

Arizona 140 - Full Year Resident Return

2D Barcode Record Layout

2017 FIELD NO	2018 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	2018
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	Injured Spouse Protection of Joint Overpayment	1	A	140, Line 4A	
23	23	Head of Household	1	A	140, Line 5	X or null
24	24	Married filing Separate	1	A	140, Line 6	X or null
25	25	Single	1	A	140, Line 7	X or null
26	26	Age 65 or over	1	N	140, Line 8	
27	27	Blind	1	N	140, Line 9	
28	28	Dependents	2	N	140, Line 10	
29	29	Parents/Ancestors	1	N	140, Line 11	
30	30	6 Month Extension	1	A	140, Line 82F	X or null
31	31	Dependent Info More Space--Qualifying Dependents	1	A	140, Box 10	X or null
32	32	Dependent 1 First Name	10	A	140, 10A(A1)	
33	33	Dependent 1 Last Name	10	A	140, 10A(A2)	
34	34	Dependent 1 SSN	9	N	140, 10A(B)	No hyphens
35	35	Dependent 1 Relationship	12	A	140, 10A(C)	
36	36	Dependent 1 Months	2	A	140, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
37	37	Dependent 1 Name Not Qualifying	1	A	140, Box 10A(E)	X or null
38	38	Dependent 1 Name Education	1	A	140, Box 10A(F)	X or null
39	39	Dependent 2 First Name	10	A	140, 10B(A1)	
40	40	Dependent 2 Last Name	10	A	140, 10B(A2)	
41	41	Dependent 2 SSN	9	N	140, 10B(B)	No hyphens
42	42	Dependent 2 Relationship	12	A	140, 10B(C)	
43	43	Dependent 2 Months	2	A	140, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
44	44	Dependent 2 Name Not Qualifying	1	A	140, Box 10B(E)	X or null
45	45	Dependent 2 Name Education	1	A	140, Box 10B(F)	X or null
46	46	Dependent 3 First Name	10	A	140, 10C(A1)	
47	47	Dependent 3 Last Name	10	A	140, 10C(A2)	
48	48	Dependent 3 SSN	9	N	140, 10C(B)	No hyphens
49	49	Dependent 3 Relationship	12	A	140, 10C(C)	
50	50	Dependent 3 Months	2	A	140, 10C(D)	Valid Values are (0 - 12) & S (Stillborn)
51	51	Dependent 3 Name Not Qualifying	1	A	140, Box 10C(E)	X or null
52	52	Dependent 3 Name Education	1	A	140, Box 10C(F)	X or null
53	53	Dependent Info More Space--Qualifying Ancestors	1	A	140, Box 11	X or null
54	54	Dependent 1 Qual Anc First Name	10	A	140, Line 11a(a1)	
55	55	Dependent 1 Qual Anc Last Name	10	A	140, Line 11a(a2)	
56	56	Dependent 1 Qual Anc SSN	9	N	140, Line 11a(b)	No hyphens
57	57	Dependent 1 Qual Anc Relationship	12	A	140, Line 11a(c)	
58	58	Dependent 1 Qual Anc Months	2	A	140, Line 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
59	59	Dependent 1 Qual Anc Age 65+	1	A	140, Box 11a(e)	X or null
60	60	Dependent 1 Qual Anc Deceased In Tax Year	1	A	140, Box 11a(f)	X or null
61	61	Dependent 2 Qual Anc First Name	10	A	140, Line 11b(a1)	
62	62	Dependent 2 Qual Anc Last Name	10	A	140, Line 11b(a2)	
63	63	Dependent 2 Qual Anc SSN	9	N	140, Line 11b(b)	No hyphens
64	64	Dependent 2 Qual Anc Relationship	12	A	140, Line 11b(c)	
65	65	Dependent 2 Qual Anc Months	2	A	140, Line 11b(d)	Valid Values are (0 - 12) & S (Stillborn)
66	66	Dependent 2 Qual Anc Age 65+	1	A	140, Box 11b(e)	X or null
67	67	Dependent 2 Qual Anc Deceased In Tax Year	1	A	140, Box 11b(f)	X or null
68	68	Fed Adjusted Gross Income	10	N	140, Line 12	
69	69	Non-AZ Mun Interest	10	N	140, Line 13	
70	70	Partnership Income Adjustment Add	10	N	140, Line 14	Name Change Only
71	71	Total Federal Depreciation	10	N	140, Line 15	
72	72	Net capital (loss) derived from the exchange of legal tender	10	N	140, Line 16	Added TY2018
72	73	Other Additions	10	N	140, Line 17	
73	74	Subtotal	10	N	140, Line 18	Use existing "Reported <=> Calculated" TAS suspense rule if the valu
74	75	Net Capital Gain/Loss	10	N	140, Line 19	
75	76	Total Net Short-Term Capital Gain/Loss	10	N	140, Line 20	
76	77	Total Net Long-Term Capital Gain/Loss	10	N	140, Line 21	
77	78	Net Long-Term Capital Gain From Assets	10	N	140, Line 22	
78	79	Capital Gain Allowable Subt. Calculation	10	N	140, Line 23	Multiply Line 22 by 25% (.25) and enter the result
79	80	Net Capital Gain - Investment In Qual. Small Business	10	N	140, Line 24	
81	81	Net capital (loss) derived from the exchange of legal tender	10	N	140, Line 25	Added TY2018
80	82	Recalculated Arizona Depreciation	10	N	140, Line 26	
81	83	Partnership Income Adjustment Sub	10	N	140, Line 27	Name Change Only
82	84	Int Savings Bond	10	N	140, Line 28	
83	85	Exclusive Govt Pens	10	N	140, Line 29	
84	86	AZ Lottery Winnings	10	N	140, Line 30	
85	87	SS or RR Benefits	10	N	140, Line 31	
86	88	Wages Native American	10	N	140, Line 32	
87	89	Active Duty Military Pay	10	N	140, Line 33	
88	90	Net Operating Loss Adjust	10	N	140, Line 34	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

89	91	Contributions To 529 College Savings Plans	10	N	140, Line 35	
90	92	Other Subtractions	10	N	140, Line 36	
91	93	Total Subtractions	10	N	140, Line 37	Subtract lines 23 through 36 from line 18
92	94	Total Subtractions From Additions--Page 2	10	N	140, Line 38	
93	95	Exemption Age 65 or Over	10	N	140, Line 39	Multiply the number in Box 8 by \$2100
94	96	Exemption Blind	10	N	140, Line 40	Multiply the number in Box 9 by \$1500
95	97	Exemption Dependents	10	N	140, Line 41	Multiply the number in Box 10 by \$2300
96	98	Exemption Parents and Grand Parents	10	N	140, Line 42	Multiply the number in Box 11 by \$10000
97	99	AZ Adjusted Gross	10	N	140, Line 43	Subtract Lines 39 through 42 from 38
98	100	Itemized Deduction	1	A	140 Box 44-I	X or null
99	101	Standard Deduction	1	A	140 Box 44-S	X or null
100	102	Deduction Amount	10	N	140 Line 44	Single, Married Filing Separate = \$5,312 Married Filing Jointly, Head of Household = \$6,000, Qualifying Widow = \$6,000
101	103	Personal Exemptions	10	N	140 Line 45	Single=\$2200, MFJ-0 Dep.=\$4400, MFJ-1+ Dep.=\$6600, HOH/Single=\$4400, HOH/Married=\$3300, MFS-0 Dep.=\$2200, MFS-1+ Dep.=\$3300
102	104	AZ Taxable Income	10	N	140 Line 46	Subtract lines 44 and 45 from line 43. If < 0 enter 0
103	105	Compute Tax	10	N	140 Line 47	Compute the tax using amount on line 46 and Tax Table X, Y or Opt
104	106	Tax from Recapture Credits	10	N	140 Line 48	
105	107	Subtotal Tax	10	N	140 Line 49	add lines 47 and 48
106	108	Family Income Credit	10	N	140 Line 50	
107	109	Credits from Arizona Credit Forms	10	N	140 Line 51	
108	110	Balance of Tax	10	N	140 Line 52	Subtract lines 50 and 51 from line 49. If 50+51>49 enter 0
109	111	Withholding	10	N	140 Line 53	
110	112	Estimated Payments	10	N	140 Line 54a	
111	113	Claim of Right	10	N	140 Line 54b	
112	114	Total Estimated Payments	10	N	140 Line 54c	
113	115	Extension Amount (Extension Payments)	10	N	140 Line 55	
114	116	Increase Excise Tax Credit	10	N	140 Line 56	Use worksheet to determine amount.
