1099-R (2nd Statement)
234	235	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)
235	236	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)
236	237	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)
237	238	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)
238	239	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)
239	240	Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)
240	241	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)
241	242	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)
242	243	Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)
243	244	Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)
244	245	Increased Research Act Ind Credit a	10	N	301, Line 5a (Form 308-l)
245	246	Increased Research Act Ind Credit b	10	N	301, Line 5b (Form 308-l)
246	247	Increased Research Act Ind Credit c	10	N	301, Line 5c (Form 308-l)
247	248	Tax Paid Other State Cntry Credit a	10	N	301, Line 6a (Form 309)
248	249	Tax Paid Other State Cntry Credit c	10	N	301, Line 6c (Form 309)
249	250	Solar Energy Devices Credit a	10	N	301, Line 7a (Form 310)
250	251	Solar Energy Devices Credit b	10	N	301, Line 7b (Form 310)
251	252	Solar Energy Devices Credit c	10	N	301, Line 7c (Form 310)
252	253	Agri Water Conserv Sys Credit a	10	N	301, Line 8a (Form 312)
253	254	Agri Water Conserv Sys Credit b	10	N	301, Line 8b (Form 312)
254	255	Agri Water Conserv Sys Credit c	10	N	301, Line 8c (Form 312)
255	256	Polution Control Credit a	10	N	301, Line 9a (Form 315)
256	257	Polution Control Credit b	10	N	301, Line 9b (Form 315)
257	258	Polution Control Credit c	10	N	301, Line 9c (Form 315)
258	259	Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 10a (Form 319)
259	260	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 10b (Form 319)
260	261	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 10c (Form 319)
261	262	Employ TANF Recipients Credit a	10	N	301, Line 11a (Form 320)
262	263	Employ TANF Recipients Credit b	10	N	301, Line 11b (Form 320)
263	264	Employ TANF Recipients Credit c	10	N	301, Line 11c (Form 320)
264	265	Contrib Qual Chart Orgns Credit a	10	N	301, Line 12a (Form 321)
265	266	Contrib Qual Chart Orgns Credit b	10	N	301, Line 12b (Form 321)
266	267	Contrib Qual Chart Orgns Credit c	10	N	301, Line 12c (Form 321)
267	268	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 13a (Form 322)
268	269	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 13b (Form 322)
269	270	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 13c (Form 322)
270	271	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 14a (Form 323)
271	272	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 14b (Form 323)
272	273	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 14c (Form 323)
273	274	Agri Pol Cntrl Equip Credit a	10	N	301, Line 15a (Form 325)
274	275	Agri Pol Cntrl Equip Credit b	10	N	301, Line 15b (Form 325)
275	276	Agri Pol Cntrl Equip Credit c	10	N	301, Line 15c (Form 325)
276	277	Donation School Site Credit a	10	N	301, Line 16a (Form 331)
277	278	Donation School Site Credit b	10	N	301, Line 16b (Form 331)
278	279	Donation School Site Credit c	10	N	301, Line 16c (Form 331)
279	280	Healthy Forest Enterprises Credit a	10	N	301, Line 17a (Form 332)
280	281	Healthy Forest Enterprises Credit b	10	N	301, Line 17b (Form 332)
281	282	Healthy Forest Enterprises Credit c	10	N	301, Line 17c (Form 332)

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

282	283	Employ Natl Guard Members Credit a	10	N	301, Line 18a (Form 333)	
283	284	Employ Natl Guard Members Credit b	10	N	301, Line 18b (Form 333)	
284	285	Employ Natl Guard Members Credit c	10	N	301, Line 18c (Form 333)	
285		Motion Picture Credit b	10	N	301, Line 19b (Form 334)	Removed for TY2016
286		Motion Picture Credit c	10	N	301, Line 19c (Form 334)	Removed for TY2016
287	286	Business Contrib School Tuition Org a	10	N	301, Line 19a (Form 335-I)	
	287	Business Contrib School Tuition Org b	10	N	301, Line 19b (Form 335-I)	Added for TY2016
288	288	Business Contrib School Tuition Org c	10	N	301, Line 19c (Form 335-I)	
289	289	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 20a (Form 336)	
290	290	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 20b (Form 336)	
291	291	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 20c (Form 336)	
292	292	Invest Qual Small Bus Credit a	10	N	301, Line 21a (Form 338)	
293	293	Invest Qual Small Bus Credit b	10	N	301, Line 21b (Form 338)	
294	294	Invest Qual Small Bus Credit c	10	N	301, Line 21c (Form 338)	
295	295	Water Conserv Sys Credit b	10	N	301, Line 22b (Form 339)	
296	296	Water Conserv Sys Credit c	10	N	301, Line 22c (Form 339)	
297	297	Military Fam Relf Fnd Credit a	10	N	301, Line 23a (Form 340)	
298	298	Military Fam Relf Fnd Credit c	10	N	301, Line 23c (Form 340)	
299	299	Business Contrib School Tuition Disabled a	10	N	301, Line 24a (Form 341-I)	
	300	Business Contrib School Tuition Disabled b	10	N	301, Line 24b (Form 341-I)	Added for TY2016
300	301	Business Contrib School Tuition Disabled c	10	N	301, Line 24c (Form 341-I)	
301	302	Renew Energy Prod Tax Credit a	10	N	301, Line 25a (Form 343)	
302	303	Renew Energy Prod Tax Credit b	10	N	301, Line 25b (Form 343)	
303	304	Renew Energy Prod Tax Credit c	10	N	301, Line 25c (Form 343)	
304	305	Solar Liquid Fuel Credit a	10	N	301, Line 26a (Form 344)	
305	306	Solar Liquid Fuel Credit c	10	N	301, Line 26c (Form 344)	
306	307	New Employment Credit a	10	N	301, Line 27a (Form 345)	
307	308	New Employment Credit b	10	N	301, Line 27b (Form 345)	
308	309	New Employment Credit c	10	N	301, Line 27c (Form 345)	
309	310	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 28a (Form 346)	
310	311	Incrs Resrch Act Basic Resrch Credit b	10	N	301, Line 28b (Form 346)	
311	312	Incrs Resrch Act Basic Resrch Credit c	10	N	301, Line 28c (Form 346)	
312	313	Qual Hlth Ins Plan Credit b	10	N	301, Line 29b (Form 347)	
313	314	Qual Hlth Ins Plan Credit c	10	N	301, Line 29c (Form 347)	
314	315	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 30a (Form 348)	
315	316	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 30b (Form 348)	
316	317	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 30c (Form 348)	
317	318	Renew Energy Invest Prod Slf Consum Credit a	10	N	301, Line 31a (Form 351)	
318	319	Renew Energy Invest Prod Slf Consum Credit b	10	N	301, Line 31b (Form 351)	
319	320	Renew Energy Invest Prod Slf Consum Credit c	10	N	301, Line 31c (Form 351)	
	321	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 32a (Form 352)	Added for TY2016
	322	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 32c (Form 352)	Added for TY2016
320	323	Total Available Nonrefundable Tax Credits	10	N	301, Line 33	Add Lines 1 through 32 Column c Only
321	324	Total AZ Tax	10	N	301, Line 34	Tax From F140 L46 or F140PY L59 or F140NR
322	325	Tax Recap Environ Tech Fac Credit	10	N	301, Line 35	From AZ Credit Form 305 Part 5 Line 23
		Tax Recap Credits Hlthy Forest Entrs	10	N	301, Line 36	From AZ Credit Form 332 Part 11 Line 53 and Part 12 Line 59
323	326	Tax Recap Credits Renew Engy Ind	10	N	301, Line 37c	From AZ Credit Form 342 Part 5 Line 17
324	327	Tax Recap Credits Qual Facs	10	N	301, Line 38c	From AZ Credit Form 349 Part 5 Line 17
325	328	Tax Recap Crdts Renew Engy Invest Prod Slf Cons	10	N	301, Line 39	From AZ Credit Form 351 Part 5 Line 25c
326	329	Total Recapture of Credits	10	N	301, Line 40	Add Lines 35 through 39 Enter Here and on F140 L47, F140PY L59, F140NR L57, F140X L35
327	330					
328	331	Subtotal Tax Credits and Recap Credits	10	N	301, Line 41	Add Lines 34 and 40
329	332	Family Income Tax Credit	10	N	301, Line 42	From F140 L49 or F140PY L61 or F140X L37
		Total Tax Credits and Recap Credits	10	N	301, Line 43	Subtract Lines 42 from Line 41. If less than Zero Enter Zero
330	333					
331	334	Enterprise Zone Credit Used	10	N	301, Line 44 (Form 304)	
332	335	Environ Tech Fac Credit Used	10	N	301, Line 45 (Form 305)	
333	336	Military Reuse Zone Credit Used	10	N	301, Line 46 (Form 306)	
334	337	Recycling Equipment Credit Used	10	N	301, Line 47 (Form 307)	
335	338	Increased Research Act Indiv Credit Used	10	N	301, Line 48 (Form 308-I)	
336	339	Tax Paid Other State Ctry Credit Used	10	N	301, Line 49 (Form 309)	
337	340	Solar Energy Devices Credit Used	10	N	301, Line 50 (Form 310)	
338	341	Agri Water Conserv Sys Credit Used	10	N	301, Line 51 (Form 312)	
339	342	Polution Control Credit Used	10	N	301, Line 52 (Form 315)	
340	343	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 53 (Form 319)	
341	344	Employ TANF Recipients Credit Used	10	N	301, Line 54 (Form 320)	
342	345	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 55 (Form 321)	
343	346	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 56 (Form 322)	
344	347	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 57 (Form 323)	
345	348	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 58 (Form 325)	
346	349	Donation School Site Credit Used	10	N	301, Line 59 (Form 331)	
347	350	Healthy Forest Enterprises Credit Used	10	N	301, Line 60 (Form 332)	
348	351	Employ Natl Guard Members Credit Used	10	N	301, Line 61 (Form 333)	
349		Motion Picture Credit Used	10	N	301, Line 62 (Form 334)	Removed for TY2016
350	352	Business Contrib School Tuition Org Used	10	N	301, Line 62 (Form 335-I)	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

351	353	Solar Energy Devices Comm Indus Used	10	N	301, Line 63 (Form 336)	
352	354	Invest Qual Small Bus Credit Used	10	N	301, Line 64 (Form 338)	
353	355	Water Conserv Sys Credit Used	10	N	301, Line 65 (Form 339)	
354	356	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 66 (Form 340)	
355	357	Business Contrib School Tuition Disabled Used	10	N	301, Line 67 (Form 341-l)	
356	358	Renew Energy Prod Tax Credit Used	10	N	301, Line 68 (Form 343)	
357	359	Solar Liquid Fuel Credit Used	10	N	301, Line 69 (Form 344)	
358	360	New Employment Credit Used	10	N	301, Line 70 (Form 345)	
359	361	Incrs Resrch Act Basic Resrch Credit Used	10	N	301, Line 71 (Form 346)	
360	362	Qual Hlth Ins Plans Credit Used	10	N	301, Line 72 (Form 347)	
361	363	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 73 (Form 348)	
362	364	Renew Energy Invest Prod Slf Consum Credit Used	10	N	301, Line 74 (Form 351)	
	365	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 75 (Form 352)	Added for TY2016
363	366	Total Nonrefundable Tax Credits Used	10	N	301, Line 76	Add Lines 44 through 75. Total Cannot be more than 43. Enter this amount on Form 140 L50, 140PY L62, 140NR L59, or 104X L38
364	367	Description of Income Items a	30	A	309, Line 1a	
365	368	Description of Income Items b	30	A	309, Line 1b	
366	369	Description of Income Items c	30	A	309, Line 1c	
367	370	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
368	371	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
369	372	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
370	373	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
371	374	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
372	375	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
373	376	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
374	377	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
375	378	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
376	379	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
377	380	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
378	381	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
379	382	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
380	383	AZ Tax Liable Less Credits	10	N	309, Line 7	
381	384	Amt Part1 Line6	10	N	309, Line 8	
382	385	Amt AZ Income Tax Imposed	10	N	309, Line 9	
383	386	Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10	Divide Line 8 by Line 9 (Cannot be greater than 1.000)
384	387	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
385	388	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
386	389	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
387	390	Tot Income Taxable By Other	10	N	309, Line 14	
388	391	Pct Income Taxable by Other	6	D (4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
389	392	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
390	393	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
391	394	Description of Income Items a	30	A	309, Line 1a (2)	
392	395	Description of Income Items b	30	A	309, Line 1b (2)	
393	396	Description of Income Items c	30	A	309, Line 1c (2)	
394	397	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
395	398	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
396	399	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
397	400	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
398	401	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
399	402	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
400	403	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
401	404	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
402	405	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
403	406	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
404	407	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
405	408	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
406	409	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
407	410	AZ Tax Liable Less Credits	10	N	309, Line 7 (2)	
408	411	Amt Part1 Line6	10	N	309, Line 8 (2)	
409	412	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
410	413	Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10 (2)	Divide Line 8 by Line 9 (Cannot be greater than 1.000)
411	414	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
412	415	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
413	416	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6
414	417	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
415	418	Pct Income Taxable by Other	6	D (4,3)	309, Line 15 (2)	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
416	419	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
417	420	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
418	421	Address of Solar Energy Device	35	A/N	310, Line 1a	
419	422	City of Solar Energy Device	21	A	310, Line 1b	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

420	423	State of Solar Energy Device	2	A	310, Line 1c	
421	424	Zip Code of Solar Energy Device	9	N	310, Line 1d	Include zip plus 4 in last 4 digits or zero fill if not available
422	425	Cost of Solar Energy Device	10	N	310, Line 2	
423	426	Percentage of Cost Solar Energy Device	10	N	310, Line 3	AZ Credit Form 310 Multiply Line 2 by .25 (25%)
424	427	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
425	428	Amt Credit Prior Years	10	N	310, Line 5	
426	429	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
427	430	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
428	431	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
429	432	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
430	433	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
431	434	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
432	435	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
433	436	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
434	437	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
435	438	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
436	439	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
437	440	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
438	441	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
439	442	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
440	443	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
441	444	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
442	445	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
443	446	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
444	447	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
445	448	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
446	449	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
447	450	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
448	451	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
449	452	Name of Qualifying Charity 1	30	A	321, Line 1a	
450	453	Location of Qualifying Charity 1	30	A	321, Line 1b	
451	454	Amt Contributed 1	10	N	321, Line 1c	
452	455	Name of Qualifying Charity 2	30	A	321, Line 2a	
453	456	Location of Qualifying Charity 2	30	A	321, Line 2b	
454	457	Amount Contributed 2	10	N	321, Line 2c	
455	458	Name of Qualifying Charity 3	30	A	321, Line 3a	
456	459	Location of Qualifying Charity 3	30	A	321, Line 3b	
457	460	Amount Qualifying Charity Contributed 3	10	N	321, Line 3c	
458	461	Total Qualifying Charity	10	N	321, Line 4	Add amounts in column c of lines 1, 2, and 3 Also add amount from separate schedule
461		Name of Qualifying Foster Care Charity 1	30	A	321, Line 4aa	Removed for TY2016
462		Location of Qualifying Foster Care Charity 1	30	A	321, Line 4ab	Removed for TY2016
463		Amt Contributed 1	10	N	321, Line 4ac	Removed for TY2016
464		Name of Qualifying Foster Care Charity 2	30	A	321, Line 4ba	Removed for TY2016
465		Location of Qualifying Foster Care Charity 2	30	A	321, Line 4bb	Removed for TY2016
466		Amount Contributed 2	10	N	321, Line 4bc	Removed for TY2016
467		Name of Qualifying Foster Care Charity 3	30	A	321, Line 4ca	Removed for TY2016
468		Location of Qualifying Foster Care Charity 3	30	A	321, Line 4cb	Removed for TY2016
469		Amount Qualifying Foster Care Charity Contributed 3	10	N	321, Line 4cc	Removed for TY2016
470		Total Qualifying Foster Care Charity	10	N	321, Line 4d	Removed for TY2016
471		Total Current Year Qualify Charity Credit	10	N	321, Line 5	Removed for TY2016
472		Subtotal Charity Contributions	10	N	321, Line 6	Removed for TY2016
473		Subtotal Allowable Charity Contributions	10	N	321, Line 7	Removed for TY2016
474		Current Year's Qualifying Combined Charity Credit	10	N	321, Line 8	Removed for TY2016
	462	Name of Qualifying Charity 4	30	A	321, Line 5a	Added for TY2016
	463	Location of Qualifying Charity 4	30	A	321, Line 5b	Added for TY2016
	464	Amt Contributed 4	10	N	321, Line 5c	Added for TY2016
	465	Name of Qualifying Charity 5	30	A	321, Line 6a	Added for TY2016
	466	Location of Qualifying Charity 5	30	A	321, Line 6b	Added for TY2016
	467	Amount Contributed 5	10	N	321, Line 6c	Added for TY2016
	468	Name of Qualifying Charity 6	30	A	321, Line 7a	Added for TY2016
	469	Location of Qualifying Charity 6	30	A	321, Line 7b	Added for TY2016
	470	Amount Qualifying Charity Contributed 6	10	N	321, Line 7c	Added for TY2016
	471	Total Qualifying Charity2	10	N	321, Line 8	Add amounts in column c of lines 5, 6, and 7 (Added for TY2016)
	472	Total Cash Contri Qual Charity	10	N	321, Line 9	AZ Credit Form 321 Add Line 4 and Line 8 (Added for TY2016)
		Allowable Charity Credit				AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$400 Married Taxpayer Enter \$800
459	473		10	N	321, Line 10	
460	474	Current Year's Qualifying Charity Credit	10	N	321, Line 11	Enter smaller of Line 9 or Line 10
475	475	Original Credit Amount 12b	10	N	321, Line 12b	Enter Amount from Prior Year 5
476	476	Previous Used Amount 12c	10	N	321, Line 12c	Enter Amount from Prior Year 5
477	477	Available Credit Carryover 12d	10	N	321, Line 12d	Enter Amount from Prior Year 5
478	478	Original Credit Amount 13b	10	N	321, Line 13b	Enter Amount from Prior Year 4

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

479	479	Previous Used Amount 13c	10	N	321, Line 13c	Enter Amount from Prior Year 4
480	480	Available Credit Carryover 13d	10	N	321, Line 13d	Enter Amount from Prior Year 4
481	481	Original Credit Amount 14b	10	N	321, Line 14b	Enter Amount from Prior Year 3
482	482	Previous Used Amount 14c	10	N	321, Line 14c	Enter Amount from Prior Year 3
483	483	Available Credit Carryover 14d	10	N	321, Line 14d	Enter Amount from Prior Year 3
484	484	Original Credit Amount 15b	10	N	321, Line 15b	Enter Amount from Prior Year 2
485	485	Previous Used Amount 15c	10	N	321, Line 15c	Enter Amount from Prior Year 2
486	486	Available Credit Carryover 15d	10	N	321, Line 15d	Enter Amount from Prior Year 2
487	487	Original Credit Amount 16b	10	N	321, Line 16b	Enter Amount from Prior Year 1
488	488	Previous Used Amount 16c	10	N	321, Line 16c	Enter Amount from Prior Year 1
489	489	Available Credit Carryover 16d	10	N	321, Line 16d	Enter Amount from Prior Year 1
490	490	Total Available Credit Carryover	10	N	321, Line 17	Add Lines 12 through 16 Column d
491	491	Current Yr's Credit	10	N	321, Line 18	
492	492	Available Carryover	10	N	321, Line 19	
493	493	Total Available Credit	10	N	321, Line 20	
494	494	Name of Public School 1	30	A	322, Line 1a	
495	495	School District Name/Number 1	30	A	322, Line 1b	
496	496	Location of Public School 1	30	A	322, Line 1c	
497	497	Amt of Fees Paid 1	10	N	322, Line 1d	
498	498	Name of Public School 2	30	A	322, Line 2a	
499	499	School District Name/Number 2	30	A	322, Line 2b	
500	500	Location of Public School 2	30	A	322, Line 2c	
501	501	Amt of Fees Paid 2	10	N	322, Line 2d	
502	502	Name of Public School 3	30	A	322, Line 3a	
503	503	School District Name/Number 3	30	A	322, Line 3b	
504	504	Location of Public School 3	30	A	322, Line 3c	
505	505	Amt of Fees Paid 3	10	N	322, Line 3d	
506	506	Cash Contributions Public Schools	10	N	322, Line 4	Add 4d and Line 5
507	507	Name of Public School 4	30	A	322, Line 5a	
508	508	School District Name/Number 4	30	A	322, Line 5b	
509	509	Location of Public School 4	30	A	322, Line 5c	
510	510	Amt of Fees Paid 4	10	N	322, Line 5d	
511	511	Name of Public School 5	30	A	322, Line 6a	
512	512	School District Name/Number 5	30	A	322, Line 6b	
513	513	Location of Public School 5	30	A	322, Line 6c	
514	514	Amt of Fees Paid 5	10	N	322, Line 6d	
515	515	Name of Public School 6	30	A	322, Line 7a	
516	516	School District Name/Number 6	30	A	322, Line 7b	
517	517	Location of Public School 6	30	A	322, Line 7c	
518	518	Amt of Fees Paid 6	10	N	322, Line 7d	
519	519	Cash Contributions Public Schools2	10	N	322, Line 8	Add 5d, 6d, and 7d
520	520	Total Cash and Credit Contri Pub Schools	10	N	322, Line 9	Add Line 4 and Line 8
521	521	Allowable Cash Contributions Public Schools	10	N	322, Line 10	Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
522	522	Current Year's Credit	10	N	322, Line 11	Enter smaller of Line 9 or Line 10
523	523	Original Credit Amount 7	10	N	322, Line 12b	Enter Amount from Prior Year 5
524	524	Previous Used Amount 7	10	N	322, Line 12c	Enter Amount from Prior Year 5
525	525	Available Credit Carryover 7	10	N	322, Line 12d	Enter Amount from Prior Year 5
526	526	Original Credit Amount 8	10	N	322, Line 13b	Enter Amount from Prior Year 4
527	527	Previous Used Amount 8	10	N	322, Line 13c	Enter Amount from Prior Year 4
528	528	Available Credit Carryover 8	10	N	322, Line 13d	Enter Amount from Prior Year 4
529	529	Original Credit Amount 9	10	N	322, Line 14b	Enter Amount from Prior Year 3
530	530	Previous Used Amount 9	10	N	322, Line14c	Enter Amount from Prior Year 3
531	531	Available Credit Carryover 9	10	N	322, Line 14d	Enter Amount from Prior Year 3
532	532	Original Credit Amount 10	10	N	322, Line 15b	Enter Amount from Prior Year 2
533	533	Previous Used Amount 10	10	N	322, Line 15c	Enter Amount from Prior Year 2
534	534	Available Credit Carryover 10	10	N	322, Line 15d	Enter Amount from Prior Year 2
535	535	Original Credit Amount 11	10	N	322, Line 16b	Enter Amount from Prior Year 1
536	536	Previous Used Amount 11	10	N	322, Line 16c	Enter Amount from Prior Year 1
537	537	Available Credit Carryover 11	10	N	322, Line 16d	Enter Amount from Prior Year 1
538	538	Total Available Carryover	10	N	322, Line 17	
539	539	Current Year's Total Credit	10	N	322, Line 18	
540	540	Available Credit Carryover	10	N	322, Line 19	
541	541	Total Available Credit	10	N	322, Line 20	
542	542	Name of School 1	30	A	323, Line 1a	
543	543	Street Address of School 1	30	A	323, Line 1b	
544	544	City State of School 1	30	A	323, Line 1c	
545	545	Amt of Contribution School 1	10	N	323, Line 1d	
546	546	Name of School 2	30	A	323, Line 2a	
547	547	Street Address of School 2	30	A	323, Line 2b	
548	548	City State of School 2	30	A	323, Line 2c	
549	549	Amt of Contribution School 2	10	N	323, Line 2d	
550	550	Name of School 3	30	A	323, Line 3a	
551	551	Street Address of School 3	30	A	323, Line 3b	
552	552	City State of School 3	30	A	323, Line 3c	
553	553	Amt of Contribution School 3	10	N	323, Line 3d	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

