

DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F Check box 82F if filing under extension OR FISCAL YEAR BEGINNING AND ENDING 66F

1 Your First Name and Middle Initial Last Name Enter your SSN(s) Your Social Security Number

1 Spouse's First Name and Middle Initial (if box 4 or 6 checked) Last Name Spouse's Social Security No.

2 Current Home Address - number and street, rural route Apt. No. Daytime Phone (with area code) 94

3 City, Town or Post Office State ZIP Code Last Names Used in Last Four Prior Year(s) (if different) 97

FILING STATUS: 4 Married filing joint return 4a Injured Spouse Protection of Joint Overpayment 5 Head of household: Enter name of qualifying child or dependent on next line: 6 Married filing separate return: Enter spouse's name and Social Security Number above. 7 Single REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88R EXEMPTIONS: 8 Age 65 or over (you and/or spouse) 9 Blind (you and/or spouse) 10 Dependents: Do not include self or spouse. If completing lines 8 through 10, also complete lines 47 through 51. 81P PM 80R RCVD

11-13 Residency Status (check one): 11 Nonresident 12 Nonresident Active Military 13 Composite Return

(Box 10): Dependent Information: Children and other dependents. For more space, (check) and complete page 3.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2017, (e) if this person did not qualify as a dependent on your federal return, (f) if you did not claim this person on your federal return due to educational credits. Rows 10a, 10b, 10c, 10d.

Table with 4 columns: Description, 2017 FEDERAL Amount from Federal Return, 2017 ARIZONA Source Amount Only. Rows 14-40 including Arizona income, additions, and subtotals.

Place any required federal and AZ schedules or other documents after Form 140NR.

Your Name (as shown on page 1) \_\_\_\_\_ Your Social Security Number \_\_\_\_\_

Subtractions - cont. from page 1	41	Enter the amount from page 1, line 40 .....	41		00
	42	Interest on U.S. obligations such as U.S. savings bonds and treasury bills.....	42		00
	43	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only) .....	43		00
	44	Agricultural crops contributed to Arizona charitable organizations.....	44		00
	45	Other Subtractions from Income: See instructions and include your own schedule.....	45		00
Exemptions	46	Subtract lines 42 through 45 from line 41.....	46		00
	47	Age 65 or over: Multiply the number in box 8 by \$2,100.....	47		00
	48	Blind: Multiply the number in box 9 by \$1,500 .....	48		00
	49	Dependents: Multiply the number in box 10 by \$2,300 .....	49		00
	50	Add lines 47, 48, and 49. Enter the total .....	50		00
	51	Multiply line 50 by the Arizona ratio on line 27 .....	51		00
	52	<b>Arizona adjusted gross income:</b> Subtract line 51 from line 46.....	52		00

Balance of Tax	53	<b>Deductions: Check box and enter amount.</b> See instructions..... 53I <input type="checkbox"/> ITEMIZED 53S <input type="checkbox"/> STANDARD	53		00
	54	Personal exemptions: See instructions.....	54		00
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero, enter "0" .....	55		00
	56	Compute the tax using amount from line 55 and Tax Table X or Y.....	56		00
	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 40 .....	57		00
	58	Subtotal of tax: Add lines 56 and 57 and enter the total .....	58		00
	59	Credits from Arizona Form 301, Part 2, line 76 .....	59		00
	60	<b>Balance of tax:</b> Subtract line 59 from line 58. If line 59 is greater than line 58, enter "0" .....	60		00

Total Payments and Refundable Credits	61	2017 AZ income tax withheld.....	61		00
	62	2017 AZ estimated tax payments. 62a <input type="text"/> 00 Claim of Right 62b <input type="text"/> 00 Add 62a and 62b..	62c		00
	63	2017 AZ extension payment (Form 204) .....	63		00
	64	Other refundable credits: Check the box(es) and enter the total amount..... 641 <input type="checkbox"/> 308-I 642 <input type="checkbox"/> 342 643 <input type="checkbox"/> 349	64		00
	65	<b>Total payments and refundable credits:</b> Add lines 61 through 64 and enter the total.....	65		00
Tax Due or Overpayment	66	<b>TAX DUE:</b> If line 60 is larger than line 65, subtract line 65 from line 60, and enter amount of tax due. Skip lines 67, 68 and 69.....	66		00
	67	<b>OVERPAYMENT:</b> If line 65 is larger than line 60, subtract line 60 from line 65, and enter amount of overpayment.....	67		00
	68	Amount of line 67 to be applied to 2018 estimated tax.....	68		00
	69	Balance of overpayment: Subtract line 68 from line 67.....	69		00

Voluntary Gifts	70 - 80 Voluntary Gifts to:		Solutions Teams Assigned to Schools.....	70		00	Arizona Wildlife.....	71		00		
	Child Abuse Prevention.....	72		00	Domestic Violence Shelter.....	73		00	Political Gift.....	74		00
	Neighbors Helping Neighbors.....	75		00	Special Olympics.....	76		00	Veterans' Donations Fund.....	77		00
	I Didn't Pay Enough Fund.....	78		00	Sustainable State Parks and Road Fund.....	79		00	Spay/Neuter of Animals .....	80		00
	81 Political Party (if amount is entered on line 74 - check only one): 811 <input type="checkbox"/> Democratic 812 <input type="checkbox"/> Green Party 813 <input type="checkbox"/> Libertarian 814 <input type="checkbox"/> Republican											