115	117	Property Tax Credit	10	N	140 Line 57	
116	118	Refundable Credit Form 308-I	1	A	140 Line 58-1	value "1" if checked; "0" or null if blank
117		Refundable Credit Form 342	1	A	140 Line 58-2	Removed TY2018
118	119	Refundable Credit Form 349	1	A	140 Line 58-2	value "2" if checked; "0" or null if blank
119	120	Other Refundable Credits	10	N	140 Line 58	
120	121	Total Payments	10	N	140 Line 59	"add lines 53 through 58"
121	122	Tax Due	10	N	140 Line 60	"If line 52 is larger than line 59, subtract line 59 from line 52"
122	123	Overpayment	10	N	140 Line 61	If line 59 is larger than line 52, subtract line 52 from line 59"
123	124	Next Year Est Payment	10	N	140 Line 62	Amount of Line 61 to be Applied to 2019 Estimated Tax
124	125	Balance Overpayment	10	N	140 Line 63	"subtract line 62 from line 61"
125	126	Solutions Teams Assigned To Schools Contrib	10	N	140 Line 64	
126	127	AZ Wildlife Contrib	10	N	140 Line 65	
127	128	Child Abuse Contrib	10	N	140 Line 66	
128	129	Domestic Violence Contrib	10	N	140 Line 67	
129	130	Political Gift	10	N	140 Line 68	
130	131	Neighbors Help Contrib	10	N	140 Line 69	
131	132	Spec Olympic Contrib	10	N	140 Line 70	
132	133	Veterans' Donations Fund	10	N	140 Line 71	
133	134	I Didn't Pay Enough Fund	10	N	140 Line 72	
134	135	Sustainable State Parks and Road Fund	10	N	140 Line 73	
135	136	Spay/Neuter of Animals	10	N	140 Line 74	
136	137	Democratic Party	1	A	140 Line 75-1	"2" or null
137	138	Green Party	1	A	140 Line 75-2	"3" or null - Name Change Only
138	139	Libertarian Party	1	A	140 Line 75-3	"4" or null
139	140	Republican Party	1	A	140 Line 75-4	"5" or null
140	141	Est Payment	10	N	140 Line 76	
141	142	Annualized Other	1	A	140 Line 77-1	Y or null
142	143	Farmer/Fisherman	1	A	140 Line 77-2	Y or null
143	144	Form 221 Attached	1	A	140 Line 77-3	Y or null
144		AZLTHSA Penalty	1	A	140 Line 76-4	Removed TY2018
145	145	Total Contributions & Penalty	10	N	140 Line 78	Add lines 64 through 74 and 76
146	146	Refund Amount	10	N	140 Line 79	subtract line 78 from line 63
147	147	Foreign Account	1	A	140 Line 79A	Y or Null; If "Y" fields 148-151 disabled
148	148	Dir Dep Routing Nbr	9	N	140 Line 98	For direct deposit; direct debit is not supported
149	149	Dir Dep Account Nbr	17	A/N	140 Line 98	For direct deposit; direct debit is not supported
150	150	Dir Dep Checking	1	A	140 Line 98	X or null; direct deposit only
151	151	Dir Dep Savings	1	A	140 Line 98	X or null; direct deposit only
152	152	Amount Owed	10	N	140 Line 80	add lines 60 and 78
153	153	Primary Occupation	16	A	140, pg2	
154	154	Spouse Occupation	16	A	140, pg2	
155	155	Preparer Name	35	A/N	140, pg2	
156	156	Preparer FEIN	9	N	140, pg2	No hyphens
157	157	Preparer Address	35	A/N	140, pg2	
158	158	Preparer City	21	A	140, pg2	
159	159	Preparer State	2	A	140, pg2	
160	160	Preparer Zip Code	9	N	140, pg2	
161	161	Paid Preparer Phone Number	10	N	140, pg2	
162	162	Prior Last Names	20	A	Front Page Line 97	Comma Delimited
163	163	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
164	164	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
165	165	Medical Allowance	10	N	FedSchA(2-D) 3	
166	166	Total Medical/Dental	10	N	FedSchA(2-D) 4	
167	167	State and Local Taxes	10	N	FedSchA(2-D) 5	
168	168	Real Estate Taxes	10	N	FedSchA(2-D) 6	
169	169	Personal Property Taxes	10	N	FedSchA(2-D) 7	
170	170	Other Taxes	10	N	FedSchA(2-D) 8	
171	171	Total Other Taxes	10	N	FedSchA(2-D) 9	
172	172	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
173	173	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
174	174	Deductible Points	10	N	FedSchA(2-D) 12	
175	175	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
176	176	Investment Interest	10	N	FedSchA(2-D) 14	
177	177	Total Interest	10	N	FedSchA(2-D) 15	
178	178	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
179	179	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

180	180	Carryover Prior Year	10	N	FedSchA(2-D) 18	
181	181	Total Contrib	10	N	FedSchA(2-D) 19	
182	182	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
183	183	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
184	184	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
185	185	Tot Other Exp	10	N	FedSchA(2-D) 23	
186	186	Gross Misc Ded	10	N	FedSchA(2-D) 24	
187	187	Miscellaneous Allow	10	N	FedSchA(2-D) 26	
188	188	Total Misc Deduct	10	N	FedSchA(2-D) 27	
189	189	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28	
190	190	Total Item Deduct	10	N	FedSchA(2-D) 29	
191	191	Med/Dent Expenses	10	N	AzSchA 1	
192		MSA Distribut Used	10	N	AzSchA 2	Removed TY2018
193	192	Fed Med Deductions	10	N	AzSchA 2	
194		Total Med Deducts	10	N	AzSchA 4	Removed TY2018
195	193	Medical Add Adjust	10	N	AzSchA 3	
196	194	Medical Subt Adjust	10	N	AzSchA 4	
197	195	Fed Credit Int Paid	10	N	AzSchA 5	
198	196	Wagering Loss Fed	10	N	AzSchA 6	
199	197	Gambling Winnings	10	N	AzSchA 7	
200	198	AZ Lottery Subt	10	N	AzSchA 8	
201	199	Max Gamble Loss Deduct	10	N	AzSchA 9	
202	200	Gamble Subt Adjust	10	N	AzSchA 10	
203	201	Contribution Adjust	10	N	AzSchA 11	
204	202	Other Adjustments	10	N	AzSchA 12	
205	203	Sum Add Adjust	10	N	AzSchA 13	
206	204	Sum Subt Adjust	10	N	AzSchA 14	
207	205	Tot Fed Item Deduct	10	N	AzSchA 15	
	207	Sum Lines 15 & 16	10	N	AzSchA 17	
208	209	Az Item Deductions	10	N	AzSchA 19	
210	210	Employer ID (1)	10	N	W-2 (1st Wage Statement)	
211	211	Employee SSN (1)	10	N	W-2 (1st Wage Statement)	
212	212	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
213	213	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
214	214	Employer ID (2)	10	N	W-2 (2nd Wage Statement)	
215	215	Employee SSN (2)	10	N	W-2 (2nd Wage Statement)	
216	216	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
217	217	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
218	218	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
219	219	Employee SSN (3)	9	N	W-2 (3rd Wage Statement)	
220	220	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
221	221	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	
222	222	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
223	223	Employee SSN (4)	9	N	W-2 (4th Wage Statement)	