554	554	Total Contributions School Prev Tuition	10	N	323, Line 4	Add Lines 1d, 2d, 3d, and any amounts from additional schedules
555	555	Name of School 4	30	A	323, Line 5a	
556	556	Street Address of School 4	30	A	323, Line 5b	
557	557	City State of School 4	30	A	323, Line 5c	
558	558	Amt of Contribution School 4	10	N	323, Line 5d	
559	559	Name of School 5	30	A	323, Line 6a	
560	560	Street Address of School 5	30	A	323, Line 6b	
561	561	City State of School 5	30	A	323, Line 6c	
562	562	Amt of Contribution School 5	10	N	323, Line 6d	
563	563	Name of School 6	30	A	323, Line 7a	
564	564	Street Address of School 6	30	A	323, Line 7b	
565	565	City State of School 6	30	A	323, Line 7c	
566	566	Amt of Contribution School 6	10	N	323, Line 7d	
		Total Contributions School Tuition				Add Lines 5d, 6d, 7d, and any amounts from additional schedules
567	567		10	N	323, Line 8	
568	568	Total Amt of Contribution Prev and Curr	10	N	323, Line 9	Add Lines 4 and 8
		Allowable Contributions School Tuition				Single Taxpayer or Heads of Household Enter \$535 Married Taxpayer Enter \$1070
569	569		10	N	323, Line 10	
570	570	Current Year's Credit	10	N	323, Line 11	Enter smaller of Line 9 or Line 10
571	571	Original Credit Amount 6	10	N	323, Line 12b	Enter Amount from Prior Year 5
572	572	Previous Used Amount 6	10	N	323, Line 12c	Enter Amount from Prior Year 5
573	573	Available Credit Carryover 6	10	N	323, Line 12d	Enter Amount from Prior Year 5
574	574	Original Credit Amount 7	10	N	323, Line 13b	Enter Amount from Prior Year 4
575	575	Previous Used Amount 7	10	N	323, Line 13c	Enter Amount from Prior Year 4
576	576	Available Credit Carryover 7	10	N	323, Line 13d	Enter Amount from Prior Year 4
577	577	Original Credit Amount 8	10	N	323, Line 14b	Enter Amount from Prior Year 3
578	578	Previous Used Amount 8	10	N	323, Line 14c	Enter Amount from Prior Year 3
579	579	Available Credit Carryover 8	10	N	323, Line 14d	Enter Amount from Prior Year 3
580	580	Original Credit Amount 9	10	N	323, Line 15b	Enter Amount from Prior Year 2
581	581	Previous Used Amount 9	10	N	323, Line 15c	Enter Amount from Prior Year 2
582	582	Available Credit Carryover 9	10	N	323, Line 15d	Enter Amount from Prior Year 2
583	583	Original Credit Amount 10	10	N	323, Line 16b	Enter Amount from Prior Year 1
584	584	Previous Used Amount 10	10	N	323, Line 16c	Enter Amount from Prior Year 1
585	585	Available Credit Carryover 10	10	N	323, Line 16d	Enter Amount from Prior Year 1
586	586	Total Available Carryover	10	N	323, Line 17	
587	587	Current Year's Total Credit	10	N	323, Line 18	
588	588	Available Credit Carryover	10	N	323, Line 19	
589	589	Total Available Credit	10	N	323, Line 20	
590	590	Total Contribs Current Tx Yr	10	N	323, Line 21	
591	591	Max Credit Allow CR323	10	N	323, Line 22	
592	592	Total Excess Contributions	10	N	323, Line 23	
593	593	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
594	594	ADVS Receipt No	1	A	340, Box 1-NO	X or null
595	595	Total Qualified Donations	10	N	340, Line 2	
		Allowable Qualified Donations				Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
596	596		10	N	340, Line 3	
597	597	Current Year's Credit	10	N	340, Line 4	Enter smaller of Line 2 or Line 3
598	598	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
599	599	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
600	600	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
601	601	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
602	602	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
603	603	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
604	604	Name of School 1	30	A	348, Line 2a	
605	605	Address of School 1	30	A	348, Line 2b	
606	606	City State of School 1	30	A	348, Line 2c	
607	607	Amt of Contribution 2015 1	10	N	348, Line 2d	
608	608	Name of School 2	30	A	348, Line 3a	
609	609	Address of School 2	30	A	348, Line 3b	
610	610	City State of School 2	30	A	348, Line 3c	
611	611	Amt of Contribution 2015 2	10	N	348, Line 3d	
612	612	Name of School 3	30	A	348, Line 4a	
613	613	Address of School 3	30	A	348, Line 4b	
614	614	City State of School 3	30	A	348, Line 4c	
615	615	Amt of Contribution 2015 3	10	N	348, Line 4d	
		Total Contributions Certified School Tuition Prev Yr				Add Lines 2d, 3d, 4d, and any amounts from additional schedules
616	616		10	N	348, Line 5	
617	617	Name of School 4	30	A	348, Line 6a	
618	618	Address of School 4	30	A	348, Line 6b	
619	619	City State of School 4	30	A	348, Line 6c	
620	620	Amt of Contribution 2016 4	10	N	348, Line 6d	
621	621	Name of School 5	30	A	348, Line 7a	
622	622	Address of School 5	30	A	348, Line 7b	
623	623	City State of School 5	30	A	348, Line 7c	
624	624	Amt of Contribution 2016 5	10	N	348, Line 7d	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

625	625	Name of School 6	30	A	348, Line 8a	
626	626	Address of School 6	30	A	348, Line 8b	
627	627	City State of School 6	30	A	348, Line 8c	
628	628	Amt of Contribution 2016 6	10	N	348, Line 8d	
		Total Contributions Certified School Tuition				Add Lines 6d, 7d, 8d, and any amounts from additional schedules
629	629		10	N	348, Line 9	
630	630	Total Contributions Prev and Curr	10	N	348, Line10	Add Line 5 and 9
631	631	Allowable Credit Claimed Form 323	10	N	348, Line 11	Enter amount from Form 323, Part 1 Line 5
632	632	Potential Credit	10	N	348, Line 12	Subtract Line 6 from Line 5
633	633	Allowable Max Credit	10	N	348, Line 13	Single Taxpayer or Heads of Household Enter \$525 Married Taxpayer Enter \$1050
634	634	Current Year's Credit	10	N	348, Line 14	Enter smaller of Line 7 or Line 8
635	635	Original Credit Amount 10	10	N	348, Line 15b	Enter Amount from Prior Year 5
636	636	Previous Used Amount 10	10	N	348, Line 15c	Enter Amount from Prior Year 5
637	637	Available Credit Carryover 10	10	N	348, Line 15d	Enter Amount from Prior Year 5
638	638	Original Credit Amount 11	10	N	348, Line 16b	Enter Amount from Prior Year 4
639	639	Previous Used Amount 11	10	N	348, Line 16c	Enter Amount from Prior Year 4
640	640	Available Credit Carryover 11	10	N	348, Line 16d	Enter Amount from Prior Year 4
641	641	Original Credit Amount 12	10	N	348, Line 17b	Enter Amount from Prior Year 3
642	642	Previous Used Amount 12	10	N	348, Line 17c	Enter Amount from Prior Year 3
643	643	Available Credit Carryover 12	10	N	348, Line 17d	Enter Amount from Prior Year 3
	644	Original Credit Amount 13	10	N	348, Line 18b	Enter Amount from Prior Year 2 (Added for TY2016)
	645	Previous Used Amount 13	10	N	348, Line 18c	Enter Amount from Prior Year 2 (Added for TY2016)
	646	Available Credit Carryover 13	10	N	348, Line 18d	Enter Amount from Prior Year 2 (Added for TY2016)
		Total Available Carryover				Add Lines 15d, 16d, 17d
644	647		10	N	348, Line 20	
645	648	Current Year's Total Credit	10	N	348, Line 21	Enter Amount from Part 2, Line 14
646	649	Available Credit Carryover	10	N	348, Line 22	Enter Amount from Part 3, Line 20, column d
647	650	Total Available Credit	10	N	348, Line 23	Add Lines 21 and 22
651		Name of Qualifying Foster Care Charity 1	30	A	352, Line 1a	Added for TY2016
652		Location of Qualifying Foster Care Charity 1	30	A	352, Line 1b	Added for TY2016
653		Amt Contributed 1	10	N	352, Line 1c	Added for TY2016
654		Name of Qualifying Foster Care Charity 2	30	A	352, Line 2a	Added for TY2016
655		Location of Qualifying Foster Care Charity 2	30	A	352, Line 2b	Added for TY2016
656		Amount Contributed 2	10	N	352, Line 2c	Added for TY2016
657		Name of Qualifying Foster Care Charity 3	30	A	352, Line 3a	Added for TY2016
658		Location of Qualifying Foster Care Charity 3	30	A	352, Line 3b	Added for TY2016
659		Amt Contributed 3	10	N	352, Line 3c	Added for TY2016
		Total Qualifying Foster Care Charity				Add amounts in column c of lines 1, 2, and 3 (Added for TY2016)
660			10	N	352, Line 4	
661		Name of Qualifying Charity 4	30	A	352, Line 5a	Added for TY2016
662		Location of Qualifying Charity 4	30	A	352, Line 5b	Added for TY2016
663		Amt Contributed 4	10	N	352, Line 5c	Added for TY2016
664		Name of Qualifying Charity 5	30	A	352, Line 6a	Added for TY2016
665		Location of Qualifying Charity 5	30	A	352, Line 6b	Added for TY2016
666		Amount Contributed 5	10	N	352, Line 6c	Added for TY2016
667		Name of Qualifying Charity 6	30	A	352, Line 7a	Added for TY2016
668		Location of Qualifying Charity 6	30	A	352, Line 7b	Added for TY2016
669		Amount Qualifying Charity Contributed 6	10	N	352, Line 7c	Added for TY2016
		Total Qualifying Charity2				Add amounts in column c of lines 5, 6, and 7 - (Added for TY2016)
670			10	N	352, Line 8	
671		Total Cash Contri Qual Charity	10	N	352, Line 9	Add Line 4 and Line 8 - (Added for TY2016)
		Allowable Charity Credit				Single Taxpayer or Heads of Household Enter \$500 Married Taxpayer Enter \$1000 - (Added for TY2016)
672			10	N	352, Line 10	
673		Current Year's Qualifying Charity Credit	10	N	352, Line 11	Enter smaller of Line 9 or Line 10 - (Added for TY2016)
674		Original Credit Amount 12b	10	N	352, Line 12b	Enter Amount from Prior Year 5 - (Added for TY2016)
675		Previous Used Amount 12c	10	N	352, Line 12c	Enter Amount from Prior Year 5 - (Added for TY2016)
676		Available Credit Carryover 12d	10	N	352, Line 12d	Enter Amount from Prior Year 5 - (Added for TY2016)
677		Original Credit Amount 13b	10	N	352, Line 13b	Enter Amount from Prior Year 4 - (Added for TY2016)
678		Previous Used Amount 13c	10	N	352, Line 13c	Enter Amount from Prior Year 4 - (Added for TY2016)
679		Available Credit Carryover 13d	10	N	352, Line 13d	Enter Amount from Prior Year 4 - (Added for TY2016)
680		Original Credit Amount 14b	10	N	352, Line 14b	Enter Amount from Prior Year 3 - (Added for TY2016)
681		Previous Used Amount 14c	10	N	352, Line 14c	Enter Amount from Prior Year 3 - (Added for TY2016)

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

682	Available Credit Carryover 14d	10	N	352, Line 14d	Enter Amount from Prior Year 3 - (Added for TY2016)
683	Original Credit Amount 15b	10	N	352, Line 15b	Enter Amount from Prior Year 2 - (Added for TY2016)
684	Previous Used Amount 15c	10	N	352, Line 15c	Enter Amount from Prior Year 2 - (Added for TY2016)
685	Available Credit Carryover 15d	10	N	352, Line 15d	Enter Amount from Prior Year 2 - (Added for TY2016)
686	Original Credit Amount 16b	10	N	352, Line 16b	Enter Amount from Prior Year 1 - (Added for TY2016)
687	Previous Used Amount 16c	10	N	352, Line 16c	Enter Amount from Prior Year 1 - (Added for TY2016)
688	Available Credit Carryover 16d	10	N	352, Line 16d	Enter Amount from Prior Year 1 - (Added for TY2016)
689	Total Available Credit Carryover	10	N	352, Line 17	Add Lines 12 through 16 Column d - (Added for TY2016)
690	Current Yr's Credit	10	N	352, Line 18	Added for TY2016
691	Available Carryover	10	N	352, Line 19	Added for TY2016
692	Total Available Credit	10	N	352, Line 20	Added for TY2016
648	693	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

Arizona 140A - Full Year Resident Return - Short						
2D Barcode Record Layout						
2015 FIELD NO	2016 FIELD NO	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
1	1	Header version	2	A		T1
2	2	Software Developer Code	4	N		NACTP assigned code
3	3	Version Number	2	N		01; use 2 digits (leading zero)
4	4	Form Type	6	A		140A
5	5	Form Year	4	N	140A	2016
6	6	Primary First Name	10	A	140A, 1	
7	7	Primary Middle Initial	1	A	140A, 1	
8	8	Primary Last Name	35	A	140A, 1	
9	9	Primary SSN	9	N	140A, 1	No hyphens
10	10	Spouse First Name	10	A	140A, 1	Spouse Name required when MFJ or MFS
11	11	Spouse Middle Initial	1	A	140A, 1	Spouse Name required when MFJ or MFS
12	12	Spouse Last Name	35	A	140A, 1	Spouse Name required when MFJ or MFS
13	13	Spouse SSN	9	N	140A, 1	Spouse Name required when MFJ or MFS; No hyphens
14	14	Address line 1	35	A/N	140A, 2	Address line 1 or % (care of) line or recipient name if TP is deceased
15	15	Address line 2	35	A/N	140A, 2	Address line 2 or Address line if 1 is % or deceased TP
16	16	City	21	A	140A, 3	
17	17	State	2	A	140A, 3	
18	18	Zip Code	9	N	140A, 3	Include zip plus 4 in last 4 digits or zero fill if not available
19	19	Day Phone Number	10	N	140A, 94	
20	20	Married/Joint	1	A	140A, 4	X or null
21	21	Head of Household	1	A	140A, 5	X or null
22	22	Married filing Separate	1	A	140A, 6	X or null
23	23	Single	1	A	140A, 7	X or null
24	24	Age 65 or over	1	N	140A, 8	
25	25	Blind	1	N	140A, 9	
26	26	Dependents	2	N	140A, 10	
27	27	Parents/Ancestors	1	N	140A, 11	
28	28	6 Month Extension	1	A	140A, 82F	X or null
29	29	Dependent Info More Space--Qualifying Dependents	1	A	140A, Line 10CB	X or null
30	30	Dependent 1 First Name	10	A	140A, 10A(A1)	
31	31	Dependent 1 Last Name	10	A	140A, 10A(A2)	
32	32	Dependent 1 SSN	9	N	140A, 10A(B)	No hyphens
33	33	Dependent 1 Relationship	12	A	140A, 10A( C )	
34	34	Dependent 1 Months	2	A	140A, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
35	35	Dependent 1 Name Not Qualifying	1	A	140A, 10A( E )	X or null
36	36	Dependent 1 Name Education	1	A	140A, 10A( F )	X or null
37	37	Dependent 2 First Name	10	A	140A, 10B(A1)	
38	38	Dependent 2 Last Name	10	A	140A, 10B(A2)	
39	39	Dependent 2 SSN	9	N	140A, 10B(B)	No hyphens
40	40	Dependent 2 Relationship	12	A	140A, 10B( C )	
41	41	Dependent 2 Months	2	A	140A, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
42	42	Dependent 2 Name Not Qualifying	1	A	140A, 10B( E )	X or null
43	43	Dependent 2 Name Education	1	A	140A, 10B( F )	X or null
44	44	Dependent 3 First Name	10	A	140A, 10C(A1)	
45	45	Dependent 3 Last Name	10	A	140A, 10C(A2)	
46	46	Dependent 3 SSN	9	N	140A, 10C(B)	No hyphens
47	47	Dependent 3 Relationship	12	A	140A, 10C( C )	
48	48	Dependent 3 Months	2	A	140A, 10C( D )	Valid Values are (0 - 12) & S (Stillborn)
49	49	Dependent 3 Name Not Qualifying	1	A	140A, 10C( E )	X or null
50	50	Dependent 3 Name Education	1	A	140A, 10C( F )	X or null
51	51	Dependent Info More Space--Qualifying Ancestors	1	A	140A, Line 11CB	X or null
52	52	Dependent 1 Qual Anc First Name	10	A	140A, Line 11a(a1)	
53	53	Dependent 1 Qual Anc Last Name	10	A	140A, Line 11a(a2)	
54	54	Dependent 1 Qual Anc SSN	9	N	140A, Line 11a(b)	No hyphens
55	55	Dependent 1 Qual Anc Relationship	12	A	140A, Line 11a(c)	
56	56	Dependent 1 Qual Anc Months	2	A	140A, Line 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
57	57	Dependent 1 Qual Anc Age 65+	1	A	140A, Line 11a(e)	X or null
58	58	Dependent 1 Qual Anc Deceased In Tax Year	1	A	140A, Line 11a(f)	X or null
59	59	Dependent 2 Qual Anc First Name	10	A	140A, Line 11b(a1)	
60	60	Dependent 2 Qual Anc Last Name	10	A	140A, Line 11b(a2)	
61	61	Dependent 2 Qual Anc SSN	9	N	140A, Line 11b(b)	No hyphens
62	62	Dependent 2 Qual Anc Relationship	12	A	140A, Line 11b(c)	
63	63	Dependent 2 Qual Anc Months	2	A	140A, Line 11b(d)	Valid Values are (0 - 12) & S (Stillborn)
64	64	Dependent 2 Qual Anc Age 65+	1	A	140A, Line 11b(e)	X or null
65	65	Dependent 2 Qual Anc Deceased In Tax Year	1	A	140A, Line 11b(f)	X or null
66	66	Dependent 3 Qual Anc First Name	10	A	140A, Line 11c(a1)	
67	67	Dependent 3 Qual Anc Last Name	10	A	140A, Line 11c(a2)	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