Penalty	82	Estimated payment penalty and Arizona Long-Term Health Care Saving Account (AZLTHSA) penalty.....	82		00
	83	831 <input type="checkbox"/> Annualized/Other 832 <input type="checkbox"/> Farmer or Fisherman 833 <input type="checkbox"/> Form 221 included 834 <input type="checkbox"/> AZLTHSA Penalty			
	84	Add lines 70 through 80 and 82; enter the total.....	84		00

Refund or Amount Owed	85	<b>REFUND:</b> Subtract line 84 from line 69. If less than zero, enter amount owed on line 86 .....	85		00
	<b>Direct Deposit of Refund: Check box 85A</b> if your deposit will be ultimately placed in a <b>foreign account</b> ; see instructions. 85A <input type="checkbox"/> <input type="checkbox"/> C <input type="checkbox"/> Checking or <input type="checkbox"/> S <input type="checkbox"/> Savings ROUTING NUMBER: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ACCOUNT NUMBER: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
	86	<b>AMOUNT OWED:</b> Add lines 66 and 84. Make check payable to Arizona Department of Revenue; write your SSN on payment ...	86		00

**PLEASE SIGN HERE**

Under penalties of perjury, I declare that I have read this return and any documents with it, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

YOUR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

SPOUSE'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ SPOUSE'S OCCUPATION \_\_\_\_\_

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

PAID PREPARER'S STREET ADDRESS \_\_\_\_\_ PAID PREPARER'S TIN \_\_\_\_\_

PAID PREPARER'S CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PAID PREPARER'S PHONE NUMBER \_\_\_\_\_

Your Name (as shown on page 1)

Your Social Security Number

### Dependent Information - Continuation Sheet from Page 1 Dependents

Include with your return **only** if listing additional dependents.

Complete this form **only** if you need additional space from page 1 to list your dependents.  
If you do not list **all** dependents claimed on page 1 of your income tax return, you may lose the exemptions.

**Children and other dependents, continued from page 1.**

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2017	(e) ✓ if this person did not qualify as a dependent on your federal return	(f) ✓ if you did not claim this person on your federal return due to educational credits
10e					<input type="checkbox"/>	<input type="checkbox"/>
10f					<input type="checkbox"/>	<input type="checkbox"/>
10g					<input type="checkbox"/>	<input type="checkbox"/>
10h					<input type="checkbox"/>	<input type="checkbox"/>
10i					<input type="checkbox"/>	<input type="checkbox"/>
10j					<input type="checkbox"/>	<input type="checkbox"/>
10k					<input type="checkbox"/>	<input type="checkbox"/>
10l					<input type="checkbox"/>	<input type="checkbox"/>
10m					<input type="checkbox"/>	<input type="checkbox"/>
10n					<input type="checkbox"/>	<input type="checkbox"/>
10o					<input type="checkbox"/>	<input type="checkbox"/>
10p					<input type="checkbox"/>	<input type="checkbox"/>
10q					<input type="checkbox"/>	<input type="checkbox"/>
10r					<input type="checkbox"/>	<input type="checkbox"/>
10s					<input type="checkbox"/>	<input type="checkbox"/>
10t					<input type="checkbox"/>	<input type="checkbox"/>
10u					<input type="checkbox"/>	<input type="checkbox"/>
10v					<input type="checkbox"/>	<input type="checkbox"/>

**2017**  
**Arizona Tax Tables X and Y**  
**For Form 140NR**

**Table X - Use Table X if your filing status is Single or Married Filing Separate**

(a)		(b)	(c)	(d)	(e)	(f)
If taxable income from Form 140NR, line 55 is:		Enter the amount from Form 140NR, line 55	Multiply the amount entered in column (b) by	Enter the result	Subtract	Your tax. Round the difference and enter this amount on Form 140NR, line 56
Over	But Not over					
\$0	\$10,346	X	.0259 =	-	0.00 =	
\$10,346	\$25,861	X	.0288 =	- \$	30.00 =	
\$25,861	\$51,721	X	.0336 =	- \$	154.00 =	
\$51,721	\$155,159	X	.0424 =	- \$	609.00 =	
\$155,159	and over	X	.0454 =	- \$	1,075.00 =	

**Table Y - Use Table Y if your filing status is Married Filing Joint or Head of Household**

(a)		(b)	(c)	(d)	(e)	(f)
If taxable income from Form 140NR, line 55 is:		Enter the amount from Form 140NR, line 55	Multiply the amount entered in column (b) by	Enter the result	Subtract	Your tax. Round the difference and enter this amount on Form 140NR, line 56
Over	But Not over					
\$0	\$20,690	X	.0259 =	-	0.00 =	
\$20,690	\$51,721	X	.0288 =	- \$	60.00 =	
\$51,721	\$103,440	X	.0336 =	- \$	308.00 =	
\$103,440	\$310,317	X	.0424 =	- \$	1,219.00 =	
\$310,317	and over	X	.0454 =	- \$	2,149.00 =	