224	224	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
225	225	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
226	226	Payer's ID (1)	9	N	1099-R (1st Statement)	
227	227	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
228	228	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
229	229	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
230	230	1099 Az WH (1)	10	N	1099-R (1st Statement)	
231	231	Payer's ID (2)	9	N	1099-R (2nd Statement)	
232	232	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
233	233	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
234	234	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
235	235	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
236	236	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)	
237	237	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)	
238	238	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)	
239	239	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)	
240	240	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)	
241		Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)	Removed TY2018
242	241	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)	
243	242	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)	
		Recycling Equipment Credit a	10	N	301, Line 4a (Form 307)	Removed TY2018
244		Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)	Removed TY2018
245		Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)	Removed TY2018
246	243	Increased Research Act Ind Credit a	10	N	301, Line 4a (Form 308-I)	
247	244	Increased Research Act Ind Credit b	10	N	301, Line 4b (Form 308-I)	
248	245	Increased Research Act Ind Credit c	10	N	301, Line 4c (Form 308-I)	
249	246	Tax Paid Other State Cntry Credit a	10	N	301, Line 5a (Form 309)	
250	247	Tax Paid Other State Cntry Credit c	10	N	301, Line 5c (Form 309)	
251	248	Solar Energy Devices Credit a	10	N	301, Line 6a (Form 310)	
252	249	Solar Energy Devices Credit b	10	N	301, Line 6b (Form 310)	
253	250	Solar Energy Devices Credit c	10	N	301, Line 6c (Form 310)	
254	251	Agri Water Conserv Sys Credit a	10	N	301, Line 7a (Form 312)	
255	252	Agri Water Conserv Sys Credit b	10	N	301, Line 7b (Form 312)	
256	253	Agri Water Conserv Sys Credit c	10	N	301, Line 7c (Form 312)	
257	254	Polution Control Credit a	10	N	301, Line 8a (Form 315)	
258	255	Polution Control Credit b	10	N	301, Line 8b (Form 315)	
259	256	Polution Control Credit c	10	N	301, Line 8c (Form 315)	
260		Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 9a (Form 319)	Removed TY2018
261	257	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 9b (Form 319)	
262	258	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 9c (Form 319)	
263	259	Employ TANF Recipients Credit a	10	N	301, Line 10a (Form 320)	
264	260	Employ TANF Recipients Credit b	10	N	301, Line 10b (Form 320)	
265	261	Employ TANF Recipients Credit c	10	N	301, Line 10c (Form 320)	
266	262	Contrib Qual Chart Orgns Credit a	10	N	301, Line 11a (Form 321)	
267	263	Contrib Qual Chart Orgns Credit b	10	N	301, Line 11b (Form 321)	
268	264	Contrib Qual Chart Orgns Credit c	10	N	301, Line 11c (Form 321)	
269	265	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 12a (Form 322)	
270	266	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 12b (Form 322)	
271	267	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 12c (Form 322)	
272	268	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 13a (Form 323)	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

273	269	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 13b (Form 323)	
274	270	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 13c (Form 323)	
275	271	Agri Pol Cntrl Equip Credit a	10	N	301, Line 14a (Form 325)	
276	272	Agri Pol Cntrl Equip Credit b	10	N	301, Line 14b (Form 325)	
277	273	Agri Pol Cntrl Equip Credit c	10	N	301, Line 14c (Form 325)	
278	274	Donation School Site Credit a	10	N	301, Line 15a (Form 331)	
279	275	Donation School Site Credit b	10	N	301, Line 15b (Form 331)	
280	276	Donation School Site Credit c	10	N	301, Line 15c (Form 331)	
281	277	Healthy Forest Enterprises Credit a	10	N	301, Line 16a (Form 332)	
282	278	Healthy Forest Enterprises Credit b	10	N	301, Line 16b (Form 332)	
283	279	Healthy Forest Enterprises Credit c	10	N	301, Line 16c (Form 332)	
284	280	Employ Natl Guard Members Credit a	10	N	301, Line 17a (Form 333)	
285	281	Employ Natl Guard Members Credit b	10	N	301, Line 17b (Form 333)	
286	282	Employ Natl Guard Members Credit c	10	N	301, Line 17c (Form 333)	
287	283	Business Contrib School Tuition Org a	10	N	301, Line 18a (Form 335-l)	
288	284	Business Contrib School Tuition Org b	10	N	301, Line 18b (Form 335-l)	
289	285	Business Contrib School Tuition Org c	10	N	301, Line 18c (Form 335-l)	
290	286	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 19a (Form 336)	
291	287	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 19b (Form 336)	
292	288	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 19c (Form 336)	
293	289	Invest Qual Small Bus Credit a	10	N	301, Line 20a (Form 338)	
294	290	Invest Qual Small Bus Credit b	10	N	301, Line 20b (Form 338)	
295	291	Invest Qual Small Bus Credit c	10	N	301, Line 20c (Form 338)	
296	292	Military Fam Relf Fnd Credit a	10	N	301, Line 21a (Form 340)	
297	293	Military Fam Relf Fnd Credit c	10	N	301, Line 21c (Form 340)	
298	294	Business Contrib School Tuition Disabled a	10	N	301, Line 22a (Form 341-l)	
299	295	Business Contrib School Tuition Disabled b	10	N	301, Line 22b (Form 341-l)	
300	296	Business Contrib School Tuition Disabled c	10	N	301, Line 22c (Form 341-l)	
301	297	Renew Energy Prod Tax Credit a	10	N	301, Line 23a (Form 343)	
302	298	Renew Energy Prod Tax Credit b	10	N	301, Line 23b (Form 343)	
303	299	Renew Energy Prod Tax Credit c	10	N	301, Line 23c (Form 343)	
304		Solar Liquid Fuel Credit a	10	N	301, Line 25a (Form 344)	Removed TY2018
305		Solar Liquid Fuel Credit c	10	N	301, Line 25c (Form 344)	Removed TY2018
306	300	New Employment Credit a	10	N	301, Line 24a (Form 345)	