68	68	Dependent 3 Qual Anc SSN	9	N	140A, Line 11c(b)	No hyphens
69	69	Dependent 3 Qual Anc Relationship	12	A	140A, Line 11c(c)	
70	70	Dependent 3 Qual Anc Months	2	N	140A, Line 11c(d)	
71	71	Dependent 3 Qual Anc Age 65+	1	A	140A, Line 11c(e)	X or null
72	72	Dependent 3 Qual Anc Deceased In Tax Year	1	A	140A, Line 11c(f)	X or null
73	73	Federal Adjusted Gross	10	N	140A, 12	
74	74	Over 65 Exemption	10	N	140A, 13	
75	75	Blind Exemption	10	N	140A, 14	
76	76	Dependent Exemption	10	N	140A, 15	
77	77	Parent Exemption	10	N	140A, 16	
78	78	Az Adjusted Gross	10	N	140A, 17	subtract Lines 13, 14, 15, and 16 from line 12.
79	79	Std Deduction Amount	10	N	140A, 18	Single, Married Filing Separate = \$5,099 Head of Household and Married Filing Joint = \$10,189
80	80	Personal Exemptions	10	N	140A, 19	
81	81	Az Taxable Income	10	N	140A, 20	
82	82	Computed Tax	10	N	140A, 21	
83	83	Family Income Tax Credit	10	N	140A, 22	
84	84	Balance of Tax	10	N	140A, 23	subtract line 22 from line 21.
85	85	Withholding	10	N	140A, 24	
86	86	Extension Payments	10	N	140A, 25	
87	87	Increased Excise Tax Credit	10	N	140A, 26	Use worksheet to determine amount.
88	88	Property Tax Credit	10	N	140A, 27	
89	89	Total Payments Refundable Credits	10	N	140A, 28	
90	90	Tax Due	10	N	140A, 29	If line 23 is larger than line 28, subtract line 28 from line 23
91	91	Overpayment	10	N	140A, 30	If line 28 is larger than line 23, subtract line 23 from line 28 and enter the amount.
92	92	Total Tax or Refund From Page 1	10	N	140, Line 31	Enter the amount from page 1, line 29 or 30.
93	93	Solutions Teams Assigned To Schools Contrib	10	N	140A, 32	
94	94	Wildlife Contrib	10	N	140A, 33	
95	95	Child Abuse Contrib	10	N	140A, 34	
96	96	Domestic Violence Contrib	10	N	140A, 35	
97	97	Political Contrib	10	N	140A, 36	
98	98	Neighbors Helping Contrib	10	N	140A, 37	
99	99	Special Olympics Contrib	10	N	140A, 38	
100	100	Veterans' Donation Fund	10	N	140A, 39	
101	101	I Didn't Pay Enough Fund	10	N	140A, 40	
102	102	Sustainable State Parks and Road Fund	10	N	140A, 41	
103	103	Americans Elect Party	1	A	140A, 42-1	Removed for 2016
105	103	Democratic Party	1	A	140A, 42-1	"2" or null
104	104	Green Party	1	A	140A, 42-2	"3" or null - Name Change Only
106	105	Libertarian Party	1	A	140A, 42-3	"4" or null
107	106	Republican Party	1	A	140A, 42-4	"5" or null
108	107	Total Contribs	10	N	140A, 43	Add Lines 32 through 42
109	108	Refund Amount	10	N	140A, 44	Subtract Line 43 from Line 31
110	109	Foreign Account	1	A	140A, Box 44A	Y or Null; If "Y", Fields 111-114 should be disabled.
111	110	Dir Dep Routing Nbr	9	N	140A, 98	For direct deposit; direct debit is not supported.
112	111	Dir Dep Account Nbr	17	A/N	140A, 98	For direct deposit; direct debit is not supported.
113	112	Dir Dep Checking	1	A	140A, 98	X or null; direct deposit only
114	113	Dir Dep Savings	1	A	140A, 98	X or null; direct deposit only
115	114	Amount Owed	10	N	140A, 45	Add Lines 31 and 43
116	115	Prior Last Names	20	A	Front Page Line 97	Comma delimited
117	116	Primary Occupation	16	A	140A, pg2	
118	117	Spouse Occupation	16	A	140A, pg2	
119	118	Preparer Name	35	A/N	140A, pg2	
120	119	Preparer Address	35	A/N	140A, pg2	
121	120	Preparer City	21	A	140A, pg2	
122	121	Preparer State	2	A	140A, pg2	
123	122	Preparer Zip Code	9	N	140A, pg2	
124	123	Preparer FEIN	9	N	140A, pg2	No hyphens
125	124	Paid Preparer Phone Number	10	N	140A, pg2	
126	125	Employer ID (1)	9	N	W-2 (1st Wage Statement)	
127	126	Employee SSN (1)	9	N	W-2 (1st Wage Statement)	
128	127	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
129	128	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
130	129	Employer ID (2)	9	N	W-2 (2nd Wage Statement)	
131	130	Employees SSN (2)	9	N	W-2 (2nd Wage Statement)	
132	131	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
133	132	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
134	133	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
135	134	Employees SSN (3)	9	N	W-2 (3rd Wage Statement)	
136	135	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
137	136	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

138	137	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
139	138	Employees SSN (4)	9	N	W-2 (4th Wage Statement)	
140	139	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
141	140	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
142	141	Payer's ID (1)	9	N	1099-R (1st Statement)	
143	142	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
144	143	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
145	144	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
146	145	1099 Az WH (1)	10	N	1099-R (1st Statement)	
147	146	Payer's ID (2)	9	N	1099-R (2nd Statement)	
148	147	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
149	148	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
150	149	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
151	150	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
152	151	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

Arizona 140NR - Non-Resident Return						
2D Barcode Record Layout						
2015 FIELD NO	2016 FIELD NO	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
1	1	Header version	2	A		T1
2	2	Software Developer Code	4	N		NACTP assigned code
3	3	Version Number	2	N		01; use 2 digits (leading zero)
4	4	Form Type	6	A		140NR
5	5	Form Year	4	N	140NR, TOP	2016
6	6	Tax Year Ending Date	8	A	140NR, 66F	MMDDCCYY (Enter only if fiscal year filer)
7	7	Primary First Name	10	A	140NR, 1	
8	8	Primary Middle Initial	1	A	140NR, 1	
9	9	Primary Last Name	35	A	140NR, 1	
10	10	Primary SSN	9	N	140NR, 1	No hyphens
11	11	Spouse First Name	10	A	140NR, 1	Spouse Name required when MFJ or MFS
12	12	Spouse Middle Initial	1	A	140NR, 1	Spouse Name required when MFJ or MFS
13	13	Spouse Last Name	35	A	140NR, 1	Spouse Name required when MFJ or MFS
14	14	Spouse SSN	9	N	140NR, 1	Spouse Name required when MFJ or MFS; No
15	15	Address line 1	35	A/N	140NR, 2	Address line 1 or % (care of) line or recipient
16	16	Address line 2	35	A/N	140NR, 2	Address line 2 or Address line if 1 is % or
17	17	City	21	A	140NR, 3	
18	18	State	2	A	140NR, 3	
19	19	Zip Code	9	N	140NR, 3	Include zip plus 4 in last 4 digits or zero fill if not
20	20	Daytime Number	10	N	140NR, 94	
21	21	Married/Joint	1	A	140NR, 4	X or null
22	22	Head of Household	1	A	140NR, 5	X or null
23	23	Married filing Separate	1	A	140NR, 6	X or null
24	24	Single	1	A	140NR, 7	X or null
25	25	Age 65 or over	1	N	140NR, 8	
26	26	Blind	1	N	140NR, 9	
27	27	Dependents	2	N	140NR, 10	
28	28	6 Month Extension	1	A	140NR, 82F	
29	29	Res Status Non	1	A	140NR, 11	X or null
30	30	Res Status Non Active Military	1	A	140NR, 12	X or null
31	31	Res Status Composite	1	A	140NR, 13	X or null
32	32	Dependent Information Additional Space	1	A	140NR, Box 10	X or null
33	33	Dependent 1 First Name	10	A	140NR, 10A(A1)	
34	34	Dependent 1 Last Name	10	A	140NR, 10A(A2)	
35	35	Dependent 1 SSN	9	N	140NR, 10A(B)	No hyphens
36	36	Dependent 1 Relationship	12	A	140NR, 10A( C )	
37	37	Dependent 1 Months	2	A	140NR, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
38	38	Dependent 1 Name Not Qualifying	1	A	140NR, 10A( E )	X or null
39	39	Dependent 1 Name Education	1	A	140NR, 10A( F )	X or null
40	40	Dependent 2 First Name	10	A	140NR, 10B(A1)	
41	41	Dependent 2 Last Name	10	A	140NR, 10B(A2)	
42	42	Dependent 2 SSN	9	N	140NR, 10B(B)	No hyphens
43	43	Dependent 2 Relationship	12	A	140NR, 10B( C )	
44	44	Dependent 2 Months	2	A	140NR, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
45	45	Dependent 2 Name Not Qualifying	1	A	140NR, 10B( E )	X or null
46	46	Dependent 2 Name Education	1	A	140NR, 10B( F )	X or null
47	47	Dependent 3 First Name	10	A	140NR, 10C(A1)	
48	48	Dependent 3 Last Name	10	A	140NR, 10C(A2)	
49	49	Dependent 3 SSN	9	N	140NR, 10C(B)	No hyphens
50	50	Dependent 3 Relationship	12	A	140NR, 10C( C )	
51	51	Dependent 3 Months	2	A	140NR, 10C( D )	Valid Values are (0 - 12) & S (Stillborn)
52	52	Dependent 3 Name Not Qualifying	1	A	140NR, 10C( E )	X or null
53	53	Dependent 3 Name Education	1	A	140NR, 10C( F )	X or null
54	54	Dependent 4 First Name	10	A	140NR, 10D(A1)	
55	55	Dependent 4 Last Name	10	A	140NR, 10D(A2)	
56	56	Dependent 4 SSN	9	N	140NR, 10D(B)	No hyphens
57	57	Dependent 4 Relationship	12	A	140NR, 10D( C )	
58	58	Dependent 4 Months	2	A	140NR, 10D(D)	Valid Values are (0 - 12) & S (Stillborn)
59	59	Dependent 4 Name Not Qualifying	1	A	140NR, 10D( E )	X or null
60	60	Dependent 4 Name Education	1	A	140NR, 10D( F )	X or null
61	61	Married/spouse of active mil. qual. for MSRR Act	1	A	140NR, Box 14	value "1" if checked; "0" or null if blank
62	62	Wages, Salaries, etc. Fed	10	N	140NR, 15 Fed	
63	63	Wages, Salaries, etc. AZ	10	N	140NR, 15 AZ	
64	64	Interest Fed	10	N	140NR, 16 Fed	
65	65	Interest AZ	10	N	140NR, 16 AZ	
66	66	Dividends Fed	10	N	140NR, 17 Fed	
67	67	Dividends AZ	10	N	140NR, 17 AZ	
68	68	AZ Inc Tax Ref Fed	10	N	140NR, 18 Fed	
69	69	AZ Inc Tax Ref AZ	10	N	140NR, 18 AZ	
70	70	Business Inc (Sch. C) Fed	10	N	140NR, 19 Fed	
71	71	Business Inc (Sch. C) AZ	10	N	140NR, 19 AZ	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

72	72	Gain/Loss (Sch. D) Fed	10	N	140NR, 20 Fed	
73	73	Gain/Loss (Sch. D) AZ	10	N	140NR, 20 AZ	
74	74	Rents etc (Sch. E) Fed	10	N	140NR, 21 Fed	
75	75	Rents etc (Sch. E) AZ	10	N	140NR, 21 AZ	
76	76	Other Fed Inc Fed	10	N	140NR, 22 Fed	
77	77	Other Fed Inc AZ	10	N	140NR, 22 AZ	
78	78	Total Income Fed	10	N	140NR, 23 Fed	add lines 15-22 in FEDERAL column
79	79	Total Income AZ	10	N	140NR, 23 AZ	add lines 15-22 in ARIZONA column
80	80	Other Fed Adjust Fed	10	N	140NR, 24 Fed	
81	81	Other Fed Adjust AZ	10	N	140NR, 24 AZ	
82	82	Fed Adjusted Gross	10	N	140NR, 25	Subtract lines 24 from line 23 in FEDERAL
83	83	Arizona Income	10	N	140NR, 26	Subtract lines 24 from line 23 in ARIZONA
84	84	Arizona Income Ratio	5	D(4,1)	140NR, 27	Divide line 26 by line 25. Enter 1.000 as 100 %; .500 as 50%; .806 as 80.6%
85	85	Total Depreciation	10	N	140NR, 28	
86	86	Partnership Income Adjustment Add	10	N	140NR, 29	Name Change Only
87	87	Other Additions	10	N	140NR, 30	
88	88	Total Additions	10	N	140NR, 31	Add lines 26, 28, 29, and 30
89	89	Arizona Sourced net capital Gain/Loss	10	N	140NR, 32	
90	90	Total Net Short-Term Capital Gain/Loss	10	N	140NR, 33	
91	91	Total Net Long-Term Capital Gain/Loss	10	N	140NR, 34	
92	92	Net Long-Term Capital Gain From Assets	10	N	140NR, 35	
93	93	Capital Gain Allowable Subt. Calculation	10	N	140NR, 36	Multiply line 35 by 25% (.25)
94	94	Net Capital Gain From Invest Small Buss	10	N	140NR, 37	
95	95	Recalculated AZ Depreciation	10	N	140NR, 38	
96	96	IRC 179 expense in excess of allowable amount	10	N	140NR, 39	
97	97	Partnership Income Adjustment Sub	10	N	140NR, 40	Name Change Only
98	98	Total Subtractions	10	N	140NR, 41	Subtract lines 35 through 40 from line 31
99	99	Total From Line 41	10	N	140NR, 42	
100	100	Int. Savings Bond	10	N	140NR, 43	
101	101	AZ Lottery Winnings	10	N	140NR, 44	
102	102	Agric Crops Contrib	10	N	140NR, 45	
103	103	Other Subtractions	10	N	140NR, 46	
104	104	Age 65 Exempt Amt	10	N	140NR, 47	
105	105	Blind Exempt Amt	10	N	140NR, 48	
106	106	Dep Exempt Amount	10	N	140NR, 49	
107	107	Total Exemptions	10	N	140NR, 50	Add lines 47, 48, and 49
108	108	AZ Exempt Portion	10	N	140NR, 51	Multiply line 50 by the Arizona Income Ratio on line 27
109	109	AZ Adjusted Gross	10	N	140NR, 52	Subtract lines 43 through 46 and 51 from line 42
110	110	Itemized Deductions	1	A	140NR, 53-I	X or null
111	111	Standard Deductions	1	A	140NR, 53-S	X or null
112	112	Deduction Amount	10	N	140NR, 53	ITEMIZED OR PRORATED IF NOT MILITARY Single, Married Filing Separate = \$5,099 Married Filing Jointly, Head of Household = \$10,189
113	113	Personal Exemptions	10	N	140NR, 54	PRORATED IF NOT MILITARY
114	114	Az Taxable Income	10	N	140NR, 55	
115	115	Computed Tax	10	N	140NR, 56	
116	116	Tax from Recapture Credits	10	N	140NR, 57	
117	117	Subtotal of tax	10	N	140NR, 58	
118	118	Credits from Arizona Credit Forms	10	N	140NR, 59	
119	119	Balance of Tax	10	N	140NR, 60	subtract line 59 from line 58
120	120	Withholding	10	N	140NR, 61	
121	121	Estimated Payments	10	N	140NR, 62a	
122	122	Claim of Right	10	N	140NR, 62b	Added for TY2016
123	123	Total Estimated Payments	10	N	140NR, 62c	Added for TY2016
122	124	Extension Payments	10	N	140NR, 63	
123	125	Refundable Credit Form 308-I	1	A	140NR, 64-1	value "1" if checked; "0" or null if blank
124	126	Refundable Credit Form 342	1	A	140NR, 64-2	value "2" if checked; "0" or null if blank
125	127	Refundable Credit Form 349	1	A	140NR, 64-3	value "3" if checked; "0" or null if blank
126	128	Other Refundable Credits	10	N	140NR, 64	
127	129	Total Payments	10	N	140NR, 65	
128	130	Tax Due	10	N	140NR, 66	
129	131	Overpayment	10	N	140NR, 67	
130	132	Next Year's Est Pmt	10	N	140NR, 68	Amount of Line 67 to be Applied to 2017 Estimated Tax
131	133	Bal of Overpayment	10	N	140NR, 69	
132	134	Solutions Teams Assigned To Schools Contrib	10	N	140NR, 70	
133	135	Wildlife Contrib	10	N	140NR, 71	
134	136	Child Abuse Contrib	10	N	140NR, 72	
135	137	Domestic Violence Contrib	10	N	140NR, 73	
136	138	Political Contrib	10	N	140NR, 74	
137	139	Neighbors Helping Contrib	10	N	140NR, 75	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

138	140	Special Olympics Contrib	10	N	140NR, 76	
139	141	Veterans' Donation Fund	10	N	140NR, 77	
140	142	I Didn't Pay Enough Fund	10	N	140NR, 78	
141	143	Sustainable State Parks and Road Fund	10	N	140NR, 79	
142		Americans Elect Party	1	A	140NR, 80-1	Removed for TY2016
144	144	Democratic Party	1	A	140NR, 80-1	"2" or null
143	145	Green Party	1	A	140NR, 80-2	"3" or null - Name Change Only
145	146	Libertarian Party	1	A	140NR, 80-3	"4" or null
146	147	Republican Party	1	A	140NR, 80-4	"5" or null
147	148	Est Pmt Pen/MSA/AZLTHSA Pen	10	N	140NR, 81F	
148	149	Annualized Other	1	A	140NR, 82-1	Y or null
149	150	Farmer/Fisherman	1	A	140NR, 82-2	Y or null
150	151	Form 221 Attached	1	A	140NR, 82-3	Y or null
151	152	AZLTHSA Penalty	1	A	140NR, 82-4	Y or null
152	153	Tot Contrib/Penalty	10	N	140NR, 83	Add Lines 70 through 79, and 81
153	154	Refund Amount	10	N	140NR, 84	Subtract Line 83 from Line 69
154	155	Foreign Account	1	A	140NR Line 84A	Y or Null; If "Y", Fields 155-158 should be disabled.
155	156	Dir Dep Routing Nbr	9	N	140NR, 98	For direct deposit; direct debit is not supported.
156	157	Dir Dep Account Nbr	17	A/N	140NR, 98	For direct deposit; direct debit is not supported.
157	158	Dir Dep Checking	1	A	140NR, 98	X or null; direct deposit only
158	159	Dir Dep Savings	1	A	140NR, 98	X or null; direct deposit only
159	160	Amount Owed	10	N	140NR, 85	Add Lines 66 and Line 83
160	161	Prior Last Names	20	A	Front Page, 97	Comma delimited
161	162	Primary Occupation	16	A	140NR.pg2	
162	163	Spouse Occupation	16	A	140NR.pg2	
163	164	Preparer Name	35	A/N	140NR.pg2	
164	165	Preparer FEIN	9	N	140NR.pg2	No hyphens
165	166	Preparer Address	35	A/N	140NR.pg2	
166	167	Preparer City	21	A	140NR.pg2	
167	168	Preparer State	2	A	140NR.pg2	
168	169	Preparer Zip Code	9	N	140NR.pg2	
169	170	Paid Preparer Phone Number	10	N	140NR.pg2	
170	171	Med/Dent Expenses	10	N	AZSchA(NR) 1	
171	172	MSA Distribut Used	10	N	AZSchA(NR) 2	
172	173	Fed Med Deductions	10	N	AZSchA(NR) 3	
173	174	Total Med Deducts	10	N	AZSchA(NR) 4	
174	175	Medical Add Adjust	10	N	AZSchA(NR) 5	
175	176	Medical Subt Adjust	10	N	AZSchA(NR) 6	
176	177	Fed Credit Int Paid	10	N	AZSchA(NR) 7	
177	178	Wagering Loss Fed	10	N	AZSchA(NR) 8	
178	179	Gambling Winnings	10	N	AZSchA(NR) 9	
179	180	AZ Lottery Subt	10	N	AZSchA(NR) 10	
180	181	Max Gamble Loss Deduct	10	N	AZSchA(NR) 11	
181	182	Gamble Subt Adjust	10	N	AZSchA(NR) 12	
182	183	Contribution Adjust	10	N	AZSchA(NR) 13	
183	184	Sum Add Adjust	10	N	AZSchA(NR) 14	
184	185	Sum Subt Adjust	10	N	AZSchA(NR) 15	
185	186	Tot Fed Item Deduct	10	N	AZSchA(NR) 16	
186	187	Sum Az Item Deduct	10	N	AZSchA(NR) 20	
187	188	Az Itemized Deductions	10	N	AZSchA(NR) 22	
188	189	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
189	190	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
190	191	Medical Allowance	10	N	FedSchA(2-D) 3	
191	192	Total Medical/Dental	10	N	FedSchA(2-D) 4	
192	193	State and Local Taxes	10	N	FedSchA(2-D) 5	
193	194	Real Estate Taxes	10	N	FedSchA(2-D) 6	
194	195	Personal Property Taxes	10	N	FedSchA(2-D) 7	
195	196	Other Taxes	10	N	FedSchA(2-D) 8	
196	197	Total Other Taxes	10	N	FedSchA(2-D) 9	
197	198	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
198	199	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
199	200	Deductible Points	10	N	FedSchA(2-D) 12	
200	201	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
201	202	Investment Interest	10	N	FedSchA(2-D) 14	
202	203	Total Interest	10	N	FedSchA(2-D) 15	
203	204	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
204	205	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	
205	206	Carryover Prior Year	10	N	FedSchA(2-D) 18	
206	207	Total Contrib	10	N	FedSchA(2-D) 19	
207	208	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
208	209	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
209	210	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
210	211	Tot Other Exp	10	N	FedSchA(2-D) 23	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