307	301	New Employment Credit b	10	N	301, Line 24b (Form 345)	
308	302	New Employment Credit c	10	N	301, Line 24c (Form 345)	
309	303	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 25a (Form 346)	
310	304	Incrs Resrch Act Basic Resrch Credit b	10	N	301, Line 25b (Form 346)	
311	305	Incrs Resrch Act Basic Resrch Credit c	10	N	301, Line 25c (Form 346)	
312		Qual Hlth Ins Plan Credit b	10	N	301, Line 28b (Form 347)	Removed TY2018
313		Qual Hlth Ins Plan Credit c	10	N	301, Line 28c (Form 347)	Removed TY2018
314	306	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 26a (Form 348)	
315	307	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 26b (Form 348)	
316	308	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 26c (Form 348)	
317	309	Renew Energy Invest Prod Sif Consum Credit a	10	N	301, Line 27a (Form 351)	
318	310	Renew Energy Invest Prod Sif Consum Credit b	10	N	301, Line 27b (Form 351)	
319	311	Renew Energy Invest Prod Sif Consum Credit c	10	N	301, Line 27c (Form 351)	
320	312	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 28a (Form 352)	
	313	Contrib Qual Foster Care Char Orgns Credit b	10	N	301, Line 28b (Form 352)	Added TY2018
321	314	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 28c (Form 352)	
322	315	Total Available Nonrefundable Tax Credits	10	N	301, Line 30	Add Lines 1 through 28 Column c Only
323	316	Total AZ Tax	10	N	301, Line 31	Tax From F140 L47 or F140PY L58 or F140NR L58 or F140X L35
324	317	Tax Recap Environ Tech Fac Credit	10	N	301, Line 32	From AZ Credit Form 305 Part 5 Line 21
325	318	Tax Recap Credits Hlthy Forest Entrs	10	N	301, Line 33	From AZ Credit Form 332 Part 10 Line 40 and Part 11 Line 46
326		Tax Recap Credits Renew Engy Ind	10	N	301, Line 34	Removed TY2018
327	319	Tax Recap Credits Qual Facs	10	N	301, Line 34	From AZ Credit Form 349 Part 7 Line 19
328	320	Tax Recap Crdts Renew Engy Invest Prod Sif Cons	10	N	301, Line 35	From AZ Credit Form 351 Part 2 Line 24
329	321	Total Recapture of Credits	10	N	301, Line 36	Add Lines 32 through 35 Enter Here and on F140 L48, F140PY L59, F140NR L59, F140X L36
330	322	Subtotal Tax Credits and Recap Credits	10	N	301, Line 37	Add Lines 31 and 36
331	323	Family Income Tax Credit	10	N	301, Line 38	From F140 L50 or F140PY L61 or F140X L38
332	324	Total Tax Credits and Recap Credits	10	N	301, Line 39	Subtract Line 38 from Line 37. If less than Zero Enter Zero
333	325	Enterprise Zone Credit Used	10	N	301, Line 40 (Form 304)	
334	326	Environ Tech Fac Credit Used	10	N	301, Line 41 (Form 305)	
335	327	Military Reuse Zone Credit Used	10	N	301, Line 42 (Form 306)	
336		Recycling Equipment Credit Used	10	N	301, Line 47 (Form 307)	Removed TY2018
337	328	Increased Research Act Indiv Credit Used	10	N	301, Line 43 (Form 308-l)	
338	329	Tax Paid Other State Ctry Credit Used	10	N	301, Line 44 (Form 309)	
339	330	Solar Energy Devices Credit Used	10	N	301, Line 45 (Form 310)	
340	331	Agri Water Conserv Sys Credit Used	10	N	301, Line 46 (Form 312)	
341	332	Polution Control Credit Used	10	N	301, Line 47 (Form 315)	
342	333	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 48 (Form 319)	
343	334	Employ TANF Recipients Credit Used	10	N	301, Line 49 (Form 320)	
344	335	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 50 (Form 321)	
345	336	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 51 (Form 322)	
346	337	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 52 (Form 323)	
347	338	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 53 (Form 325)	
348	339	Donation School Site Credit Used	10	N	301, Line 54 (Form 331)	
349	340	Healthy Forest Enterprises Credit Used	10	N	301, Line 55 (Form 332)	
350	341	Employ Natl Guard Members Credit Used	10	N	301, Line 56 (Form 333)	
351	342	Business Contrib School Tuition Org Used	10	N	301, Line 57 (Form 335-l)	
352	343	Solar Energy Devices Comm Indus Used	10	N	301, Line 58 (Form 336)	
353	344	Invest Qual Small Bus Credit Used	10	N	301, Line 59 (Form 338)	
354	345	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 60 (Form 340)	
355	346	Business Contrib School Tuition Disabled Used	10	N	301, Line 61 (Form 341-l)	
356	347	Renew Energy Prod Tax Credit Used	10	N	301, Line 62 (Form 343)	
357		Solar Liquid Fuel Credit Used	10	N	301, Line 68 (Form 344)	Removed TY2018
358	348	New Employment Credit Used	10	N	301, Line 63 (Form 345)	
359	349	Incrs Resrch Act Basic Resrch Credit Used	10	N	301, Line 64 (Form 346)	
360		Qual Hlth Ins Plans Credit Used	10	N	301, Line 71 (Form 347)	Removed TY2018
361	350	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 65 (Form 348)	
362	351	Renew Energy Invest Prod Sif Consum Credit Used	10	N	301, Line 66 (Form 351)	
363	352	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 67 (Form 352)	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

364	353	Total Nonrefundable Tax Credits Used	10	N	301, Line 69 (Form 344)	Add Lines 40 through 67. Total Cannot be more than 39. Enter this a
365	354	Description of Income Items a	30	A	309, Line 1a	
366	355	Description of Income Items b	30	A	309, Line 1b	
367	356	Description of Income Items c	30	A	309, Line 1c	
368	357	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
369	358	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
370	359	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
371	360	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
372	361	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
373	362	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
374	363	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
375	364	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
376	365	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
377	366	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
378	367	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
379	368	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
380	369	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
381	370	AZ Tax Liable Less Credits	10	N	309, Line 7	
382	371	Amt Part1 Line6	10	N	309, Line 8	
383	372	Amt AZ Income Tax Imposed	10	N	309, Line 9	
384	373	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)
385	374	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
386	375	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
387	376	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
388	377	Tot Income Taxable By Other	10	N	309, Line 14	
389	378	Pct Income Taxable by Other	6	D(4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
390	379	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
391	380	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
392	381	Description of Income Items a	30	A	309, Line 1a (2)	
393	382	Description of Income Items b	30	A	309, Line 1b (2)	
394	383	Description of Income Items c	30	A	309, Line 1c (2)	
395	384	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
396	385	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
397	386	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
398	387	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
399	388	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
400	389	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
401	390	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
402	391	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
403	392	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
404	393	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
405	394	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
406	395	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
407	396	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
408	397	AZ Tax Liable Less Credits	10	N	309, Line 7 (2)	
409	398	Amt Part1 Line6	10	N	309, Line 8 (2)	
410	399	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
411	400	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)
412	401	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
413	402	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
414	403	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6
415	404	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
416	405	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)
417	406	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
418	407	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
419	408	Address of Solar Energy Device	35	A/N	310, Line 1a	
420	409	City of Solar Energy Device	21	A	310, Line 1b	
421	410	State of Solar Energy Device	2	A	310, Line 1c	
422	411	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
423	412	Cost of Solar Energy Device	10	N	310, Line 2	
424	413	Percentage of Cost Solar Energy Device	10	N	310, Line 3	AZ Credit Form 310 Multiply Line 2 by .25 (25%)
425	414	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
426	415	Amt Credit Prior Years	10	N	310, Line 5	
427	416	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
428	417	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
429	418	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
430	419	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
431	420	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
432	421	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
433	422	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
434	423	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
435	424	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
436	425	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
437	426	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
438	427	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
439	428	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
440	429	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
441	430	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
442	431	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
443	432	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
444	433	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
445	434	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
446	435	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
447	436	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
448	437	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
449	438	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
450	439	Qualifying Charity Code 1	30	A	321, Line 1a	
451	440	Qualifying Charity Name 1	30	A	321, Line 1b	
452	441	Amt Contributed 1	10	N	321, Line 1c	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

453	442	Qualifying Charity Code 2	30	A	321, Line 2a	
454	443	Qualifying Charity Name 2	30	A	321, Line 2b	
455	444	Amount Contributed 2	10	N	321, Line 2c	
456	445	Qualifying Charity Code 3	30	A	321, Line 3a	
457	446	Qualifying Charity Name 3	30	A	321, Line 3b	
458	447	Amount Contributed 3	10	N	321, Line 3c	
459	448	Continuation Sheet 4h or Zero	10	N	321, Line 4	
460	449	Total Charitable Organizations 2017	10	N	321, Line 5	Add lines 1-4 Column c
461	450	Qualifying Charity Code 4	30	A	321, Line 6a	
462	451	Qualifying Charity Name 4	30	A	321, Line 6b	
463	452	Amt Contributed 4	10	N	321, Line 6c	
464	453	Qualifying Charity Code 5	30	A	321, Line 7a	
465	454	Qualifying Charity Name 5	30	A	321, Line 7b	
466	455	Amount Contributed 5	10	N	321, Line 7c	
467	456	Qualifying Charity 6	30	A	321, Line 8a	
468	457	Qualifying Charity 6	30	A	321, Line 8b	
469	458	Amount Contributed 6	10	N	321, Line 8c	
470	459	Continuation Sheet 4h or Zero	10	N	321, Line 9	
471	460	Total Qualifying Charity2	10	N	321, Line 10	Add lines 6-9 Column c
472	461	Total Cash Contri Qual Charity	10	N	321, Line 11	AZ Credit Form 321 Add Lines 5 and 10
473	462	Allowable Charity Credit	10	N	321, Line 12	AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$
474	463	Current Year's Qualifying Charity Credit	10	N	321, Line 13	Enter smaller of Line 11 or Line 12
475	464	Original Credit Amount 12b	10	N	321, Line 14b	Enter Amount from Prior Year 5
476	465	Previous Used Amount 12c	10	N	321, Line 14c	Enter Amount from Prior Year 5
477	466	Available Credit Carryover 12d	10	N	321, Line 14d	Enter Amount from Prior Year 5
478	467	Original Credit Amount 13b	10	N	321, Line 15b	Enter Amount from Prior Year 4
479	468	Previous Used Amount 13c	10	N	321, Line 15c	Enter Amount from Prior Year 4