211	212	Gross Misc Ded	10	N	FedSchA(2-D) 24
212	213	Miscellaneous Allow	10	N	FedSchA(2-D) 26
213	214	Total Misc Deduct	10	N	FedSchA(2-D) 27
214	215	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28
215	216	Total Item Deduct	10	N	FedSchA(2-D) 29
216	217	Employer ID (1)	9	N	W-2 (1st Wage Statement)
217	218	Employee SSN (1)	9	N	W-2 (1st Wage Statement)
218	219	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)
219	220	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)
220	221	Employer ID (2)	9	N	W-2 (2nd Wage Statement)
221	222	Employee SSN (2)	9	N	W-2 (2nd Wage Statement)
222	223	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)
223	224	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)
224	225	Employer ID (3)	9	N	W-2 (3rd Wage Statement)
225	226	Employee SSN (3)	9	N	W-2 (3rd Wage Statement)
226	227	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)
227	228	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)
228	229	Employer ID (4)	9	N	W-2 (4th Wage Statement)
229	230	Employee SSN (4)	9	N	W-2 (4th Wage Statement)
230	231	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)
231	232	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)
232	233	Payer's ID (1)	9	N	1099-R (1st Statement)
233	234	Recipient's SSN (1)	9	N	1099-R (1st Statement)
234	235	1099 Gross Amt (1)	10	N	1099-R (1st Statement)
235	236	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)
236	237	1099 Az WH (1)	10	N	1099-R (1st Statement)
237	238	Payer's ID (2)	9	N	1099-R (2nd Statement)
238	239	Recipient's SSN (2)	9	N	1099-R (2nd Statement)
239	240	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)
240	241	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)
241	242	1099 Az WH (2)	10	N	1099-R (2nd Statement)
242	243	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)
243	244	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)
244	245	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)
245	246	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)
246	247	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)
247	248	Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)
248	249	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)
249	250	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)
250	251	Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)
251	252	Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)
252	253	Increased Research Act Ind Credit a	10	N	301, Line 5a (Form 308-l)
253	254	Increased Research Act Ind Credit b	10	N	301, Line 5b (Form 308-l)
254	255	Increased Research Act Ind Credit c	10	N	301, Line 5c (Form 308-l)
255	256	Tax Paid Other State Cntry Credit a	10	N	301, Line 6a (Form 309)
256	257	Tax Paid Other State Cntry Credit c	10	N	301, Line 6c (Form 309)
257	258	Solar Energy Devices Credit a	10	N	301, Line 7a (Form 310)
258	259	Solar Energy Devices Credit b	10	N	301, Line 7b (Form 310)
259	260	Solar Energy Devices Credit c	10	N	301, Line 7c (Form 310)
260	261	Agri Water Conserv Sys Credit a	10	N	301, Line 8a (Form 312)
261	262	Agri Water Conserv Sys Credit b	10	N	301, Line 8b (Form 312)
262	263	Agri Water Conserv Sys Credit c	10	N	301, Line 8c (Form 312)
263	264	Polution Control Credit a	10	N	301, Line 9a (Form 315)
264	265	Polution Control Credit b	10	N	301, Line 9b (Form 315)
265	266	Polution Control Credit c	10	N	301, Line 9c (Form 315)
266	267	Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 10a (Form 319)
267	268	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 10b (Form 319)
268	269	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 10c (Form 319)
269	270	Employ TANF Recipients Credit a	10	N	301, Line 11a (Form 320)
270	271	Employ TANF Recipients Credit b	10	N	301, Line 11b (Form 320)
271	272	Employ TANF Recipients Credit c	10	N	301, Line 11c (Form 320)
272	273	Contrib Qual Chart Orgns Credit a	10	N	301, Line 12a (Form 321)
273	274	Contrib Qual Chart Orgns Credit b	10	N	301, Line 12b (Form 321)
274	275	Contrib Qual Chart Orgns Credit c	10	N	301, Line 12c (Form 321)
275	276	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 13a (Form 322)
276	277	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 13b (Form 322)
277	278	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 13c (Form 322)
278	279	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 14a (Form 323)
279	280	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 14b (Form 323)
280	281	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 14c (Form 323)
281	282	Agri Pol Cntrl Equip Credit a	10	N	301, Line 15a (Form 325)
282	283	Agri Pol Cntrl Equip Credit b	10	N	301, Line 15b (Form 325)
283	284	Agri Pol Cntrl Equip Credit c	10	N	301, Line 15c (Form 325)
284	285	Donation School Site Credit a	10	N	301, Line 16a (Form 331)
285	286	Donation School Site Credit b	10	N	301, Line 16b (Form 331)
286	287	Donation School Site Credit c	10	N	301, Line 16c (Form 331)

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

287	288	Healthy Forest Enterprises Credit a	10	N	301, Line 17a (Form 332)	
288	289	Healthy Forest Enterprises Credit b	10	N	301, Line 17b (Form 332)	
289	290	Healthy Forest Enterprises Credit c	10	N	301, Line 17c (Form 332)	
290	291	Employ Natl Guard Members Credit a	10	N	301, Line 18a (Form 333)	
291	292	Employ Natl Guard Members Credit b	10	N	301, Line 18b (Form 333)	
292	293	Employ Natl Guard Members Credit c	10	N	301, Line 18c (Form 333)	
293		Motion Picture Credit b	10	N	301, Line 19b (Form 334)	Removed for TY2016
294		Motion Picture Credit c	10	N	301, Line 19c (Form 334)	Removed for TY2016
295	294	Business Contrib School Tuition Org a	10	N	301, Line 19a (Form 335-I)	
	295	Business Contrib School Tuition Org b	10	N	301, Line 19b (Form 335-I)	Added for TY2016
296	296	Business Contrib School Tuition Org c	10	N	301, Line 19c (Form 335-I)	
297	297	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 20a (Form 336)	
298	298	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 20b (Form 336)	
299	299	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 20c (Form 336)	
300	300	Invest Qual Small Bus Credit a	10	N	301, Line 21a (Form 338)	
301	301	Invest Qual Small Bus Credit b	10	N	301, Line 21b (Form 338)	
302	302	Invest Qual Small Bus Credit c	10	N	301, Line 21c (Form 338)	
303	303	Water Conserv Sys Credit b	10	N	301, Line 22b (Form 339)	
304	304	Water Conserv Sys Credit c	10	N	301, Line 22c (Form 339)	
305	305	Military Fam Relf Fnd Credit a	10	N	301, Line 23a (Form 340)	
306	306	Military Fam Relf Fnd Credit c	10	N	301, Line 23c (Form 340)	
307	307	Business Contrib School Tuition Disabled a	10	N	301, Line 24a (Form 341-I)	
	308	Business Contrib School Tuition Disabled b	10	N	301, Line 24b (Form 341-I)	Added for TY2016
308	309	Business Contrib School Tuition Disabled c	10	N	301, Line 24c (Form 341-I)	
309	310	Renew Energy Prod Tax Credit a	10	N	301, Line 25a (Form 343)	
310	311	Renew Energy Prod Tax Credit b	10	N	301, Line 25b (Form 343)	
311	312	Renew Energy Prod Tax Credit c	10	N	301, Line 25c (Form 343)	
312	313	Solar Liquid Fuel Credit a	10	N	301, Line 26a (Form 344)	
313	314	Solar Liquid Fuel Credit c	10	N	301, Line 26c (Form 344)	
314	315	New Employment Credit a	10	N	301, Line 27a (Form 345)	
315	316	New Employment Credit b	10	N	301, Line 27b (Form 345)	
316	317	New Employment Credit c	10	N	301, Line 27c (Form 345)	
317	318	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 28a (Form 346)	
318	319	Incres Resrch Act Basic Resrch Credit b	10	N	301, Line 28b (Form 346)	
319	320	Incres Resrch Act Basic Resrch Credit c	10	N	301, Line 28c (Form 346)	
320	321	Qual Hlth Ins Plan Credit b	10	N	301, Line 29b (Form 347)	
321	322	Qual Hlth Ins Plan Credit c	10	N	301, Line 29c (Form 347)	
322	323	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 30a (Form 348)	
323	324	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 30b (Form 348)	
324	325	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 30c (Form 348)	
325	326	Renew Energy Invest Prod Slf Consum Credit a	10	N	301, Line 31a (Form 351)	
326	327	Renew Energy Invest Prod Slf Consum Credit b	10	N	301, Line 31b (Form 351)	
327	328	Renew Energy Invest Prod Slf Consum Credit c	10	N	301, Line 31c (Form 351)	
	329	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 32a (Form 352)	Added for TY2016
	330	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 32c (Form 352)	Added for TY2016
328	331	Total Available Nonrefundable Tax Credits	10	N	301, Line 33	Add Lines 1 through 32 Column c Only
329	332	Total AZ Tax	10	N	301, Line 34	Tax From F140 L46 or F140PY L59 or F140NR
330	333	Tax Recap Environ Tech Fac Credit	10	N	301, Line 35	From AZ Credit Form 305 Part 5 Line 23
		Tax Recap Credits Hlthy Forest Entrs	10	N	301, Line 36	From AZ Credit Form 332 Part 11 Line 53 and Part 12 Line 59
331	334					
332	335	Tax Recap Credits Renew Engy Ind	10	N	301, Line 37c	From AZ Credit Form 342 Part 5 Line 17
333	336	Tax Recap Credits Qual Facs	10	N	301, Line 38c	From AZ Credit Form 349 Part 5 Line 17
		Tax Recap Crdts Renew Engy Invest Prod Slf Cons	10	N	301, Line 39	From AZ Credit Form 351 Part 5 Line 25c
334	337					
335	338	Total Recapture of Credits	10	N	301, Line 40	Add Lines 35 through 39 Enter Here and on F140 L47, F140PY L59, F140NR L57, F140X
336	339	Subtotal Tax Credits and Recap Credits	10	N	301, Line 41	Add Lines 34 and 40
337	340	Family Income Tax Credit	10	N	301, Line 42	From F140 L49 or F140PY L61 or F140X L37
338	341	Total Tax Credits and Recap Credits	10	N	301, Line 43	Subtract Lines 42 from Line 41. If less than Zero
339	342	Enterprise Zone Credit Used	10	N	301, Line 44 (Form 304)	
340	343	Environ Tech Fac Credit Used	10	N	301, Line 45 (Form 305)	
341	344	Military Reuse Zone Credit Used	10	N	301, Line 46 (Form 306)	
342	345	Recycling Equipment Credit Used	10	N	301, Line 47 (Form 307)	
343	346	Increased Research Act Indiv Credit Used	10	N	301, Line 48 (Form 308-I)	
344	347	Tax Paid Other State Ctry Credit Used	10	N	301, Line 49 (Form 309)	
345	348	Solar Energy Devices Credit Used	10	N	301, Line 50 (Form 310)	
346	349	Agri Water Conserv Sys Credit Used	10	N	301, Line 51 (Form 312)	
347	350	Polution Control Credit Used	10	N	301, Line 52 (Form 315)	
348	351	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 53 (Form 319)	
349	352	Employ TANF Recipients Credit Used	10	N	301, Line 54 (Form 320)	
350	353	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 55 (Form 321)	
351	354	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 56 (Form 322)	
352	355	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 57 (Form 323)	
353	356	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 58 (Form 325)	
354	357	Donation School Site Credit Used	10	N	301, Line 59 (Form 331)	
355	358	Healthy Forest Enterprises Credit Used	10	N	301, Line 60 (Form 332)	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

356	359	Employ Natl Guard Members Credit Used	10	N	301, Line 61 (Form 333)	
357		Motion Picture Credit Used	10	N	301, Line 62 (Form 334)	Removed for TY2016
358	360	Business Contrib School Tuition Org Used	10	N	301, Line 62 (Form 335-I)	
359	361	Solar Energy Devices Comm Indus Used	10	N	301, Line 63 (Form 336)	
360	362	Invest Qual Small Bus Credit Used	10	N	301, Line 64 (Form 338)	
361	363	Water Conserv Sys Credit Used	10	N	301, Line 65 (Form 339)	
362	364	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 66 (Form 340)	
363	365	Business Contrib School Tuition Disabled Used	10	N	301, Line 67 (Form 341-I)	
364	366	Renew Energy Prod Tax Credit Used	10	N	301, Line 68 (Form 343)	
365	367	Solar Liquid Fuel Credit Used	10	N	301, Line 69 (Form 344)	
366	368	New Employment Credit Used	10	N	301, Line 70 (Form 345)	
		Incres Resrch Act Basic Resrch Credit Used	10	N	301, Line 71 (Form 346)	
367	369					
368	370	Qual Hlth Ins Plans Credit Used	10	N	301, Line 72 (Form 347)	
369	371	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 73 (Form 348)	
370	372	Renew Energy Invest Prod Sif Consum Credit Used	10	N	301, Line 74 (Form 351)	
371	373	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 75 (Form 352)	Added for TY2016
		Total Nonrefundable Tax Credits Used	10	N	301, Line 76	Add Lines 44 through 75. Total Cannot be more than 43. Enter this amount on Form 140 L50, 140PY L62, 140NR L59, or 104X L38
372	374					
373	375	Description of Income Items a	30	A	309, Line 1a	
374	376	Description of Income Items b	30	A	309, Line 1b	
375	377	Description of Income Items c	30	A	309, Line 1c	
		Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
376	379	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
377	380	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
378	381	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
379	382	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
380	383	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
381	384	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
382	385	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
383	386	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
384	387	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
		Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
385	388					
		Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
386	389					
387	390	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
388	391	AZ Tax Liable Less Credits	10	N	309, Line 7	
389	392	Amt Part1 Line6	10	N	309, Line 8	
		Amt AZ Income Tax Imposed	10	N	309, Line 9	
390	393					
		Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10	Divide Line 8 by Line 9 (Cannot be greater than 1.000)
391	394					
392	395	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
393	396	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
394	397	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
395	398	Tot Income Taxable By Other	10	N	309, Line 14	
		Pct Income Taxable by Other	6	D (4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
396	399					
397	400	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
398	401	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
399	402	Description of Income Items a	30	A	309, Line 1a (2)	
400	403	Description of Income Items b	30	A	309, Line 1b (2)	
401	404	Description of Income Items c	30	A	309, Line 1c (2)	
402	405	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
403	406	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
404	407	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
405	408	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
406	409	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
407	410	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
408	411	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
409	412	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
410	413	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
411	414	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
412	415	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
413	416	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
414	417	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
415	418	AZ Tax Liable Less Credits	10	N	309, Line 7 (2)	
416	419	Amt Part1 Line6	10	N	309, Line 8 (2)	
417	420	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
		Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10 (2)	Divide Line 8 by Line 9 (Cannot be greater than 1.000)
418	421					
419	422	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
420	423	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
421	424	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

422	425	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
		Pct Income Taxable by Other	6	D (4,3)	309, Line 15 (2)	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
423	426					
424	427	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
425	428	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
426	429	Address of Solar Energy Device	35	A/N	310, Line 1a	
427	430	City of Solar Energy Device	21	A	310, Line 1b	
428	431	State of Solar Energy Device	2	A	310, Line 1c	
429	432	Zip Code of Solar Energy Device	9	N	310, Line 1d	Include zip plus 4 in last 4 digits or zero fill if not available
430	433	Cost of Solar Energy Device	10	N	310, Line 2	
		Percentage of Cost Solar Energy Device				AZ Credit Form 310 Multiply Line 2 by .25 (25%)
431	434		10	N	310, Line 3	
432	435	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
433	436	Amt Credit Prior Years	10	N	310, Line 5	
434	437	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
435	438	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
436	439	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
437	440	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
438	441	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
439	442	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
440	443	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
441	444	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
442	445	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
443	446	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
444	447	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
445	448	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
446	449	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
447	450	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
448	451	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
449	452	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
450	453	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
451	454	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
452	455	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
453	456	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
454	457	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
455	458	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
456	459	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
457	460	Name of Qualifying Charity 1	30	A	321, Line 1a	
458	461	Location of Qualifying Charity 1	30	A	321, Line 1b	
459	462	Amt Contributed 1	10	N	321, Line 1c	
460	463	Name of Qualifying Charity 2	30	A	321, Line 2a	
461	464	Location of Qualifying Charity 2	30	A	321, Line 2b	
462	465	Amount Contributed 2	10	N	321, Line 2c	
463	466	Name of Qualifying Charity 3	30	A	321, Line 3a	
464	467	Location of Qualifying Charity 3	30	A	321, Line 3b	
465	468	Amount Qualifying Charity Contributed 3	10	N	321, Line 3c	
466	469	Total Qualifying Charity	10	N	321, Line 4	Add amounts in column c of lines 1, 2, and 3 Also add amount from separate schedule
469		Name of Qualifying Foster Care Charity 1	30	A	321, Line 4aa	Removed for TY2016
470		Location of Qualifying Foster Care Charity 1	30	A	321, Line 4ab	Removed for TY2016
471		Amt Contributed 1	10	N	321, Line 4ac	Removed for TY2016
472		Name of Qualifying Foster Care Charity 2	30	A	321, Line 4ba	Removed for TY2016
473		Location of Qualifying Foster Care Charity 2	30	A	321, Line 4bb	Removed for TY2016
474		Amount Contributed 2	10	N	321, Line 4bc	Removed for TY2016
475		Name of Qualifying Foster Care Charity 3	30	A	321, Line 4ca	Removed for TY2016
476		Location of Qualifying Foster Care Charity 3	30	A	321, Line 4cb	Removed for TY2016
477		Amount Qualifying Foster Care Charity Contributed 3	10	N	321, Line 4cc	Removed for TY2016
478		Total Qualifying Foster Care Charity	10	N	321, Line 4d	Removed for TY2016
479		Total Current Year Qualify Charity Credit	10	N	321, Line 5	Removed for TY2016
480		Subtotal Charity Contributions	10	N	321, Line 6	Removed for TY2016
481		Subtotal Allowable Charity Contributions	10	N	321, Line 7	Removed for TY2016
482		Current Year's Qualifying Combined Charity Credit	10	N	321, Line 8	Removed for TY2016
	470		30	A	321, Line 5a	Added for TY2016
	471	Location of Qualifying Charity 4	30	A	321, Line 5b	Added for TY2016
	472	Amt Contributed 4	10	N	321, Line 5c	Added for TY2016
	473	Name of Qualifying Charity 5	30	A	321, Line 6a	Added for TY2016
	474	Location of Qualifying Charity 5	30	A	321, Line 6b	Added for TY2016
	475	Amount Contributed 5	10	N	321, Line 6c	Added for TY2016
	476	Name of Qualifying Charity 6	30	A	321, Line 7a	Added for TY2016
	477	Location of Qualifying Charity 6	30	A	321, Line 7b	Added for TY2016
	478	Amount Qualifying Charity Contributed 6	10	N	321, Line 7c	Added for TY2016
		Total Qualifying Charity2				Add amounts in column c of lines 5, 6, and 7 (Added for TY2016)
	479		10	N	321, Line 8	Also add amount from separate schedule
	480	Total Cash Contri Qual Charity	10	N	321, Line 9	AZ Credit Form 321 Add Line 4 and Line 8 (Added for TY2016)