480	469	Available Credit Carryover 13d	10	N	321, Line 15d	Enter Amount from Prior Year 4
481	470	Original Credit Amount 14b	10	N	321, Line 16b	Enter Amount from Prior Year 3
482	471	Previous Used Amount 14c	10	N	321, Line 16c	Enter Amount from Prior Year 3
483	472	Available Credit Carryover 14d	10	N	321, Line 16d	Enter Amount from Prior Year 3
484	473	Original Credit Amount 15b	10	N	321, Line 17b	Enter Amount from Prior Year 2
485	474	Previous Used Amount 15c	10	N	321, Line 17c	Enter Amount from Prior Year 2
486	475	Available Credit Carryover 15d	10	N	321, Line 17d	Enter Amount from Prior Year 2
487	476	Original Credit Amount 16b	10	N	321, Line 18b	Enter Amount from Prior Year 1
488	477	Previous Used Amount 16c	10	N	321, Line 18c	Enter Amount from Prior Year 1
489	478	Available Credit Carryover 16d	10	N	321, Line 18d	Enter Amount from Prior Year 1
490	479	Total Available Credit Carryover	10	N	321, Line 19	Add Lines 14 through 18 Column d
491	480	Current Yr's Credit	10	N	321, Line 20	Form 301, Part 1, line 11, column a
492	481	Available Carryover	10	N	321, Line 21	Form 301, Part 1, line 11, column b
493	482	Total Available Credit	10	N	321, Line 22	Form 301, Part 1, line 11, column c
494	483	Public School CTDS 1	30	A	322, Line 1a	
495	484	School Name 1	30	A	322, Line 1b	
496	485	School District/Charter Name 1	30	A	322, Line 1c	
497	486	Amt of Fees Paid 1	10	N	322, Line 1d	
498	487	Public School CTDS 2	30	A	322, Line 2a	
499	488	School Name 2	30	A	322, Line 2b	
500	489	School District/Charter Name 2	30	A	322, Line 2c	
501	490	Amt of Fees Paid 2	10	N	322, Line 2d	
502	491	Public School CTDS 3	30	A	322, Line 3a	
503	492	School Name 3	30	A	322, Line 3b	
504	493	School District/Charter Name 3	30	A	322, Line 3c	
505	494	Amt of Fees Paid 3	10	N	322, Line 3d	
506	495	Continuation Sheet 4h or Zero	10	N	322, Line 4	
507	496	Cash Contributions Public Schools	10	N	322, Line 5	Add lines 1-4 Column d
508	497	Public School CTDS 4	30	A	322, Line 6a	
509	498	School Name 4	30	A	322, Line 6b	
510	499	School District/Charter 4	30	A	322, Line 6c	
511	500	Amt of Fees Paid 4	10	N	322, Line 6d	
512	501	Public School CTDS 5	30	A	322, Line 7a	
513	502	School Name 5	30	A	322, Line 7b	
514	503	School District/Charter 5	30	A	322, Line 7c	
515	504	Amt of Fees Paid 5	10	N	322, Line 7d	
516	505	Public School CTDS 6	30	A	322, Line 8a	
517	506	School Name 6	30	A	322, Line 8b	
518	507	School District/Charter 6	30	A	322, Line 8c	
519	508	Amt of Fees Paid 6	10	N	322, Line 8d	
520	509	Continuation Sheet 9h or Zero	10	N	322, Line 9	
521	510	Cash Contributions Public Schools2	10	N	322, Line 10	Add lines 6-9 Column d
522	511	Total Cash and Credit Contri Pub Schools	10	N	322, Line 11	Add Lines 5 and 10
523	512	Allowable Cash Contributions Public Schools	10	N	322, Line 12	Single Taxpayer or Heads of Household Enter \$200 Married Taxpaye
524	513	Current Year's Credit	10	N	322, Line 13	Enter smaller of Line 11 or Line 12
525	514	Original Credit Amount 7	10	N	322, Line 14b	Enter Amount from Prior Year 5
526	515	Previous Used Amount 7	10	N	322, Line 14c	Enter Amount from Prior Year 5
527	516	Available Credit Carryover 7	10	N	322, Line 14d	Enter Amount from Prior Year 5
528	517	Original Credit Amount 8	10	N	322, Line 15b	Enter Amount from Prior Year 4
529	518	Previous Used Amount 8	10	N	322, Line 15c	Enter Amount from Prior Year 4
530	519	Available Credit Carryover 8	10	N	322, Line 15d	Enter Amount from Prior Year 4
531	520	Original Credit Amount 9	10	N	322, Line 16b	Enter Amount from Prior Year 3
532	521	Previous Used Amount 9	10	N	322, Line 16c	Enter Amount from Prior Year 3
533	522	Available Credit Carryover 9	10	N	322, Line 16d	Enter Amount from Prior Year 3
534	523	Original Credit Amount 10	10	N	322, Line 17b	Enter Amount from Prior Year 2
535	524	Previous Used Amount 10	10	N	322, Line 17c	Enter Amount from Prior Year 2
536	525	Available Credit Carryover 10	10	N	322, Line 17d	Enter Amount from Prior Year 2
537	526	Original Credit Amount 11	10	N	322, Line 18b	Enter Amount from Prior Year 1
538	527	Previous Used Amount 11	10	N	322, Line 18c	Enter Amount from Prior Year 1
539	528	Available Credit Carryover 11	10	N	322, Line 18d	Enter Amount from Prior Year 1
540	529	Total Available Carryover	10	N	322, Line 19	Add lines 14-18 Column d
541	530	Current Year's Total Credit	10	N	322, Line 20	Form 301, Part 1, line 12, column a
542	531	Available Credit Carryover	10	N	322, Line 21	Form 301, Part 1, line 12, column b
543	532	Total Available Credit	10	N	322, Line 22	Form 301, Part 1, line 12, column c

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

544	533	Name of School 1	30	A	323, Line 1a	
545	534	Street Address of School 1	30	A	323, Line 1b	
546	535	City State of School 1	30	A	323, Line 1c	
547	536	Amt of Contribution School 1	10	N	323, Line 1d	
548	537	Name of School 2	30	A	323, Line 2a	
549	538	Street Address of School 2	30	A	323, Line 2b	
550	539	City State of School 2	30	A	323, Line 2c	
551	540	Amt of Contribution School 2	10	N	323, Line 2d	
552	541	Name of School 3	30	A	323, Line 3a	
553	542	Street Address of School 3	30	A	323, Line 3b	
554	543	City State of School 3	30	A	323, Line 3c	
555	544	Amt of Contribution School 3	10	N	323, Line 3d	
556	545	Continuation Sheet 4h or Zero	10	N	323, Line 4	
557	546	Total Contributions School Prev Tuition	10	N	323, Line 5	Add lines 1-4 Column d
558	547	Name of School 4	30	A	323, Line 6a	
559	548	Street Address of School 4	30	A	323, Line 6b	
560	549	City State of School 4	30	A	323, Line 6c	
561	550	Amt of Contribution School 4	10	N	323, Line 6d	
562	551	Name of School 5	30	A	323, Line 7a	
563	552	Street Address of School 5	30	A	323, Line 7b	
564	553	City State of School 5	30	A	323, Line 7c	
565	554	Amt of Contribution School 5	10	N	323, Line 7d	
566	555	Name of School 6	30	A	323, Line 8a	
567	556	Street Address of School 6	30	A	323, Line 8b	
568	557	City State of School 6	30	A	323, Line 8c	
569	558	Amt of Contribution School 6	10	N	323, Line 8d	
570	559	Continuation Sheet 9h or Zero	10	N	323, Line 9	
571	560	Total Contributions School Tuition	10	N	323, Line 10	Add lines 6-9 Column d
572	561	Total Amt of Contribution Prev and Curr	10	N	323, Line 11	Add Lines 5 and 10
573	562	Allowable Contributions School Tuition	10	N	323, Line 12	Single Taxpayer or Heads of Household Enter \$555 Married Taxpayer Enter \$1110
574	563	Current Year's Credit	10	N	323, Line 13	Enter smaller of Line 11 or Line 12
575	564	Original Credit Amount 6	10	N	323, Line 14b	Enter Amount from Prior Year 5
576	565	Previous Used Amount 6	10	N	323, Line 14c	Enter Amount from Prior Year 5
577	566	Available Credit Carryover 6	10	N	323, Line 14d	Enter Amount from Prior Year 5
578	567	Original Credit Amount 7	10	N	323, Line 15b	Enter Amount from Prior Year 4
579	568	Previous Used Amount 7	10	N	323, Line 15c	Enter Amount from Prior Year 4
580	569	Available Credit Carryover 7	10	N	323, Line 15d	Enter Amount from Prior Year 4
581	570	Original Credit Amount 8	10	N	323, Line 16b	Enter Amount from Prior Year 3
582	571	Previous Used Amount 8	10	N	323, Line 16c	Enter Amount from Prior Year 3
583	572	Available Credit Carryover 8	10	N	323, Line 16d	Enter Amount from Prior Year 3
584	573	Original Credit Amount 9	10	N	323, Line 17b	Enter Amount from Prior Year 2
585	574	Previous Used Amount 9	10	N	323, Line 17c	Enter Amount from Prior Year 2
586	575	Available Credit Carryover 9	10	N	323, Line 17d	Enter Amount from Prior Year 2
587	576	Original Credit Amount 10	10	N	323, Line 18b	Enter Amount from Prior Year 1
588	577	Previous Used Amount 10	10	N	323, Line 18c	Enter Amount from Prior Year 1
589	578	Available Credit Carryover 10	10	N	323, Line 18d	Enter Amount from Prior Year 1
590	579	Total Available Carryover	10	N	323, Line 19	Add lines 14-18 Column d
591	580	Current Year's Total Credit	10	N	323, Line 20	Form 301, Part 1, line 13, column a
592	581	Available Credit Carryover	10	N	323, Line 21	Form 301, Part 1, line 13, column b
593	582	Total Available Credit	10	N	323, Line 22	Form 301, Part 1, line 13, column c
594	583	Total Contribs Current Tx Yr	10	N	323, Line 23	
595	584	Max Credit Allow CR323	10	N	323, Line 24	Single Taxpayer or Heads of Household Enter \$555 Married Taxpayer Enter \$1110
596	585	Total Excess Contributions	10	N	323, Line 25	Form 348, Subtract 24 from 23 or Zero
597	586	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
598	587	ADVS Receipt No	1	A	340, Box 1-NO	X or null
599	588	Total Qualified Donations Pre-9/11	10	N	340, Line 2	Changed 2018, Pre-9/11 condition added
	589	Total Qualified Donations Post-9/11	10	N	340, Line 3	
600	590	Allowable Qualified Donations	10	N	340, Line 4	Add lines 2 and 3
	591	Single/200, MFJ/400, MFS/200	10	N	340, Line 5	
601	592	Current Year's Credit	10	N	340, Line 6	Enter smaller of Line 4 or Line 5. Also enter amount on form 301, part 1, line 21 a & b
602	593	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
603	594	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
604	595	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
605	596	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
606	597	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
607	598	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
608	599	Name of School 1	30	A	348, Line 2a	
609	600	Address of School 1	30	A	348, Line 2b	
610	601	City State of School 1	30	A	348, Line 2c	
611	602	Amt of Contribution 2015 1	10	N	348, Line 2d	
612	603	Name of School 2	30	A	348, Line 3a	
613	604	Address of School 2	30	A	348, Line 3b	
614	605	City State of School 2	30	A	348, Line 3c	
615	606	Amt of Contribution 2015 2	10	N	348, Line 3d	
616	607	Name of School 3	30	A	348, Line 4a	
617	608	Address of School 3	30	A	348, Line 4b	
618	609	City State of School 3	30	A	348, Line 4c	
619	610	Amt of Contribution 2015 3	10	N	348, Line 4d	
620	611	Continuation Sheet 5h or Zero	10	N	348, Line 5	
621	612	Total Contributions Certified School Tuition Prev Yr	10	N	348, Line 6	Add Lines 2-5 Column d
622	613	Name of School 4	30	A	348, Line 7a	
623	614	Address of School 4	30	A	348, Line 7b	
624	615	City State of School 4	30	A	348, Line 7c	
625	616	Amt of Contribution 2016 4	10	N	348, Line 7d	
626	617	Name of School 5	30	A	348, Line 8a	
627	618	Address of School 5	30	A	348, Line 8b	
628	619	City State of School 5	30	A	348, Line 8c	
629	620	Amt of Contribution 2016 5	10	N	348, Line 8d	
630	621	Name of School 6	30	A	348, Line 9a	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

631	622	Address of School 6	30	A	348, Line 9b	
632	623	City State of School 6	30	A	348, Line 9c	
633	624	Amt of Contribution 2016 6	10	N	348, Line 9d	
634	625	Continuation Sheet 10h or Zero	10	N	348, Line 10	
635	626	Total Contributions Certified School Tuition	10	N	348, Line 11	Add lines 7-10 Column d
636	627	Total Contributions Prev and Curr	10	N	348, Line 12	Add Lines 6 and 11
637	628	Allowable Credit Claimed Form 323	10	N	348, Line 13	Enter amount from Form 323, Part 1 Line 11
638	629	Potential Credit	10	N	348, Line 14	Subtract Line 13 from Line 12
639	630	Allowable Max Credit	10	N	348, Line 15	Single Taxpayer or Heads of Household Enter \$552 Married Taxpaye
640	631	Current Year's Credit	10	N	348, Line 16	Enter smaller of Line 14 or Line 15
641	632	Original Credit Amount 10	10	N	348, Line 17b	Enter Amount from Prior Year 5
642	633	Previous Used Amount 10	10	N	348, Line 17c	Enter Amount from Prior Year 5
643	634	Available Credit Carryover 10	10	N	348, Line 17d	Enter Amount from Prior Year 5
644	635	Original Credit Amount 11	10	N	348, Line 18b	Enter Amount from Prior Year 4
645	636	Previous Used Amount 11	10	N	348, Line 18c	Enter Amount from Prior Year 4
646	637	Available Credit Carryover 11	10	N	348, Line 18d	Enter Amount from Prior Year 4
647	638	Original Credit Amount 12	10	N	348, Line 19b	Enter Amount from Prior Year 3
648	639	Previous Used Amount 12	10	N	348, Line 19c	Enter Amount from Prior Year 3
649	640	Available Credit Carryover 12	10	N	348, Line 19d	Enter Amount from Prior Year 3
650	641	Original Credit Amount 13	10	N	348, Line 20b	Enter Amount from Prior Year 2
651	642	Previous Used Amount 13	10	N	348, Line 20c	Enter Amount from Prior Year 2