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

		Allowable Charity Credit				AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$400 Married Taxpayer Enter \$800
467	481		10	N	321, Line 10	
468	482	Current Year's Qualifying Charity Credit	10	N	321, Line 11	Enter smaller of Line 9 or Line 10
483	483	Original Credit Amount 12b	10	N	321, Line 12b	Enter Amount from Prior Year 5
484	484	Previous Used Amount 12c	10	N	321, Line 12c	Enter Amount from Prior Year 5
485	485	Available Credit Carryover 12d	10	N	321, Line 12d	Enter Amount from Prior Year 5
486	486	Original Credit Amount 13b	10	N	321, Line 13b	Enter Amount from Prior Year 4
487	487	Previous Used Amount 13c	10	N	321, Line 13c	Enter Amount from Prior Year 4
488	488	Available Credit Carryover 13d	10	N	321, Line 13d	Enter Amount from Prior Year 4
489	489	Original Credit Amount 14b	10	N	321, Line 14b	Enter Amount from Prior Year 3
490	490	Previous Used Amount 14c	10	N	321, Line 14c	Enter Amount from Prior Year 3
491	491	Available Credit Carryover 14d	10	N	321, Line 14d	Enter Amount from Prior Year 3
492	492	Original Credit Amount 15b	10	N	321, Line 15b	Enter Amount from Prior Year 2
493	493	Previous Used Amount 15c	10	N	321, Line 15c	Enter Amount from Prior Year 2
494	494	Available Credit Carryover 15d	10	N	321, Line 15d	Enter Amount from Prior Year 2
495	495	Original Credit Amount 16b	10	N	321, Line 16b	Enter Amount from Prior Year 1
496	496	Previous Used Amount 16c	10	N	321, Line 16c	Enter Amount from Prior Year 1
497	497	Available Credit Carryover 16d	10	N	321, Line 16d	Enter Amount from Prior Year 1
498	498	Total Available Credit Carryover	10	N	321, Line 17	Add Lines 12 through 16 Column d
499	499	Current Yr's Credit	10	N	321, Line 18	
500	500	Available Carryover	10	N	321, Line 19	
501	501	Total Available Credit	10	N	321, Line 20	
502	502	Name of Public School 1	30	A	322, Line 1a	
503	503	School District Name/Number 1	30	A	322, Line 1b	
504	504	Location of Public School 1	30	A	322, Line 1c	
505	505	Amt of Fees Paid 1	10	N	322, Line 1d	
506	506	Name of Public School 2	30	A	322, Line 2a	
507	507	School District Name/Number 2	30	A	322, Line 2b	
508	508	Location of Public School 2	30	A	322, Line 2c	
509	509	Amt of Fees Paid 2	10	N	322, Line 2d	
510	510	Name of Public School 3	30	A	322, Line 3a	
511	511	School District Name/Number 3	30	A	322, Line 3b	
512	512	Location of Public School 3	30	A	322, Line 3c	
513	513	Amt of Fees Paid 3	10	N	322, Line 3d	
514	514	Cash Contributions Public Schools	10	N	322, Line 4	Add 4d and Line 5
515	515	Name of Public School 4	30	A	322, Line 5a	
516	516	School District Name/Number 4	30	A	322, Line 5b	
517	517	Location of Public School 4	30	A	322, Line 5c	
518	518	Amt of Fees Paid 4	10	N	322, Line 5d	
519	519	Name of Public School 5	30	A	322, Line 6a	
520	520	School District Name/Number 5	30	A	322, Line 6b	
521	521	Location of Public School 5	30	A	322, Line 6c	
522	522	Amt of Fees Paid 5	10	N	322, Line 6d	
523	523	Name of Public School 6	30	A	322, Line 7a	
524	524	School District Name/Number 6	30	A	322, Line 7b	
525	525	Location of Public School 6	30	A	322, Line 7c	
526	526	Amt of Fees Paid 6	10	N	322, Line 7d	
527	527	Cash Contributions Public Schools2	10	N	322, Line 8	Add 5d, 6d, and 7d
528	528	Total Cash and Credit Contri Pub Schools	10	N	322, Line 9	Add Line 4 and Line 8
529	529	Allowable Cash Contributions Public Schools	10	N	322, Line 10	Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
530	530	Current Year's Credit	10	N	322, Line 11	Enter smaller of Line 9 or Line 10
531	531	Original Credit Amount 7	10	N	322, Line 12b	Enter Amount from Prior Year 5
532	532	Previous Used Amount 7	10	N	322, Line 12c	Enter Amount from Prior Year 5
533	533	Available Credit Carryover 7	10	N	322, Line 12d	Enter Amount from Prior Year 5
534	534	Original Credit Amount 8	10	N	322, Line 13b	Enter Amount from Prior Year 4
535	535	Previous Used Amount 8	10	N	322, Line 13c	Enter Amount from Prior Year 4
536	536	Available Credit Carryover 8	10	N	322, Line 13d	Enter Amount from Prior Year 4
537	537	Original Credit Amount 9	10	N	322, Line 14b	Enter Amount from Prior Year 3
538	538	Previous Used Amount 9	10	N	322, Line 14c	Enter Amount from Prior Year 3
539	539	Available Credit Carryover 9	10	N	322, Line 14d	Enter Amount from Prior Year 3
540	540	Original Credit Amount 10	10	N	322, Line 15b	Enter Amount from Prior Year 2
541	541	Previous Used Amount 10	10	N	322, Line 15c	Enter Amount from Prior Year 2
542	542	Available Credit Carryover 10	10	N	322, Line 15d	Enter Amount from Prior Year 2
543	543	Original Credit Amount 11	10	N	322, Line 16b	Enter Amount from Prior Year 1
544	544	Previous Used Amount 11	10	N	322, Line 16c	Enter Amount from Prior Year 1
545	545	Available Credit Carryover 11	10	N	322, Line 16d	Enter Amount from Prior Year 1
546	546	Total Available Carryover	10	N	322, Line 17	
547	547	Current Year's Total Credit	10	N	322, Line 18	
548	548	Available Credit Carryover	10	N	322, Line 19	
549	549	Total Available Credit	10	N	322, Line 20	
550	550	Name of School 1	30	A	323, Line 1a	
551	551	Street Address of School 1	30	A	323, Line 1b	
552	552	City State of School 1	30	A	323, Line 1c	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

553	553	Amt of Contribution School 1	10	N	323, Line 1d	
554	554	Name of School 2	30	A	323, Line 2a	
555	555	Street Address of School 2	30	A	323, Line 2b	
556	556	City State of School 2	30	A	323, Line 2c	
		Amt of Contribution School 2				
557	557		10	N	323, Line 2d	
558	558	Name of School 3	30	A	323, Line 3a	
559	559	Street Address of School 3	30	A	323, Line 3b	
560	560	City State of School 3	30	A	323, Line 3c	
561	561	Amt of Contribution School 3	10	N	323, Line 3d	
		Total Contributions School Prev Tuition				Add Lines 1d, 2d, 3d, and any amounts from additional schedules
562	562		10	N	323, Line 4	
563	563	Name of School 4	30	A	323, Line 5a	
564	564	Street Address of School 4	30	A	323, Line 5b	
565	565	City State of School 4	30	A	323, Line 5c	
566	566	Amt of Contribution School 4	10	N	323, Line 5d	
567	567	Name of School 5	30	A	323, Line 6a	
568	568	Street Address of School 5	30	A	323, Line 6b	
569	569	City State of School 5	30	A	323, Line 6c	
570	570	Amt of Contribution School 5	10	N	323, Line 6d	
571	571	Name of School 6	30	A	323, Line 7a	
572	572	Street Address of School 6	30	A	323, Line 7b	
573	573	City State of School 6	30	A	323, Line 7c	
574	574	Amt of Contribution School 6	10	N	323, Line 7d	
		Total Contributions School Tuition				Add Lines 5d, 6d, 7d, and any amounts from additional schedules
575	575		10	N	323, Line 8	
576	576	Total Amt of Contribution Prev and Curr Allowable Contributions School Tuition	10	N	323, Line 9	Add Lines 4 and 8
577	577		10	N	323, Line 10	Single Taxpayer or Heads of Household Enter \$535 Married Taxpayer Enter \$1070
578	578	Current Year's Credit	10	N	323, Line 11	Enter smaller of Line 9 or Line 10
579	579	Original Credit Amount 6	10	N	323, Line 12b	Enter Amount from Prior Year 5
580	580	Previous Used Amount 6	10	N	323, Line 12c	Enter Amount from Prior Year 5
581	581	Available Credit Carryover 6	10	N	323, Line 12d	Enter Amount from Prior Year 5
582	582	Original Credit Amount 7	10	N	323, Line 13b	Enter Amount from Prior Year 4
583	583	Previous Used Amount 7	10	N	323, Line 13c	Enter Amount from Prior Year 4
584	584	Available Credit Carryover 7	10	N	323, Line 13d	Enter Amount from Prior Year 4
585	585	Original Credit Amount 8	10	N	323, Line 14b	Enter Amount from Prior Year 3
586	586	Previous Used Amount 8	10	N	323, Line 14c	Enter Amount from Prior Year 3
587	587	Available Credit Carryover 8	10	N	323, Line 14d	Enter Amount from Prior Year 3
588	588	Original Credit Amount 9	10	N	323, Line 15b	Enter Amount from Prior Year 2
589	589	Previous Used Amount 9	10	N	323, Line 15c	Enter Amount from Prior Year 2
590	590	Available Credit Carryover 9	10	N	323, Line 15d	Enter Amount from Prior Year 2
591	591	Original Credit Amount 10	10	N	323, Line 16b	Enter Amount from Prior Year 1
592	592	Previous Used Amount 10	10	N	323, Line 16c	Enter Amount from Prior Year 1
593	593	Available Credit Carryover 10	10	N	323, Line 16d	Enter Amount from Prior Year 1
594	594	Total Available Carryover	10	N	323, Line 17	
595	595	Current Year's Total Credit	10	N	323, Line 18	
596	596	Available Credit Carryover	10	N	323, Line 19	
597	597	Total Available Credit	10	N	323, Line 20	
598	598	Total Contribs Current Tx Yr	10	N	323, Line 21	
599	599	Max Credit Allow CR323	10	N	323, Line 22	
600	600	Total Excess Contributions	10	N	323, Line 23	
601	601	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
602	602	ADVS Receipt No	1	A	340, Box 1-NO	X or null
603	603	Total Qualified Donations	10	N	340, Line 2	
		Allowable Qualified Donations				Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
604	604		10	N	340, Line 3	
605	605	Current Year's Credit	10	N	340, Line 4	Enter smaller of Line 2 or Line 3
606	606	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
607	607	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
608	608	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
609	609	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
610	610	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
611	611	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
612	612	Name of School 1	30	A	348, Line 2a	
613	613	Address of School 1	30	A	348, Line 2b	
614	614	City State of School 1	30	A	348, Line 2c	
615	615	Amt of Contribution 2015 1	10	N	348, Line 2d	
616	616	Name of School 2	30	A	348, Line 3a	
617	617	Address of School 2	30	A	348, Line 3b	
618	618	City State of School 2	30	A	348, Line 3c	
619	619	Amt of Contribution 2015 2	10	N	348, Line 3d	
620	620	Name of School 3	30	A	348, Line 4a	
621	621	Address of School 3	30	A	348, Line 4b	
622	622	City State of School 3	30	A	348, Line 4c	
623	623	Amt of Contribution 2015 3	10	N	348, Line 4d	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

624	624	Total Contributions Certified School Tuition Prev Yr	10	N	348, Line 5	Add Lines 2d, 3d, 4d, and any amounts from additional schedules
625	625	Name of School 4	30	A	348, Line 6a	
626	626	Address of School 4	30	A	348, Line 6b	
627	627	City State of School 4	30	A	348, Line 6c	
628	628	Amt of Contribution 2016 4	10	N	348, Line 6d	
629	629	Name of School 5	30	A	348, Line 7a	
630	630	Address of School 5	30	A	348, Line 7b	
631	631	City State of School 5	30	A	348, Line 7c	
632	632	Amt of Contribution 2016 5	10	N	348, Line 7d	
633	633	Name of School 6	30	A	348, Line 8a	
634	634	Address of School 6	30	A	348, Line 8b	
635	635	City State of School 6	30	A	348, Line 8c	
636	636	Amt of Contribution 2016 6	10	N	348, Line 8d	
637	637	Total Contributions Certified School Tuition	10	N	348, Line 9	Add Lines 6d, 7d, 8d, and any amounts from additional schedules
638	638	Total Contributions Prev and Curr	10	N	348, Line 10	Add Line 5 and 9
639	639	Allowable Credit Claimed Form 323	10	N	348, Line 11	Enter amount from Form 323, Part 1 Line 5
640	640	Potential Credit	10	N	348, Line 12	Subtract Line 6 from Line 5
641	641	Allowable Max Credit	10	N	348, Line 13	Single Taxpayer or Heads of Household Enter \$525 Married Taxpayer Enter \$1050
642	642	Current Year's Credit	10	N	348, Line 14	Enter smaller of Line 7 or Line 8
643	643	Original Credit Amount 10	10	N	348, Line 15b	Enter Amount from Prior Year 5
644	644	Previous Used Amount 10	10	N	348, Line 15c	Enter Amount from Prior Year 5
645	645	Available Credit Carryover 10	10	N	348, Line 15d	Enter Amount from Prior Year 5
646	646	Original Credit Amount 11	10	N	348, Line 16b	Enter Amount from Prior Year 4
647	647	Previous Used Amount 11	10	N	348, Line 16c	Enter Amount from Prior Year 4
648	648	Available Credit Carryover 11	10	N	348, Line 16d	Enter Amount from Prior Year 4
649	649	Original Credit Amount 12	10	N	348, Line 17b	Enter Amount from Prior Year 3
650	650	Previous Used Amount 12	10	N	348, Line 17c	Enter Amount from Prior Year 3
651	651	Available Credit Carryover 12	10	N	348, Line 17d	Enter Amount from Prior Year 3
	652	Original Credit Amount 13	10	N	348, Line 18b	Enter Amount from Prior Year 2 (Added for TY2016)
	653	Previous Used Amount 13	10	N	348, Line 18c	Enter Amount from Prior Year 2 (Added for TY2016)
	654	Available Credit Carryover 13	10	N	348, Line 18d	Enter Amount from Prior Year 2 (Added for TY2016)
652	655	Total Available Carryover	10	N	348, Line 20	Add Lines 15d, 16d, 17d
653	656	Current Year's Total Credit	10	N	348, Line 21	Enter Amount from Part 2, Line 14
654	657	Available Credit Carryover	10	N	348, Line 22	Enter Amount from Part 3, Line 20, column d
655	658	Total Available Credit	10	N	348, Line 23	Add Lines 21 and 22
	659	Name of Qualifying Foster Care Charity 1	30	A	352, Line 1a	Added for TY2016
	660	Location of Qualifying Foster Care Charity 1	30	A	352, Line 1b	Added for TY2016
	661	Amt Contributed 1	10	N	352, Line 1c	Added for TY2016
	662	Name of Qualifying Foster Care Charity 2	30	A	352, Line 2a	Added for TY2016
	663	Location of Qualifying Foster Care Charity 2	30	A	352, Line 2b	Added for TY2016
	664	Amount Contributed 2	10	N	352, Line 2c	Added for TY2016
	665	Name of Qualifying Foster Care Charity 3	30	A	352, Line 3a	Added for TY2016
	666	Location of Qualifying Foster Care Charity 3	30	A	352, Line 3b	Added for TY2016
	667	Amount Qualifying Foster Care Charity Contributed 3	10	N	352, Line 3c	Added for TY2016
	668	Total Qualifying Foster Care Charity	10	N	352, Line 4	Add amounts in column c of lines 1, 2, and 3 Also add amount from separate schedule (Added for TY2016)
	669	Name of Qualifying Charity 4	30	A	352, Line 5a	Added for TY2016
	670	Location of Qualifying Charity 4	30	A	352, Line 5b	Added for TY2016
	671	Amt Contributed 4	10	N	352, Line 5c	Added for TY2016
	672	Name of Qualifying Charity 5	30	A	352, Line 6a	Added for TY2016
	673	Location of Qualifying Charity 5	30	A	352, Line 6b	Added for TY2016
	674	Amount Contributed 5	10	N	352, Line 6c	Added for TY2016
	675	Name of Qualifying Charity 6	30	A	352, Line 7a	Added for TY2016
	676	Location of Qualifying Charity 6	30	A	352, Line 7b	Added for TY2016
	677	Amount Qualifying Charity Contributed 6	10	N	352, Line 7c	Added for TY2016
	678	Total Qualifying Charity2	10	N	352, Line 8	Add amounts in column c of lines 5, 6, and 7 Also add amount from separate schedule (Added for TY2016)
	679	Total Cash Contri Qual Charity	10	N	352, Line 9	Add Line 4 and Line 8 (Added for TY2016)
	680	Allowable Charity Credit	10	N	352, Line 10	Single Taxpayer or Heads of Household Enter \$500 Married Taxpayer Enter \$1000 (Added for TY2016)
	681	Current Year's Qualifying Charity Credit	10	N	352, Line 11	Enter smaller of Line 9 or Line 10 (Added for TY2016)
	682	Original Credit Amount 12b	10	N	352, Line 12b	Enter Amount from Prior Year 5 (Added for TY2016)
	683	Previous Used Amount 12c	10	N	352, Line 12c	Enter Amount from Prior Year 5 (Added for TY2016)
	684	Available Credit Carryover 12d	10	N	352, Line 12d	Enter Amount from Prior Year 5 (Added for TY2016)

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

	685	Original Credit Amount 13b	10	N	352, Line 13b	Enter Amount from Prior Year 4 (Added for TY2016)
	686	Previous Used Amount 13c	10	N	352, Line 13c	Enter Amount from Prior Year 4 (Added for TY2016)
	687	Available Credit Carryover 13d	10	N	352, Line 13d	Enter Amount from Prior Year 4 (Added for TY2016)
	688	Original Credit Amount 14b	10	N	352, Line 14b	Enter Amount from Prior Year 3 (Added for TY2016)
	689	Previous Used Amount 14c	10	N	352, Line 14c	Enter Amount from Prior Year 3 (Added for TY2016)
	690	Available Credit Carryover 14d	10	N	352, Line 14d	Enter Amount from Prior Year 3 (Added for TY2016)
	691	Original Credit Amount 15b	10	N	352, Line 15b	Enter Amount from Prior Year 2 (Added for TY2016)
	692	Previous Used Amount 15c	10	N	352, Line 15c	Enter Amount from Prior Year 2 (Added for TY2016)
	693	Available Credit Carryover 15d	10	N	352, Line 15d	Enter Amount from Prior Year 2 (Added for TY2016)
	694	Original Credit Amount 16b	10	N	352, Line 16b	Enter Amount from Prior Year 1 (Added for TY2016)
	695	Previous Used Amount 16c	10	N	352, Line 16c	Enter Amount from Prior Year 1 (Added for TY2016)
	696	Available Credit Carryover 16d	10	N	352, Line 16d	Enter Amount from Prior Year 1 (Added for TY2016)
	697	Total Available Credit Carryover	10	N	352, Line 17	Add Lines 12 through 16 Column d (Added for TY2016)
	698	Current Yr's Credit	10	N	352, Line 18	Added for TY2016
	699	Available Carryover	10	N	352, Line 19	Added for TY2016
	700	Total Available Credit	10	N	352, Line 20	Added for TY2016
656	701	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

Arizona 140PY - Part Year Resident Return						
2D Barcode Record Layout						
2015 FIELD NO	2016 FIELD NO	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
1	1	Header version	2	A		T1
2	2	Software Developer Code	4	N		NACTP assigned code
3	3	Version Number	2	N		01; use 2 digits (leading zero)
4	4	Form Type	6	A		140PY
5	5	Form Year	4	N	140PY, TOP	2016
6	6	Tax Year Ending Date	8	A	140PY, 66F	MMDDCCYY (Enter only if fiscal year filer)
7	7	Primary First Name	10	A	140PY, 1	
8	8	Primary Middle Initial	1	A	140PY, 1	
9	9	Primary Last Name	35	A	140PY, 1	
10	10	Primary SSN	9	N	140PY, 1	
11	11	Spouse First Name	10	A	140PY, 1	Spouse Name required when MFJ or MFS
12	12	Spouse Middle Initial	1	A	140PY, 1	Spouse Name required when MFJ or MFS
13	13	Spouse Last Name	35	A	140PY, 1	Spouse Name required when MFJ or MFS
14	14	Spouse SSN	9	N	140PY, 1	Spouse Name required when MFJ or MFS; No
15	15	Address line 1	35	A/N	140PY, 2	Address line 1 or % (care of) line or recipient
16	16	Address line 2	35	A/N	140PY, 2	Address line 2 or Address line if 1 is % or
17	17	City	21	A	140PY, 3	
18	18	State	2	A	140PY, 3	
19	19	Zip Code	9	N	140PY, 3	Include zip plus 4 in last 4 digits or zero fill if not
20	20	Daytime Number	10	N	140PY, 94	
21	21	Married/Joint	1	A	140PY, 4	X or null
22	22	Head of Household	1	A	140PY, 5	X or null
23	23	Married filing Separate	1	A	140PY, 6	X or null
24	24	Single	1	A	140PY, 7	X or null
25	25	Age 65 or over	1	N	140PY, 8	
26	26	Blind	1	N	140PY, 9	
27	27	Dependents	2	N	140PY, 10	
28	28	Parents/Ancestors	2	N	140PY, 11	
29	29	6 Month Extension	1	A	140PY, 82F	X or null
30	30	Part Year Other	1	A	140PY, 12	X or null
31	31	Part Year Active Military	1	A	140PY, 13	X or null
32	32	Dependent Information Additional Space	1	A	140PY, Box 10	X or null
33	33	Dependent 1 First Name	10	A	140PY, 10a(a1)	
34	34	Dependent 1 Last Name	10	A	140PY, 10a(a2)	
35	35	Dependent 1 SSN	9	N	140PY, 10a(b)	No hyphens
36	36	Dependent 1 Relationship	12	A	140PY, 10a( c )	
37	37	Dependent 1 Months	2	A	140PY, 10a( d )	Valid Values are (0 - 12) & S (Stillborn)
38	38	Dependent 1 Name Not Qualifying	1	A	140PY, 10a( e )	X or null
39	39	Dependent 1 Name Education	1	A	140PY, 10a( f )	X or null
40	40	Dependent 2 First Name	10	A	140PY, 10b(a1)	
41	41	Dependent 2 Last Name	10	A	140PY, 10b(a2)	
42	42	Dependent 2 SSN	9	N	140PY, 10b(b)	No hyphens
43	43	Dependent 2 Relationship	12	A	140PY, 10b( c )	
44	44	Dependent 2 Months	2	A	140PY, 10b( d )	Valid Values are (0 - 12) & S (Stillborn)
45	45	Dependent 2 Name Not Qualifying	1	A	140PY, 10b( e )	X or null
46	46	Dependent 2 Name Education	1	A	140PY, 10b( f )	X or null
47	47	Parent Info More Space--Qualifying Ancestors	1	A	140PY, Box 11	X or null
48	48	Parent 1 First Name	10	A	140PY, 11a(a1)	
49	49	Parent 1 Last Name	10	A	140PY, 11a(a2)	
50	50	Parent 1 SSN	9	N	140PY, 11a(b)	
51	51	Parent 1 Relationship	12	A	140PY, 11a( c )	
52	52	Parent 1 Months	2	N	140PY, 11a( d )	
53	53	Parent 1 Age 65+	1	A	140PY, 11a( e )	X or null
54	54	Parent 1 Deceased In Tax Year	1	A	140PY, 11a( f )	X or null
55	55	Parent 2 First Name	10	A	140PY, 11a(a1)	
56	56	Parent 2 Last Name	10	A	140PY, 11a(a2)	
57	57	Parent 2 SSN	9	N	140PY, 11a(b)	
58	58	Parent 2 Relationship	12	A	140PY, 11a( c )	
59	59	Parent 2 Months	2	N	140PY, 11a( d )	
60	60	Parent 2 Age 65+	1	A	140PY, 11a( e )	X or null
61	61	Parent 2 Deceased In Tax Year	1	A	140PY, 11a( f )	X or null
62	62	Date of AZ Residence	17	A	140PY, 14	MMDDCCYY,MMDDCCYY Comma Delimited
63	63	Wages, Salaries Fed	10	N	140PY, 15Fed	
64	64	Wages, Salaries AZ	10	N	140PY, 15AZ	
65	65	Interest Fed	10	N	140PY, 16Fed	
66	66	Interest AZ	10	N	140PY, 16AZ	
67	67	Dividends Fed	10	N	140PY, 17Fed	
68	68	Dividends AZ	10	N	140PY, 17AZ	
69	69	AZ Inc Tax Refnd Fed	10	N	140PY, 18Fed	
70	70	AZ Inc Tax Refund AZ	10	N	140PY, 18AZ	
71	71	Alimony Received Fed	10	N	140PY, 19Fed	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

72	72	Alimony Received AZ	10	N	140PY, 19AZ	
73	73	Business Inc (C) Fed	10	N	140PY, 20Fed	
74	74	Business Inc (C) AZ	10	N	140PY, 20AZ	
75	75	Gain/Loss (D) Fed	10	N	140PY, 21Fed	
76	76	Gain/Loss (D) AZ	10	N	140PY, 21AZ	
77	77	Rents etc (E) Fed	10	N	140PY, 22Fed	
78	78	Rents etc (E) AZ	10	N	140PY, 22AZ	
79	79	Other Fed Income Fed	10	N	140PY, 23Fed	
80	80	Other Fed Income AZ	10	N	140PY, 23AZ	
81	81	Total Income Fed	10	N	140PY, 24 Fed	Add lines 15-23 FED
82	82	Total Income AZ	10	N	140PY, 24AZ	Add lines 15-23 AZ
83	83	Other Fed Adjust Fed	10	N	140PY, 25 Fed	
84	84	Other Fed Adjust AZ	10	N	140PY, 25 AZ	
85	85	Fed Adjusted Gross	10	N	140PY, 26	Subtract line 25 from line 24
86	86	Arizona Income	10	N	140PY, 27	Subtract line 25 from line 24
87	87	Arizona Income Ratio	5	D(4,1)	140PY, 28	Divide line 27 by line 26 Enter 100% as 1.000; 50% as 0.500; 80.63% as 0.806
88	88	Total Depreciation	10	N	140PY, 29	
89	89	Other Additions	10	N	140PY, 30	
90	90	Total Additions	10	N	140PY, 31	Add lines 27, 29, and 30
91	91	Total Arizona sourced net capital Gain/Loss	10	N	140PY, 32	
92	92	Total Net Short-Term Capital Gains	10	N	140PY, 33	
93	93	Total Net Long-Term Capital Gains	10	N	140PY, 34	
94	94	Total Capital Gains Assets	10	N	140PY, 35	
95	95	Allowable Subtraction Calculation	10	N	140PY, 36	Multiply Line 35 by 25% (.25)
96	96	Net Capital Gain - Investment In Qual. Small Business	10	N	140PY, Line 37	
97	97	Subtractions from Income	10	N	140PY, 38	Subtract lines 36 and 37 from line 31
98	98	Total From Line 38	10	N	140PY, 39	Enter Amount from Page 1 Line 38
99	99	Recalculated Arizona Depreciation	10	N	140PY, 40	
100	100	Contributions To 529 College Savings Plans	10	N	140PY, 41	
101	101	IRC 179 Exp Not Allowed	10	N	140PY, 42	
102	102	Int. Savings Bond	10	N	140PY, 43	
103	103	AZ Lottery Winnings	10	N	140PY, 44	
104	104	US Social Security AZ	10	N	140PY, 45	
105	105	Other Subtractions	10	N	140PY, 46	
106	106	Total Subtractions	10	N	140PY, 47	Subtract lines 40 through 46 from line 39
107	107	Age 65 Exempt Amt	10	N	140PY, 48	
108	108	Blind Exempt Amount	10	N	140PY, 49	
109	109	Dep Exempt Amount	10	N	140PY, 50	
110	110	Qulfy Parent Exempt Amount	10	N	140PY, 51	
111	111	Total Exemptions	10	N	140PY, 52	Add lines 48 through 51
112	112	AZ Exemption Portion	10	N	140PY, 53	Multiply line 52 by the Arizona Income Ratio on line 28
113	113	Az Adjusted Gross	10	N	140PY, 54	Subtract Line 53 from Line 47
114	114	Itemized Deductions	1	A	140PY, 55 I	X or null
115	115	Standard Deductions	1	A	140PY, 55 S	X or null
116	116	Deduction Amount	10	N	140PY, 55	ITEMIZED OR PRORATED IF NOT MILITARY Single, Married Filing Separate = \$5,099 Married Filing Jointly, Head of Household = \$10,189
117	117	Personal Exemptions	10	N	140PY, 56	
118	118	Az Taxable Income	10	N	140PY, 57	Subtract Lines 55 and 56 from Line 54
119	119	Computed Tax	10	N	140PY, 58	Compute the Tax using amount on Line 57 and
120	120	Tax from Recapture Credits	10	N	140PY, 59	Amount from AZ Credit Form 301 Part 2 Line 40
121	121	Subtotal of tax	10	N	140PY, 60	
122	122	Family Income Tax Credit	10	N	140PY, 61	
123	123	Non-Refundable Credits from AZ Credit Forms	10	N	140PY, 62	Amount from AZ Credit Form 301 Part 2 Line 72
124	124	Balance of Tax	10	N	140PY, 63	Subtract Lines 61 and 62 from Line 60
125	125	Withholding	10	N	140PY, 64	
126	126	Estimated Payments	10	N	140PY, 65a	
127	127	Claim of Right	10	N	140NR, 65b	Added for TY2016
128	128	Total Estimated Payments	10	N	140NR, 65c	Added for TY2016
129	129	Extension Payments	10	N	140PY, 66	
130	130	Increased Excise Tax Credit	10	N	140PY, 67	Use worksheet to determine amount.
131	131	Refundable Credit Form 308-I	1	A	140PY, 68-1	value "1" if checked; "0" or null if blank
132	132	Refundable Credit Form 342	1	A	140PY, 68-2	value "2" if checked; "0" or null if blank
133	133	Refundable Credit Form 349	1	A	140PY, 68-3	value "3" if checked; "0" or null if blank
134	134	Other Refundable Credits	10	N	140PY, 68	
135	135	Total Payments	10	N	140PY, 69	Add Lines 64 through 68
136	136	Tax Due	10	N	140PY, 70	If 63 is larger than 69, Subtract Line 69 from 63, Skip 71, 72, 73
137	137	Overpayment	10	N	140PY, 71	If 69 is larger than 63, Subtract Line 63 from 69
138	138	Next Year's Est Pmt	10	N	140PY, 72	Amount of Line 71 to be applied to 2017
139	139	Bal of Overpayment	10	N	140PY, 73	Subtract Line 72 from 71
140	140	Aid to Ed Contrib	10	N	140PY, 74	Legal Limitation exists – Must equal the exact
141	141	Wildlife Contrib	10	N	140PY, 75	
142	142	Child Abuse Contrib	10	N	140PY, 76	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

141	143	Domestic Violence Contrib	10	N	140PY, 77	
142	144	Political Contrib	10	N	140PY, 78	
143	145	Neighbors Helping Contrib	10	N	140PY, 79	
144	146	Special Olympics Contrib	10	N	140PY, 80	
145	147	Veterans' Donation Fund	10	N	140PY, 81	
146	148	I Didn't Pay Enough Fund	10	N	140PY, 82F	
147	149	Sustainable State Parks and Road Fund	10	N	140PY, 83	
148		Americans Elect Party	1	A	140PY, 84-1	Removed for TY2016
150	150	Democratic Party	1	A	140PY, 84-1	"2" or null
149	151	Green Party	1	A	140PY, 84-2	"3" or null - Rename Only
151	152	Libertarian Party	1	A	140PY, 84-3	"4" or null
152	153	Republican Party	1	A	140PY, 84-4	"5" or null
153	154	Est Pmt Pen/MSA Pen	10	N	140PY, 85	
154	155	Annualized Other	1	A	140PY, 86-1	Y or null
155	156	Farmer/Fisherman	1	A	140PY, 86-2	Y or null
156	157	Form 221 Attached	1	A	140PY, 86-3	Y or null
157	158	AZLTHSA Penalty	1	A	140PY, 86-4	Y or null
158	159	Tot Contrib/Penalty	10	N	140PY, 87	Add lines 74 through 83 and 85
159	160	Refund Amount	10	N	140PY, 88	Subtract Line 87 from 73, If less than zero, enter amount owed on line 89
160	161	Foreign Account	1	A	140PY, 88A	Y or Null; If "Y", Fields 163-166 should be disabled.
161	162	Dir Dep Routing Nbr	9	N	140PY, 98	For direct deposit; direct debit is not supported.
162	163	Dir Dep Account Nbr	17	A/N	140PY, 98	For direct deposit; direct debit is not supported.
163	164	Dir Dep Checking	1	A	140PY, 98	X or null; direct deposit only
164	165	Dir Dep Savings	1	A	140PY, 98	X or null; direct deposit only
165	166	Amount Owed	10	N	140PY, 89	Add lines 70 and 87
166	167	Prior Last Names	20	A	Front Page, 97	Comma delimited
167	168	Primary Occupation	16	A	140PY, pg2	
168	169	Spouse Occupation	16	A	140PY, pg2	
169	170	Preparer Name	35	A/N	140PY, pg2	
170	171	Preparer FEIN	9	N	140PY, pg2	No hyphens
171	172	Preparer Address	35	A/N	140PY, pg2	
172	173	Preparer City	21	A	140PY, pg2	
173	174	Preparer State	2	A	140PY, pg2	
174	175	Preparer Zip Code	9	N	140PY, pg2	
175	176	Paid Preparer Phone Number	10	N	140PY, pg2	
176	177	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
177	178	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
178	179	Medical Allowance	10	N	FedSchA(2-D) 3	
179	180	Total Medical/Dental	10	N	FedSchA(2-D) 4	
180	181	State and Local Taxes	10	N	FedSchA(2-D) 5	
181	182	Real Estate Taxes	10	N	FedSchA(2-D) 6	
182	183	Personal Property Taxes	10	N	FedSchA(2-D) 7	
183	184	Other Taxes	10	N	FedSchA(2-D) 8	
184	185	Total Other Taxes	10	N	FedSchA(2-D) 9	
185	186	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
186	187	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
187	188	Deductible Points	10	N	FedSchA(2-D) 12	
188	189	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
189	190	Investment Interest	10	N	FedSchA(2-D) 14	
190	191	Total Interest	10	N	FedSchA(2-D) 15	
191	192	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
192	193	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	
193	194	Carryover Prior Year	10	N	FedSchA(2-D) 18	
194	195	Total Contrib	10	N	FedSchA(2-D) 19	
195	196	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
196	197	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
197	198	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
198	199	Tot Other Exp	10	N	FedSchA(2-D) 23	
199	200	Gross Misc Ded	10	N	FedSchA(2-D) 24	
200	201	Miscellaneous Allow	10	N	FedSchA(2-D) 26	
201	202	Total Misc Deduct	10	N	FedSchA(2-D) 27	
202	203	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28	
203	204	Total Item Deduct	10	N	FedSchA(2-D) 29	
204	205	Medical/Dental Expenses	10	N	AZSchA(PY)/(PYN) 1	
205	206	Taxes Allowed	10	N	AZSchA(PY)/(PYN) 2	
206	207	Interest Expense	10	N	AZSchA(PY)/(PYN) 3	
207	208	Gifts Charity Allowed on Fed	10	N	AZSchA(PY)/(PYN) 4	
208	209	Casualty loss 1040	10	N	AZSchA(PY)/(PYN) 5	
209	210	Casualty Loss 4684	10	N	AZSchA(PY)/(PYN) 6	
210	211	Amount of Loss AZ	10	N	AZSchA(PY)/(PYN) 7	
211	212	Casualty Percentage	5	D(4,1)	AZSchA(PY)/(PYN) 8	Enter 100.0% as 100.0; 50.0% as 050.0; 80.63%
212	213	Casualty Total	10	N	AZSchA(PY)/(PYN) 9	
213	214	Miscellaneous Fed	10	N	AZSchA(PY)/(PYN) 10	
214	215	Miscellaneous AZ	10	N	AZSchA(PY)/(PYN) 11	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

215	216	Misc Percentage	5	D(4,1)	AZSchA(PY)/(PYN) 12	Enter 100.0% as 100.0; 50.0% as 050.0; 80.63%
216	217	Misc Deduction Fed	10	N	AZSchA(PY)/(PYN) 13	
217	218	Misc Deduction %	10	N	AZSchA(PY)/(PYN) 14	
218	219	Other Miscellaneous	10	N	AZSchA(PY)/(PYN) 15	
219	220	Wagering losses	10	N	AZSchA(PY)/(PYN) 16	
220	221	Tot Gamble Wins AZ	10	N	AZSchA(PY)/(PYN) 17	
221	222	AllowGamble Subt	10	N	AZSchA(PY)/(PYN) 18	
222	223	Gamble Loss Deduct	10	N	AZSchA(PY)/(PYN) 19	
223	224	Gambling Total	10	N	AZSchA(PY)/(PYN) 20	
224	225	Gambling Calculate	10	N	AZSchA(PY)/(PYN) 21	
225	226	Tot Job Expense Misc	10	N	AZSchA(PY)/(PYN) 22	
226	227	Tentative AZ Item	10	N	AZSchA(PY)/(PYN) 23	
227	228	FGI Reductions	10	N	AZSchA(PY)/(PYN) 24	
228	229	Allowed Itemized Deductions	10	N	AZSchA(PY)/(PYN) 25	
229	230	Percentage Itemized Deductions	10	N	AZSchA(PY)/(PYN) 26	
230	231	Multi Result	10	N	AZSchA(PY)/(PYN) 27	
231	232	Sub Result	10	N	AZSchA(PY)/(PYN) 28	
232	233	Part2 Med/Dent Exp	10	N	AZSchA (PYN) 29	
233	234	Part2 MSA Distr Used	10	N	AZSchA (PYN) 30	
234	235	Part2 Fed Med Deduct	10	N	AZSchA (PYN) 31	
235	236	Part2 Tot Med Deduct	10	N	AZSchA (PYN) 32	
236	237	Part2 Med Add Adjust	10	N	AZSchA (PYN) 33	
237	238	Part2 Med Subt Adj	10	N	AZSchA (PYN) 34	
238	239	Part2 Fed Credit Int Paid	10	N	AZSchA (PYN) 35	
239	240	Part2 WagerLossFed	10	N	AZSchA (PYN) 36	
240	241	Part2 Gamble Win	10	N	AZSchA (PYN) 37	
241	242	Part2 AZ Lottery Subt	10	N	AZSchA (PYN) 38	
242	243	Part2 Max Gamble Loss Deduct	10	N	AZSchA (PYN) 39	
243	244	Part2 Gambling Subt Adj	10	N	AZSchA (PYN) 40	
244	245	Part2 Contrib Ad	10	N	AZSchA (PYN) 41	
245	246	Part2 Sum Add Adj	10	N	AZSchA (PYN) 42	
246	247	Part2 Sum Subt Adj	10	N	AZSchA (PYN) 43	
247	248	Part2 Tot Fed Item Deductions	10	N	AZSchA (PYN) 44	
248	249	Part2 Sum line 43	10	N	AZSchA (PYN) 45	
249	250	Part2 SumTotAzItem Deduct	10	N	AZSchA (PYN) 46	
250	251	Part2 Adj ItemDeduct	10	N	AZSchA (PYN) 47	
251	252	Part2 Subt Subtotal	10	N	AZSchA (PYN) 48	
252	253	Part2 Tot Line 23	10	N	AZSchA (PYN) 49	
253	254	Part2 Subt Sum	10	N	AZSchA (PYN) 50	
254	255	Part2 Az Percentage	5	D(4,1)	AZSchA (PYN) 51	Enter 100.0% as 100.0; 50.0% as 050.0; 80.63%
255	256	Part2 Multi Sum	10	N	AZSchA (PYN) 52	
256	257	Part2 Az Item Deduct	10	N	AZSchA (PYN) 53	
257	258	Employer ID (1)	9	N	W-2 (1st Wage Statement)	
258	259	Employees SSN (1)	9	N	W-2 (1st Wage Statement)	
259	260	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
260	261	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
261	262	Employer ID (2)	9	N	W-2 (2nd Wage Statement)	
262	263	Employees SSN (2)	9	N	W-2 (2nd Wage Statement)	
263	264	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
264	265	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
265	266	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
266	267	Employees SSN (3)	9	N	W-2 (3rd Wage Statement)	
267	268	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
268	269	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	
269	270	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
270	271	Employees SSN (4)	9	N	W-2 (4th Wage Statement)	
271	272	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
272	273	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
273	274	Payer's ID (1)	9	N	1099-R (1st Statement)	
274	275	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
275	276	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
276	277	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
277	278	1099 Az WH (1)	10	N	1099-R (1st Statement)	
278	279	Payer's ID (2)	9	N	1099-R (2nd Statement)	
279	280	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
280	281	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
281	282	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
282	283	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
283	284	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)	
284	285	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)	
285	286	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)	
286	287	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)	
287	288	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)	
288	289	Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)	
289	290	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)	
290	291	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)	
291	292	Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

292	293	Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)	
293	294	Increased Research Act Ind Credit a	10	N	301, Line 5a (Form 308-I)	
294	295	Increased Research Act Ind Credit b	10	N	301, Line 5b (Form 308-I)	
295	296	Increased Research Act Ind Credit c	10	N	301, Line 5c (Form 308-I)	
296	297	Tax Paid Other State Cntry Credit a	10	N	301, Line 6a (Form 309)	
297	298	Tax Paid Other State Cntry Credit c	10	N	301, Line 6c (Form 309)	
298	299	Solar Energy Devices Credit a	10	N	301, Line 7a (Form 310)	
299	300	Solar Energy Devices Credit b	10	N	301, Line 7b (Form 310)	
300	301	Solar Energy Devices Credit c	10	N	301, Line 7c (Form 310)	
301	302	Agri Water Conserv Sys Credit a	10	N	301, Line 8a (Form 312)	
302	303	Agri Water Conserv Sys Credit b	10	N	301, Line 8b (Form 312)	
303	304	Agri Water Conserv Sys Credit c	10	N	301, Line 8c (Form 312)	
304	305	Polution Control Credit a	10	N	301, Line 9a (Form 315)	
305	306	Polution Control Credit b	10	N	301, Line 9b (Form 315)	
306	307	Polution Control Credit c	10	N	301, Line 9c (Form 315)	
307	308	Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 10a (Form 319)	
308	309	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 10b (Form 319)	
309	310	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 10c (Form 319)	
310	311	Employ TANF Recipients Credit a	10	N	301, Line 11a (Form 320)	
311	312	Employ TANF Recipients Credit b	10	N	301, Line 11b (Form 320)	
312	313	Employ TANF Recipients Credit c	10	N	301, Line 11c (Form 320)	
313	314	Contrib Qual Chart Orgns Credit a	10	N	301, Line 12a (Form 321)	
314	315	Contrib Qual Chart Orgns Credit b	10	N	301, Line 12b (Form 321)	
315	316	Contrib Qual Chart Orgns Credit c	10	N	301, Line 12c (Form 321)	
316	317	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 13a (Form 322)	
317	318	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 13b (Form 322)	
318	319	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 13c (Form 322)	
319	320	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 14a (Form 323)	
320	321	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 14b (Form 323)	
321	322	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 14c (Form 323)	
322	323	Agri Pol Cntrl Equip Credit a	10	N	301, Line 15a (Form 325)	
323	324	Agri Pol Cntrl Equip Credit b	10	N	301, Line 15b (Form 325)	
324	325	Agri Pol Cntrl Equip Credit c	10	N	301, Line 15c (Form 325)	
325	326	Donation School Site Credit a	10	N	301, Line 16a (Form 331)	
326	327	Donation School Site Credit b	10	N	301, Line 16b (Form 331)	
327	328	Donation School Site Credit c	10	N	301, Line 16c (Form 331)	
328	329	Healthy Forest Enterprises Credit a	10	N	301, Line 17a (Form 332)	
329	330	Healthy Forest Enterprises Credit b	10	N	301, Line 17b (Form 332)	
330	331	Healthy Forest Enterprises Credit c	10	N	301, Line 17c (Form 332)	
331	332	Employ Natl Guard Members Credit a	10	N	301, Line 18a (Form 333)	
332	333	Employ Natl Guard Members Credit b	10	N	301, Line 18b (Form 333)	
333	334	Employ Natl Guard Members Credit c	10	N	301, Line 18c (Form 333)	
334		Motion Picture Credit b	10	N	301, Line 19b (Form 334)	Removed for TY2016
335		Motion Picture Credit c	10	N	301, Line 19c (Form 334)	Removed for TY2016
336	335	Business Contrib School Tuition Org a	10	N	301, Line 19a (Form 335-I)	
	336	Business Contrib School Tuition Org b	10	N	301, Line 19b (Form 335-I)	Added for TY2016
337	337	Business Contrib School Tuition Org c	10	N	301, Line 19c (Form 335-I)	
338	338	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 20a (Form 336)	
339	339	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 20b (Form 336)	
340	340	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 20c (Form 336)	
341	341	Invest Qual Small Bus Credit a	10	N	301, Line 21a (Form 338)	
342	342	Invest Qual Small Bus Credit b	10	N	301, Line 21b (Form 338)	
343	343	Invest Qual Small Bus Credit c	10	N	301, Line 21c (Form 338)	
344	344	Water Conserv Sys Credit b	10	N	301, Line 22b (Form 339)	
345	345	Water Conserv Sys Credit c	10	N	301, Line 22c (Form 339)	
346	346	Military Fam Relf Fnd Credit a	10	N	301, Line 23a (Form 340)	
347	347	Military Fam Relf Fnd Credit c	10	N	301, Line 23c (Form 340)	
348	348	Business Contrib School Tuition Disabled a	10	N	301, Line 24a (Form 341-I)	
	349	Business Contrib School Tuition Disabled b	10	N	301, Line 24b (Form 341-I)	Added for TY2016
349	350	Business Contrib School Tuition Disabled c	10	N	301, Line 24c (Form 341-I)	
350	351	Renew Energy Prod Tax Credit a	10	N	301, Line 25a (Form 343)	
351	352	Renew Energy Prod Tax Credit b	10	N	301, Line 25b (Form 343)	
352	353	Renew Energy Prod Tax Credit c	10	N	301, Line 25c (Form 343)	
353	354	Solar Liquid Fuel Credit a	10	N	301, Line 26a (Form 344)	
354	355	Solar Liquid Fuel Credit c	10	N	301, Line 26c (Form 344)	
355	356	New Employment Credit a	10	N	301, Line 27a (Form 345)	
356	357	New Employment Credit b	10	N	301, Line 27b (Form 345)	
357	358	New Employment Credit c	10	N	301, Line 27c (Form 345)	
358	359	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 28a (Form 346)	
359	360	Ingres Resrch Act Basic Resrch Credit b	10	N	301, Line 28b (Form 346)	
360	361	Ingres Resrch Act Basic Resrch Credit c	10	N	301, Line 28c (Form 346)	
361	362	Qual Hlth Ins Plan Credit b	10	N	301, Line 29b (Form 347)	
362	363	Qual Hlth Ins Plan Credit c	10	N	301, Line 29c (Form 347)	
363	364	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 30a (Form 348)	
364	365	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 30b (Form 348)	
365	366	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 30c (Form 348)	
366	367	Renew Energy Invest Prod Sif Consum Credit a	10	N	301, Line 31a (Form 351)	
367	368	Renew Energy Invest Prod Sif Consum Credit b	10	N	301, Line 31b (Form 351)	
368	369	Renew Energy Invest Prod Sif Consum Credit c	10	N	301, Line 31c (Form 351)	
	370	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 32a (Form 352)	Added for TY2016
	371	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 32c (Form 352)	Added for TY2016

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

369	372	Total Available Nonrefundable Tax Credits	10	N	301, Line 33	Add Lines 1 through 32 Column c Only
370	373	Total AZ Tax	10	N	301, Line 34	Tax From F140 L46 or F140PY L59 or F140NR
371	374	Tax Recap Environ Tech Fac Credit	10	N	301, Line 35	From AZ Credit Form 305 Part 5 Line 23
372	375	Tax Recap Credits Hlth Forest Entrs	10	N	301, Line 36	From AZ Credit Form 332 Part 11 Line 53 and
373	376	Tax Recap Credits Renew Engy Ind	10	N	301, Line 37c	From AZ Credit Form 342 Part 5 Line 17
374	377	Tax Recap Credits Qual Facs	10	N	301, Line 38c	From AZ Credit Form 349 Part 5 Line 17
375	378	Tax Recap Crdts Renew Engy Invest Prod Slf Cons	10	N	301, Line 39	From AZ Credit Form 351 Part 5 Line 25c
376	379	Total Recapture of Credits	10	N	301, Line 40	Add Lines 35 through 39 Enter Here and on F140 L47, F140PY L59, F140NR L57, F140X
377	380	Subtotal Tax Credits and Recap Credits	10	N	301, Line 41	Add Lines 34 and 40
378	381	Family Income Tax Credit	10	N	301, Line 42	From F140 L49 or F140PY L61 or F140X L37
379	382	Total Tax Credits and Recap Credits	10	N	301, Line 43	Subtract Lines 42 from Line 41. If less than Zero
380	383	Enterprise Zone Credit Used	10	N	301, Line 44 (Form 304)	
381	384	Environ Tech Fac Credit Used	10	N	301, Line 45 (Form 305)	
382	385	Military Reuse Zone Credit Used	10	N	301, Line 46 (Form 306)	
383	386	Recycling Equipment Credit Used	10	N	301, Line 47 (Form 307)	
384	387	Increased Research Act Indiv Credit Used	10	N	301, Line 48 (Form 308-l)	
385	388	Tax Paid Other State Ctry Credit Used	10	N	301, Line 49 (Form 309)	
386	389	Solar Energy Devices Credit Used	10	N	301, Line 50 (Form 310)	
387	390	Agri Water Conserv Sys Credit Used	10	N	301, Line 51 (Form 312)	
388	391	Polution Control Credit Used	10	N	301, Line 52 (Form 315)	
389	392	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 53 (Form 319)	
390	393	Employ TANF Recipients Credit Used	10	N	301, Line 54 (Form 320)	
391	394	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 55 (Form 321)	
392	395	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 56 (Form 322)	
393	396	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 57 (Form 323)	
394	397	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 58 (Form 325)	
395	398	Donation School Site Credit Used	10	N	301, Line 59 (Form 331)	
396	399	Healthy Forest Enterprises Credit Used	10	N	301, Line 60 (Form 332)	
397	400	Employ Natl Guard Members Credit Used	10	N	301, Line 61 (Form 333)	
398		Motion Picture Credit Used	10	N	301, Line 62 (Form 334)	Removed for TY2016
399	401	Business Contrib School Tuition Org Used	10	N	301, Line 62 (Form 335-l)	
400	402	Solar Energy Devices Comm Indus Used	10	N	301, Line 63 (Form 336)	
401	403	Invest Qual Small Bus Credit Used	10	N	301, Line 64 (Form 338)	
402	404	Water Conserv Sys Credit Used	10	N	301, Line 65 (Form 339)	
403	405	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 66 (Form 340)	
404	406	Business Contrib School Tuition Disabled a	10	N	301, Line 67 (Form 341-l)	
405	407	Renew Energy Prod Tax Credit Used	10	N	301, Line 68 (Form 343)	
406	408	Solar Liquid Fuel Credit Used	10	N	301, Line 69 (Form 344)	
407	409	New Employment Credit Used	10	N	301, Line 70 (Form 345)	
408	410	Incrs Resrch Act Basic Resrch Credit Used	10	N	301, Line 71 (Form 346)	
409	411	Qual Hlth Ins Plans Credit Used	10	N	301, Line 72 (Form 347)	
410	412	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 73 (Form 348)	
411	413	Renew Energy Invest Prod Slf Consum Credit Used	10	N	301, Line 74 (Form 351)	
	414	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 75 (Form 352)	Added for TY2016
412	415	Total Nonrefundable Tax Credits Used	10	N	301, Line 76	Add Lines 44 through 75. Total Cannot be more than 43. Enter this amount on Form 140 L50, 140PY L62, 140NR L59, or 104X L38
413	416	Description of Income Items a	30	A	309, Line 1a	
414	417	Description of Income Items b	30	A	309, Line 1b	
415	418	Description of Income Items c	30	A	309, Line 1c	
416	419	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
417	420	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
418	421	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
419	422	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
420	423	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
421	424	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
422	425	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
423	426	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
424	427	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
425	428	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
426	429	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
427	430	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
428	431	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
429	432	AZ Tax Liable Less Credits	10	N	309, Line 7	
430	433	Amt Part1 Line6	10	N	309, Line 8	
431	434	Amt AZ Income Tax Imposed	10	N	309, Line 9	
432	435	Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10	Divide Line 8 by Line 9 (Cannot be greater than
433	436	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
434	437	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
435	438	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
436	439	Tot Income Taxable By Other	10	N	309, Line 14	
437	440	Pct Income Taxable by Other	6	D (4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater
438	441	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
439	442	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
440	443	Description of Income Items a	30	A	309, Line 1a (2)	
441	444	Description of Income Items b	30	A	309, Line 1b (2)	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

442	445	Description of Income Items c	30	A	309, Line 1c (2)	
443	446	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
444	447	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
445	448	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
446	449	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
447	450	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
448	451	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
449	452	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
450	453	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
451	454	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
452	455	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
453	456	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
454	457	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
455	458	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
456	459	AZ Tax Liabile Less Credits	10	N	309, Line 7 (2)	
457	460	Amt Part1 Line6	10	N	309, Line 8 (2)	
458	461	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
459	462	Pct Income Taxable by Both AZ Oth1	6	D (4,3)	309, Line 10 (2)	Divide Line 8 by Line 9 (Cannot be greater than 1.000)
460	463	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
461	464	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
462	465	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6
463	466	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
464	467	Pct Income Taxable by Other	6	D (4,3)	309, Line 15 (2)	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
465	468	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
466	469	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
467	470	Address of Solar Energy Device	35	A/N	310, Line 1a	
468	471	City of Solar Energy Device	21	A	310, Line 1b	
469	472	State of Solar Energy Device	2	A	310, Line 1c	
470	473	Zip Code of Solar Energy Device	9	N	310, Line 1d	Include zip plus 4 in last 4 digits or zero fill if not available
471	474	Cost of Solar Energy Device	10	N	310, Line 2	
472	475	Percentage of Cost Solar Energy Device	10	N	310, Line 3	AZ Credit Form 310 Multiply Line 2 by .25 (25%)
473	476	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
474	477	Amt Credit Prior Years	10	N	310, Line 5	
475	478	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
476	479	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
477	480	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
478	481	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
479	482	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
480	483	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
481	484	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
482	485	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
483	486	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
484	487	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
485	488	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
486	489	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
487	490	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
488	491	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
489	492	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
490	493	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
491	494	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
492	495	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
493	496	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
494	497	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
495	498	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
496	499	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
497	500	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
498	501	Name of Qualifying Charity 1	30	A	321, Line 1a	
499	502	Location of Qualifying Charity 1	30	A	321, Line 1b	
500	503	Amt Contributed 1	10	N	321, Line 1c	
501	504	Name of Qualifying Charity 2	30	A	321, Line 2a	
502	505	Location of Qualifying Charity 2	30	A	321, Line 2b	
503	506	Amount Contributed 2	10	N	321, Line 2c	
504	507	Name of Qualifying Charity 3	30	A	321, Line 3a	
505	508	Location of Qualifying Charity 3	30	A	321, Line 3b	
506	509	Amount Qualifying Charity Contributed 3	10	N	321, Line 3c	
507	510	Total Qualifying Charity	10	N	321, Line 4	Add amounts in column c of lines 1, 2, and 3 Also add amount from separate schedule
510		Name of Qualifying Foster Care Charity 1	30	A	321, Line 4aa	Removed for TY2016
511		Location of Qualifying Foster Care Charity 1	30	A	321, Line 4ab	Removed for TY2016
512		Amt Contributed 1	10	N	321, Line 4ac	Removed for TY2016
513		Name of Qualifying Foster Care Charity 2	30	A	321, Line 4ba	Removed for TY2016
514		Location of Qualifying Foster Care Charity 2	30	A	321, Line 4bb	Removed for TY2016
515		Amount Contributed 2	10	N	321, Line 4bc	Removed for TY2016
516		Name of Qualifying Foster Care Charity 3	30	A	321, Line 4ca	Removed for TY2016
517		Location of Qualifying Foster Care Charity 3	30	A	321, Line 4cb	Removed for TY2016
518		Amount Qualifying Foster Care Charity Contributed 3	10	N	321, Line 4cc	Removed for TY2016
519		Total Qualifying Foster Care Charity	10	N	321, Line 4d	Removed for TY2016

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

520		Total Current Year Qualify Charity Credit	10	N	321, Line 5	Removed for TY2016
521		Subtotal Charity Contributions	10	N	321, Line 6	Removed for TY2016
522		Subtotal Allowable Charity Contributions	10	N	321, Line 7	Removed for TY2016
523		Current Year's Qualifying Combined Charity Credit	10	N	321, Line 8	Removed for TY2016
	511	Name of Qualifying Charity 4	30	A	321, Line 5a	Added for TY2016
	512	Location of Qualifying Charity 4	30	A	321, Line 5b	Added for TY2016
	513	Amt Contributed 4	10	N	321, Line 5c	Added for TY2016
	514	Name of Qualifying Charity 5	30	A	321, Line 6a	Added for TY2016
	515	Location of Qualifying Charity 5	30	A	321, Line 6b	Added for TY2016
	516	Amount Contributed 5	10	N	321, Line 6c	Added for TY2016
	517	Name of Qualifying Charity 6	30	A	321, Line 7a	Added for TY2016
	518	Location of Qualifying Charity 6	30	A	321, Line 7b	Added for TY2016
	519	Amount Qualifying Charity Contributed 6	10	N	321, Line 7c	Added for TY2016
		Total Qualifying Charity2				Add amounts in column c of lines 5, 6, and 7 (Added for TY2016)
	520		10	N	321, Line 8	Also add amount from separate schedule
		Total Cash Contri Qual Charity				AZ Credit Form 321 Add Line 4 and Line 8 (Added for TY2016)
	521		10	N	321, Line 9	
508		Allowable Charity Credit				AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$400 Married Taxpayer Enter \$800
	522		10	N	321, Line 10	
509	523	Current Year's Qualifying Charity Credit	10	N	321, Line 11	Enter smaller of Line 9 or Line 10
524	524	Original Credit Amount 12b	10	N	321, Line 12b	Enter Amount from Prior Year 5
525	525	Previous Used Amount 12c	10	N	321, Line 12c	Enter Amount from Prior Year 5
526	526	Available Credit Carryover 12d	10	N	321, Line 12d	Enter Amount from Prior Year 5
527	527	Original Credit Amount 13b	10	N	321, Line 13b	Enter Amount from Prior Year 4
528	528	Previous Used Amount 13c	10	N	321, Line 13c	Enter Amount from Prior Year 4
529	529	Available Credit Carryover 13d	10	N	321, Line 13d	Enter Amount from Prior Year 4
530	530	Original Credit Amount 14b	10	N	321, Line 14b	Enter Amount from Prior Year 3
531	531	Previous Used Amount 14c	10	N	321, Line 14c	Enter Amount from Prior Year 3
532	532	Available Credit Carryover 14d	10	N	321, Line 14d	Enter Amount from Prior Year 3
533	533	Original Credit Amount 15b	10	N	321, Line 15b	Enter Amount from Prior Year 2
534	534	Previous Used Amount 15c	10	N	321, Line 15c	Enter Amount from Prior Year 2
535	535	Available Credit Carryover 15d	10	N	321, Line 15d	Enter Amount from Prior Year 2
536	536	Original Credit Amount 16b	10	N	321, Line 16b	Enter Amount from Prior Year 1
537	537	Previous Used Amount 16c	10	N	321, Line 16c	Enter Amount from Prior Year 1
538	538	Available Credit Carryover 16d	10	N	321, Line 16d	Enter Amount from Prior Year 1
539	539	Total Available Credit Carryover	10	N	321, Line 17	Add Lines 12 through 16 Column d
540	540	Current Yr's Credit	10	N	321, Line 18	
541	541	Available Carryover	10	N	321, Line 19	
542	542	Total Available Credit	10	N	321, Line 20	
543	543	Name of Public School 1	30	A	322, Line 1a	
544	544	School District Name/Number 1	30	A	322, Line 1b	
545	545	Location of Public School 1	30	A	322, Line 1c	
546	546	Amt of Fees Paid 1	10	N	322, Line 1d	
547	547	Name of Public School 2	30	A	322, Line 2a	
548	548	School District Name/Number 2	30	A	322, Line 2b	
549	549	Location of Public School 2	30	A	322, Line 2c	
550	550	Amt of Fees Paid 2	10	N	322, Line 2d	
551	551	Name of Public School 3	30	A	322, Line 3a	
552	552	School District Name/Number 3	30	A	322, Line 3b	
553	553	Location of Public School 3	30	A	322, Line 3c	
554	554	Amt of Fees Paid 3	10	N	322, Line 3d	
555	555	Cash Contributions Public Schools	10	N	322, Line 4	Add 4d and Line 5
556	556	Name of Public School 4	30	A	322, Line 5a	
557	557	School District Name/Number 4	30	A	322, Line 5b	
558	558	Location of Public School 4	30	A	322, Line 5c	
559	559	Amt of Fees Paid 4	10	N	322, Line 5d	
560	560	Name of Public School 5	30	A	322, Line 6a	
561	561	School District Name/Number 5	30	A	322, Line 6b	
562	562	Location of Public School 5	30	A	322, Line 6c	
563	563	Amt of Fees Paid 5	10	N	322, Line 6d	
564	564	Name of Public School 6	30	A	322, Line 7a	
565	565	School District Name/Number 6	30	A	322, Line 7b	
566	566	Location of Public School 6	30	A	322, Line 7c	
567	567	Amt of Fees Paid 6	10	N	322, Line 7d	
568	568	Cash Contributions Public Schools2	10	N	322, Line 8	Add 5d, 6d, and 7d
569	569	Total Cash and Credit Contri Pub Schools	10	N	322, Line 9	Add Line 4 and Line 8
570		Allowable Cash Contributions Public Schools				Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
	570		10	N	322, Line 10	
571	571	Current Year's Credit	10	N	322, Line 11	Enter smaller of Line 9 or Line 10
572	572	Original Credit Amount 7	10	N	322, Line 12b	Enter Amount from Prior Year 5
573	573	Previous Used Amount 7	10	N	322, Line 12c	Enter Amount from Prior Year 5
574	574	Available Credit Carryover 7	10	N	322, Line 12d	Enter Amount from Prior Year 5
575	575	Original Credit Amount 8	10	N	322, Line 13b	Enter Amount from Prior Year 4
576	576	Previous Used Amount 8	10	N	322, Line 13c	Enter Amount from Prior Year 4
577	577	Available Credit Carryover 8	10	N	322, Line 13d	Enter Amount from Prior Year 4
578	578	Original Credit Amount 9	10	N	322, Line 14b	Enter Amount from Prior Year 3
579	579	Previous Used Amount 9	10	N	322, Line 14c	Enter Amount from Prior Year 3
580	580	Available Credit Carryover 9	10	N	322, Line 14d	Enter Amount from Prior Year 3
581	581	Original Credit Amount 10	10	N	322, Line 15b	Enter Amount from Prior Year 2

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

582	582	Previous Used Amount 10	10	N	322, Line 15c	Enter Amount from Prior Year 2
583	583	Available Credit Carryover 10	10	N	322, Line 15d	Enter Amount from Prior Year 2
584	584	Original Credit Amount 11	10	N	322, Line 16b	Enter Amount from Prior Year 1
585	585	Previous Used Amount 11	10	N	322, Line 16c	Enter Amount from Prior Year 1
586	586	Available Credit Carryover 11	10	N	322, Line 16d	Enter Amount from Prior Year 1
587	587	Total Available Carryover	10	N	322, Line 17	
588	588	Current Year's Total Credit	10	N	322, Line 18	
589	589	Available Credit Carryover	10	N	322, Line 19	
590	590	Total Available Credit	10	N	322, Line 20	
591	591	Name of School 1	30	A	323, Line 1a	
592	592	Street Address of School 1	30	A	323, Line 1b	
593	593	City State of School 1	30	A	323, Line 1c	
594	594	Amt of Contribution School 1	10	N	323, Line 1d	
595	595	Name of School 2	30	A	323, Line 2a	
596	596	Street Address of School 2	30	A	323, Line 2b	
597	597	City State of School 2	30	A	323, Line 2c	
598	598	Amt of Contribution School 2	10	N	323, Line 2d	
599	599	Name of School 3	30	A	323, Line 3a	
600	600	Street Address of School 3	30	A	323, Line 3b	
601	601	City State of School 3	30	A	323, Line 3c	
602	602	Amt of Contribution School 3	10	N	323, Line 3d	
603		Total Contributions School Prev Tuition				Add Lines 1d, 2d, 3d, and any amounts from additional schedules
	603		10	N	323, Line 4	
604		Name of School 4				
	604		30	A	323, Line 5a	
605	605	Street Address of School 4	30	A	323, Line 5b	
606	606	City State of School 4	30	A	323, Line 5c	
607	607	Amt of Contribution School 4	10	N	323, Line 5d	
608	608	Name of School 5	30	A	323, Line 6a	
609	609	Street Address of School 5	30	A	323, Line 6b	
610	610	City State of School 5	30	A	323, Line 6c	
611	611	Amt of Contribution School 5	10	N	323, Line 6d	
612	612	Name of School 6	30	A	323, Line 7a	
613	613	Street Address of School 6	30	A	323, Line 7b	
614	614	City State of School 6	30	A	323, Line 7c	
615		Amt of Contribution School 6				
	615		10	N	323, Line 7d	
616		Total Contributions School Tuition				Add Lines 5d, 6d, 7d, and any amounts from additional schedules
	616		10	N	323, Line 8	
617	617	Total Amt of Contribution 2015	10	N	323, Line 9	Add Lines 4 and 8
618		Allowable Contributions School Tuition				Single Taxpayer or Heads of Household Enter \$535 Married Taxpayer Enter \$1070
	618		10	N	323, Line 10	
619	619	Current Year's Credit	10	N	323, Line 11	Enter smaller of Line 9 or Line 10
620	620	Original Credit Amount 6	10	N	323, Line 12b	Enter Amount from Prior Year 5
621	621	Previous Used Amount 6	10	N	323, Line 12c	Enter Amount from Prior Year 5
622	622	Available Credit Carryover 6	10	N	323, Line 12d	Enter Amount from Prior Year 5
623	623	Original Credit Amount 7	10	N	323, Line 13b	Enter Amount from Prior Year 4
624	624	Previous Used Amount 7	10	N	323, Line 13c	Enter Amount from Prior Year 4
625	625	Available Credit Carryover 7	10	N	323, Line 13d	Enter Amount from Prior Year 4
626	626	Original Credit Amount 8	10	N	323, Line 14b	Enter Amount from Prior Year 3
627	627	Previous Used Amount 8	10	N	323, Line 14c	Enter Amount from Prior Year 3
628	628	Available Credit Carryover 8	10	N	323, Line 14d	Enter Amount from Prior Year 3
629	629	Original Credit Amount 9	10	N	323, Line 15b	Enter Amount from Prior Year 2
630	630	Previous Used Amount 9	10	N	323, Line 15c	Enter Amount from Prior Year 2
631	631	Available Credit Carryover 9	10	N	323, Line 15d	Enter Amount from Prior Year 2
632	632	Original Credit Amount 10	10	N	323, Line 16b	Enter Amount from Prior Year 1
633	633	Previous Used Amount 10	10	N	323, Line 16c	Enter Amount from Prior Year 1
634	634	Available Credit Carryover 10	10	N	323, Line 16d	Enter Amount from Prior Year 1
635	635	Total Available Carryover	10	N	323, Line 17	
636	636	Current Year's Total Credit	10	N	323, Line 18	
637	637	Available Credit Carryover	10	N	323, Line 19	
638	638	Total Available Credit	10	N	323, Line 20	
639	639	Total Contribs Current Tx Yr	10	N	323, Line 21	
640	640	Max Credit Allow CR323	10	N	323, Line 22	
641	641	Total Excess Contributions	10	N	323, Line 23	
642	642	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
643	643	ADVS Receipt No	1	A	340, Box 1-NO	X or null
644	644	Total Qualified Donations	10	N	340, Line 2	
645		Allowable Qualified Donations				Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
	645		10	N	340, Line 3	
646	646	Current Year's Credit	10	N	340, Line 4	Enter smaller of Line 2 or Line 3
647	647	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
648	648	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
649	649	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
650	650	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
651	651	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
652	652	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
653	653	Name of School 1	30	A	348, Line 2a	
654	654	Address of School 1	30	A	348, Line 2b	
655	655	City State of School 1	30	A	348, Line 2c	
656	656	Amt of Contribution 2015 1	10	N	348, Line 2d	

## Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

657	657	Name of School 2	30	A	348, Line 3a	
658	658	Address of School 2	30	A	348, Line 3b	
659	659	City State of School 2	30	A	348, Line 3c	
660	660	Amt of Contribution 2015 2	10	N	348, Line 3d	
661	661	Name of School 3	30	A	348, Line 4a	
662	662	Address of School 3	30	A	348, Line 4b	
663	663	City State of School 3	30	A	348, Line 4c	
664	664	Amt of Contribution 2015 3	10	N	348, Line 4d	
665	665	Total Contributions Certified School Tuition Prev Yr	10	N	348, Line 5	Add Lines 2d, 3d, 4d, and any amounts from additional schedules
666	666	Name of School 4	30	A	348, Line 6a	
667	667	Address of School 4	30	A	348, Line 6b	
668	668	City State of School 4	30	A	348, Line 6c	
669	669	Amt of Contribution 2016 4	10	N	348, Line 6d	
670	670	Name of School 5	30	A	348, Line 7a	
671	671	Address of School 5	30	A	348, Line 7b	
672	672	City State of School 5	30	A	348, Line 7c	
673	673	Amt of Contribution 2016 5	10	N	348, Line 7d	
674	674	Name of School 6	30	A	348, Line 8a	
675	675	Address of School 6	30	A	348, Line 8b	
676	676	City State of School 6	30	A	348, Line 8c	
677	677	Amt of Contribution 2016 6	10	N	348, Line 8d	
678	678	Total Contributions Certified School Tuition	10	N	348, Line 9	Add Lines 6d, 7d, 8d, and any amounts from additional schedules
679	679	Total Contributions Prev and Curr	10	N	348, Line 10	Add Line 5 and 9
680	680	Allowable Credit Claimed Form 323	10	N	348, Line 11	Enter amount from Form 323, Part 1 Line 5
681	681	Potential Credit	10	N	348, Line 12	Subtract Line 6 from Line 5
682	682	Allowable Max Credit	10	N	348, Line 13	Single Taxpayer or Heads of Household Enter \$525 Married Taxpayer Enter \$1050
683	683	Current Year's Credit	10	N	348, Line 14	Enter smaller of Line 7 or Line 8
684	684	Original Credit Amount 10	10	N	348, Line 15b	Enter Amount from Prior Year 5
685	685	Previous Used Amount 10	10	N	348, Line 15c	Enter Amount from Prior Year 5
686	686	Available Credit Carryover 10	10	N	348, Line 15d	Enter Amount from Prior Year 5
687	687	Original Credit Amount 11	10	N	348, Line 16b	Enter Amount from Prior Year 4
688	688	Previous Used Amount 11	10	N	348, Line 16c	Enter Amount from Prior Year 4
689	689	Available Credit Carryover 11	10	N	348, Line 16d	Enter Amount from Prior Year 4
690	690	Original Credit Amount 12	10	N	348, Line 17b	Enter Amount from Prior Year 3
691	691	Previous Used Amount 12	10	N	348, Line 17c	Enter Amount from Prior Year 3
692	692	Available Credit Carryover 12	10	N	348, Line 17d	Enter Amount from Prior Year 3
	693	Original Credit Amount 13	10	N	348, Line 18b	Enter Amount from Prior Year 2 (Added for TY2016)
	694	Previous Used Amount 13	10	N	348, Line 18c	Enter Amount from Prior Year 2 (Added for TY2016)
	695	Available Credit Carryover 13	10	N	348, Line 18d	Enter Amount from Prior Year 2 (Added for TY2016)
693	696	Total Available Carryover	10	N	348, Line 20	Add Lines 15d, 16d, 17d
694	697	Current Year's Total Credit	10	N	348, Line 21	Enter Amount from Part 2, Line 14
695	698	Available Credit Carryover	10	N	348, Line 22	Enter Amount from Part 3, Line 20, column d
696	699	Total Available Credit	10	N	348, Line 23	Add Lines 21 and 22
	700	Name of Qualifying Foster Care Charity 1	30	A	352, Line 1a	Added for TY2016
	701	Location of Qualifying Foster Care Charity 1	30	A	352, Line 1b	Added for TY2016
	702	Amt Contributed 1	10	N	352, Line 1c	Added for TY2016
	703	Name of Qualifying Foster Care Charity 2	30	A	352, Line 2a	Added for TY2016
	704	Location of Qualifying Foster Care Charity 2	30	A	352, Line 2b	Added for TY2016
	705	Amount Contributed 2	10	N	352, Line 2c	Added for TY2016
	706	Name of Qualifying Foster Care Charity 3	30	A	352, Line 3a	Added for TY2016
	707	Location of Qualifying Foster Care Charity 3	30	A	352, Line 3b	Added for TY2016
	708	Amount Qualifying Foster Care Charity Contributed 3	10	N	352, Line 3c	Added for TY2016
	709	Total Qualifying Foster Care Charity	10	N	352, Line 4	Add amounts in column c of lines 1, 2, and 3 (Added for TY2016) Also add amount from separate schedule
	710	Name of Qualifying Charity 4	30	A	352, Line 5a	Added for TY2016
	711	Location of Qualifying Charity 4	30	A	352, Line 5b	Added for TY2016
	712	Amt Contributed 4	10	N	352, Line 5c	Added for TY2016
	713	Name of Qualifying Charity 5	30	A	352, Line 6a	Added for TY2016
	714	Location of Qualifying Charity 5	30	A	352, Line 6b	Added for TY2016
	715	Amount Contributed 5	10	N	352, Line 6c	Added for TY2016
	716	Name of Qualifying Charity 6	30	A	352, Line 7a	Added for TY2016
	717	Location of Qualifying Charity 6	30	A	352, Line 7b	Added for TY2016
	718	Amount Qualifying Charity Contributed 6	10	N	352, Line 7c	Added for TY2016
	719	Total Qualifying Charity2	10	N	352, Line 8	Add amounts in column c of lines 5, 6, and 7 - (Added for TY2016) Also add amount from separate schedule
	720	Total Cash Contri Qual Charity	10	N	352, Line 9	Add Line 4 and Line 8 - (Added for TY2016)
	721	Allowable Charity Credit	10	N	352, Line 10	Single Taxpayer or Heads of Household Enter \$500 Married Taxpayer Enter \$1000 - (Added for TY2016)
	722	Current Year's Qualifying Charity Credit	10	N	352, Line 11	Enter smaller of Line 9 or Line 10 - (Added for TY2016)
	723	Original Credit Amount 12b	10	N	352, Line 12b	Enter Amount from Prior Year 5 - (Added for TY2016)

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

	724	Previous Used Amount 12c	10	N	352, Line 12c	Enter Amount from Prior Year 5 - (Added for TY2016)
	725	Available Credit Carryover 12d	10	N	352, Line 12d	Enter Amount from Prior Year 5 - (Added for TY2016)
	726	Original Credit Amount 13b	10	N	352, Line 13b	Enter Amount from Prior Year 4 - (Added for TY2016)
	727	Previous Used Amount 13c	10	N	352, Line 13c	Enter Amount from Prior Year 4 - (Added for TY2016)
	728	Available Credit Carryover 13d	10	N	352, Line 13d	Enter Amount from Prior Year 4 - (Added for TY2016)
	729	Original Credit Amount 14b	10	N	352, Line 14b	Enter Amount from Prior Year 3 - (Added for TY2016)
	730	Previous Used Amount 14c	10	N	352, Line 14c	Enter Amount from Prior Year 3 - (Added for TY2016)
	731	Available Credit Carryover 14d	10	N	352, Line 14d	Enter Amount from Prior Year 3 - (Added for TY2016)
	732	Original Credit Amount 15b	10	N	352, Line 15b	Enter Amount from Prior Year 2 - (Added for TY2016)
	733	Previous Used Amount 15c	10	N	352, Line 15c	Enter Amount from Prior Year 2 - (Added for TY2016)
	734	Available Credit Carryover 15d	10	N	352, Line 15d	Enter Amount from Prior Year 2 - (Added for TY2016)
	735	Original Credit Amount 16b	10	N	352, Line 16b	Enter Amount from Prior Year 1 - (Added for TY2016)
	736	Previous Used Amount 16c	10	N	352, Line 16c	Enter Amount from Prior Year 1 - (Added for TY2016)
	737	Available Credit Carryover 16d	10	N	352, Line 16d	Enter Amount from Prior Year 1 - (Added for TY2016)
	738	Total Available Credit Carryover	10	N	352, Line 17	Add Lines 12 through 16 Column d - (Added for TY2016)
	739	Current Yr's Credit	10	N	352, Line 18	Added for TY2016
	740	Available Carryover	10	N	352, Line 19	Added for TY2016
	741	Total Available Credit	10	N	352, Line 20	Added for TY2016
697	742	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2016  
Orange: Deleted Items for TY2016

Arizona 140PTC - Property Tax Credit						
2D Barcode Record Layout						
2015 FIELD NO	2016 FIELD NO	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
1	1	Header version	2	A		T1
2	2	Software Developer Code	4	N		NACTP assigned code
3	3	Version Number	2	N		01; use 2 digits (leading zero)
4	4	Form Type	6	A		140PTC
5	5	Form Year	4	N		2016
6	6	Primary First Name	10	A	140PTC, 1	
7	7	Primary Middle Initial	1	A	140PTC, 1	
8	8	Primary Last Name	35	A	140PTC, 1	
9	9	Primary SSN	9	N	140PTC, 1	No hyphens
10	10	Spouse First Name	10	A	140PTC, 1	Spouse Name required when MFJ or MFS
11	11	Spouse Middle Initial	1	A	140PTC, 1	Spouse Name required when MFJ or MFS
12	12	Spouse Last Name	35	A	140PTC, 1	Spouse Name required when MFJ or MFS
13	13	Spouse SSN	9	N	140PTC, 1	Spouse Name required when MFJ or MFS; No hyphens
14	14	Address line 1	35	A/N	140PTC, 2	Address line 1 or % (care of) line or recipient name if TP is deceased
15	15	Address line 2	35	A/N	140PTC, 2	Address line 2 or Address line if 1 is % or deceased TP
16	16	City	21	A	140PTC, 3	
17	17	State	2	A	140PTC, 3	
18	18	Zip Code	9	N	140PTC, 3	Include zip plus 4 in last 4 digits or zero fill if not available
19	19	Daytime Number	10	N	140PTC, 94	
20	20	Date of Birth	8	A	140PTC, 79	MMDDCCYY
21	21	6 Month Extension	1	A	140 PTC, 82F	X or null
22	22	Rent Yes	1	A	140 PTC, 4	X or null
23	23	Own Yes	1	A	140 PTC, 4	X or null
24	24	Full Year Resident Yes	1	A	140 PTC, 5	X or null
25	25	Full Year Resident No	1	A	140 PTC, 5	X or null
26	26	Property Tax Paid Yes	1	A	140 PTC, 6	X or null
27	27	Property Tax Paid No	1	A	140 PTC, 6	X or null
28	28	PTR per household Yes	1	A	140 PTC, 7	X or null
29	29	PTR per household No	1	A	140 PTC, 7	X or null
30	30	Over 65 Yes	1	A	140 PTC, 8	X or null
31	31	Over 65 No	1	A	140 PTC, 8	X or null
32	32	Title 16 Yes	1	A	140 PTC, 9	X or null
33	33	Title 16 No	1	A	140 PTC, 9	X or null
34	34	Income	10	N	140 PTC, 10	
35	35	Live Alone Yes	1	A	140 PTC, 11a	X or null
36	36	Live Alone No	1	A	140 PTC, 11b	X or null
37	37	Tax Credit	10	N	140 PTC, 11	
38	38	Amt Property Tax Own	10	N	140 PTC, 12	
39	39	Amt Property Tax Rent	10	N	140 PTC, 13	
40	40	Tot Property Tax Paid	10	N	140 PTC, 14	
41	41	SubTotal Credit	10	N	140 PTC, 15	
42	42	Taxpayer Name	35	A	140 PTC, 16	Comma Delimited
43	43	Taxpayer SSN	9	N	140 PTC, 16	No hyphens
44	44	Address City State Zip	35	AN	140 PTC, 16	Comma Delimited
45	45	Excise Tax Credit	10	N	140 PTC, 17	
46	46	Total Dependents	10	N	140 PTC, 18	
47	47	Total Credit	10	N	140 PTC, 19	
48	48	Foreign Account	1	A	140 PTC, 19A	Y or Null; If "Y", Fields 50-53 should be disabled.
49	49	Dir Dep Routing Nbr	9	N	140 PTC, 98	For direct deposit; direct debit is not supported.
50	50	Dir Dep Account Nbr	17	AN	140 PTC, 98	For direct deposit; direct debit is not supported.
51	51	Dir Dep Checking	1	A	140 PTC, 98	X or null; direct deposit only
52	52	Dir Dep Savings	1	A	140 PTC, 98	X or null; direct deposit only
53	53	Wages You	10	N	140 PTCPartIA1	
54	54	Wages Spouse	10	N	140 PTCPartIA2	
55	55	Wages Other	10	N	140 PTCPartIA3	
56	56	Total Wages	10	N	140 PTCPartIA4	
57	57	Div & Int You	10	N	140 PTCPartIB1	
58	58	Div & Int Spouse	10	N	140 PTCPartIB2	
59	59	Div & Int Other	10	N	140 PTCPartIB3	
60	60	Total Div & Int	10	N	140 PTCPartIB4	
61	61	Bus Farm Income You	10	N	140 PTCPartIC1	
62	62	Bus Farm Inc Spouse	10	N	140 PTCPartIC2	
63	63	Bus Farm Inc Other	10	N	140 PTCPartIC3	
64	64	Total Bus Farm Inc	10	N	140 PTCPartIC4	
65	65	Gain/Loss Prop You	10	N	140PTCPartID1	
66	66	GainLoss Prop Spouse	10	N	140PTCPartID2	
67	67	GainLoss Prop Other	10	N	140PTCPartID3	
68	68	TotalGainLoss Prop	10	N	140PTCPartID4	
69	69	Pension You	10	N	140PTCPartIE1	
70	70	Pension Spouse	10	N	140PTCPartIE2	

71	71	Pension Other	10	N	140PTCPartIE3	
72	72	Total Pension	10	N	140PTCPartIE4	
73	73	RentRoyalty IncYou	10	N	140PTCPartIF1	
74	74	RentRoyaltyInc Spous	10	N	140PTCPartIF2	
75	75	RentRoyalty Inc Other	10	N	140PTCPartIF3	
76	76	Total RentRoyalty Inc	10	N	140PTCPartIF4	
77	77	Part, Estate, Trust You	10	N	140PTCPartIG1	
78	78	PartEstateTrt Spouse	10	N	140PTCPartIG2	
79	79	PartEstateTrt Other	10	N	140PTCPartIG3	
80	80	Tot PartEstateTrt Inc	10	N	140PTCPartIG4	
81	81	Alimony You	10	N	140PTCPartIH1	
82	82	Alimony Spouse	10	N	140PTCPartIH2	
83	83	Alimony Other	10	N	140PTCPartIH3	
84	84	Total Alimony	10	N	140PTCPartIH4	
85	85	Other Income You	10	N	140PTCPartII1	
86	86	Other Income Spouse	10	N	140PTCPartII2	
87	87	Other Income Other	10	N	140PTCPartII3	
88	88	Total Other Income	10	N	140PTCPartII4	
89	89	Tot Household Income	10	N	140PTCPartIJ	
90	90	Dependent 1 Name	20	A	140PTC Part2, 1a	
91	91	Dependent 1 SSN	9	N	140PTC Part2, 1a	No hyphens
92	92	Dep 1 Relationship	12	A	140PTC Part2, 1a	
93	93	Dependent 1 Months	2	N	140PTC Part2, 1a	
94	94	Dependent 2 Name	20	A	140PTC Part2, 1b	
95	95	Dependent 2 SSN	9	N	140PTC Part2, 1b	No hyphens
96	96	Dep 2 Relationship	12	A	140PTC Part2, 1b	
97	97	Dependent 2 Months	2	N	140PTC Part2, 1b	
98	98	Dependent 3 Name	20	A	140PTC Part2, 1c	
99	99	Dependent 3 SSN	9	N	140PTC Part2, 1c	No hyphens
100	100	Dep 3 Relationship	12	A	140PTC Part2, 1c	
101	101	Dependent 3 Months	2	N	140PTC Part2, 1c	
102	102	Total Dependents	2	N	140PTC Part2, 2	
103	103	MFJ Claim	1	N	140PTC Part2, 3	
104	104	Household Population	2	N	140PTC Part2, 4	
105	105	Calculate Credit	10	N	140PTC Part2, 5	
106	106	Total Allowable Credit	10	N	140PTC Part2, 6	
107	107	Primary Occupation	16	A	140PTC, bkpg	
108	108	Spouse Occupation	16	A	140PTC, bkpg	
109	109	Preparer Name	35	AN	140PTC, bkpg	
110	110	Preparer Address	35	AN	140PTC, bkpg	
111	111	Preparer City	21	A	140PTC, bkpg	
112	112	Preparer State	2	A	140PTC, bkpg	
113	113	Preparer Zip Code	9	N	140PTC, bkpg	
114	114	Paid Preparer Phone Number	10	N	140PTC, bkpg	
115	115	Preparer FEIN	9	N	140PTC, bkpg	No hyphens
116	116	Trailer	5	A	*EOD*	

Legend