652	643	Available Credit Carryover 13	10	N	348, Line 20d	Enter Amount from Prior Year 2
653	644	Original Credit Amount 14	10	N	348, Line 21b	Enter Amount from Prior Year 1
654	645	Previous Used Amount 14	10	N	348, Line 21c	Enter Amount from Prior Year 1
655	646	Available Credit Carryover 14	10	N	348, Line 21d	Enter Amount from Prior Year 1
656	647	Total Available Carryover	10	N	348, Line 22	Add Lines 17-21 Column d
657	648	Current Year's Total Credit	10	N	348, Line 23	Form 301, Part 1, line 26, column a
658	649	Available Credit Carryover	10	N	348, Line 24	Form 301, Part 1, line 26, column b
659	650	Total Available Credit	10	N	348, Line 25	Form 301, Part 1, line 26, column c
660	651	Qualifying Foster Care Charity Code 1	30	A	352, Line 1a	
661	652	Name of Qualifying Foster Care Charity 1	30	A	352, Line 1b	
662	653	Amt Contributed 1	10	N	352, Line 1c	
663	654	Qualifying Foster Care Charity Code 2	30	A	352, Line 2a	
664	655	Name of Qualifying Foster Care Charity 2	30	A	352, Line 2b	
665	656	Amount Contributed 2	10	N	352, Line 2c	
666	657	Qualifying Foster Care Charity Code 3	30	A	352, Line 3a	
667	658	Name of Qualifying Foster Care Charity 3	30	A	352, Line 3b	
668	659	Amt Contributed 3	10	N	352, Line 3c	
669	660	Continuation Sheet 4h or Zero	10	N	352, Line 4	
670	661	Total Qualifying Foster Care Charity	10	N	352, Line 5	Add lines 1-4 Column c
671	662	Qualifying Foster Care Charity Code 4	30	A	352, Line 6a	
672	663	Name of Qualifying Foster Care Charity 4	30	A	352, Line 6b	
673	664	Amt Contributed 4	10	N	352, Line 6c	
674	665	Qualifying Foster Care Charity Code 5	30	A	352, Line 7a	
675	666	Name of Qualifying Foster Care Charity 5	30	A	352, Line 7b	
676	667	Amt Contributed 5	10	N	352, Line 7c	
677	668	Qualifying Foster Care Charity Code 6	30	A	352, Line 8a	
678	669	Name of Qualifying Foster Care Charity 6	30	A	352, Line 8b	
679	670	Amt Qualifying Charity Contributed 6	10	N	352, Line 8c	
680	671	Continuation Sheet 9h or Zero	10	N	352, Line 9	
681	672	Total Qualifying Charity2	10	N	352, Line 10	Add lines 6-9 Column c
682	673	Total Cash Contri Qual Charity	10	N	352, Line 11	Add lines 5 and 10
683	674	Allowable Charity Credit	10	N	352, Line 12	Single Taxpayer or Heads of Household Enter \$500 Married Taxpaye
684	675	Current Year's Qualifying Charity Credit	10	N	352, Line 13	Enter smaller of Line 11 or Line 12
685	676	Original Credit Amount 12b	10	N	352, Line 14b	Enter Amount from Prior Year 2
686	677	Previous Used Amount 12c	10	N	352, Line 14c	Enter Amount from Prior Year 2
687	678	Available Credit Carryover 12d	10	N	352, Line 14d	Enter Amount from Prior Year 2
688	679	Original Credit Amount 13b	10	N	352, Line 15b	Enter Amount from Prior Year 1
689	680	Previous Used Amount 13c	10	N	352, Line 15c	Enter Amount from Prior Year 1
690	681	Available Credit Carryover 13d	10	N	352, Line 15d	Enter Amount from Prior Year 1
691		Original Credit Amount 14b	10	N	352, Line 16b	Enter Amount from Prior Year 3
692		Previous Used Amount 14c	10	N	352, Line 16c	Enter Amount from Prior Year 3
693		Available Credit Carryover 14d	10	N	352, Line 16d	Enter Amount from Prior Year 3
694		Original Credit Amount 15b	10	N	352, Line 17b	Enter Amount from Prior Year 2
695		Previous Used Amount 15c	10	N	352, Line 17c	Enter Amount from Prior Year 2
696		Available Credit Carryover 15d	10	N	352, Line 17d	Enter Amount from Prior Year 2
697		Original Credit Amount 16b	10	N	352, Line 18b	Enter Amount from Prior Year 1
698		Previous Used Amount 16c	10	N	352, Line 18c	Enter Amount from Prior Year 1
699		Available Credit Carryover 16d	10	N	352, Line 18d	Enter Amount from Prior Year 1
700	691	Total Available Credit Carryover	10	N	352, Line 19	Add Lines 14 through 18 Column d
701	692	Current Yr's Credit	10	N	352, Line 20	Form 301, Part 1, line 28, column a
702	693	Available Carryover	10	N	352, Line 21	Form 301, Part 1, line 28, column b
703	694	Total Available Credit	10	N	352, Line 22	Form 301, Part 1, line 28, column c
704	695	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

2017-2018 Resident Return - Short						
2D Barcode Record Layout						
2017 FIELD NO	2018 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	2018
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	Injured Spouse Protection of Joint Overpayment	1	A	140A, 4A	
22	22	Head of Household	1	A	140A, 5	X or null
23	23	Married filing Separate	1	A	140A, 6	X or null
24	24	Single	1	A	140A, 7	X or null
25	25	Age 65 or over	1	N	140A, 8	
26	26	Blind	1	N	140A, 9	
27	27	Dependents	2	N	140A, 10	
28	28	Parents/Ancestors	1	N	140A, 11	
29	29	6 Month Extension	1	A	140A, 82F	X or null
30	30	Dependent Info More Space--Qualifying Dependents	1	A	140A, Line 10CB	X or null
31	31	Dependent 1 First Name	10	A	140A, 10A(A1)	
32	32	Dependent 1 Last Name	10	A	140A, 10A(A2)	
33	33	Dependent 1 SSN	9	N	140A, 10A(B)	No hyphens
34	34	Dependent 1 Relationship	12	A	140A, 10A(C)	
35	35	Dependent 1 Months	2	A	140A, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
36	36	Dependent 1 Name Not Qualifying	1	A	140A, 10A(E)	X or null
37	37	Dependent 1 Name Education	1	A	140A, 10A(F)	X or null
38	38	Dependent 2 First Name	10	A	140A, 10B(A1)	
39	39	Dependent 2 Last Name	10	A	140A, 10B(A2)	
40	40	Dependent 2 SSN	9	N	140A, 10B(B)	No hyphens
41	41	Dependent 2 Relationship	12	A	140A, 10B(C)	
42	42	Dependent 2 Months	2	A	140A, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
43	43	Dependent 2 Name Not Qualifying	1	A	140A, 10B(E)	X or null
44	44	Dependent 2 Name Education	1	A	140A, 10B(F)	X or null
45	45	Dependent 3 First Name	10	A	140A, 10C(A1)	
46	46	Dependent 3 Last Name	10	A	140A, 10C(A2)	
47	47	Dependent 3 SSN	9	N	140A, 10C(B)	No hyphens
48	48	Dependent 3 Relationship	12	A	140A, 10C(C)	
49	49	Dependent 3 Months	2	A	140A, 10C(D)	Valid Values are (0 - 12) & S (Stillborn)
50	50	Dependent 3 Name Not Qualifying	1	A	140A, 10C(E)	X or null
51	51	Dependent 3 Name Education	1	A	140A, 10C(F)	X or null
52	52	Dependent Info More Space--Qualifying Ancestors	1	A	140A, Line 11CB	X or null
53	53	Dependent 1 Qual Anc First Name	10	A	140A, Line 11a(a1)	
54	54	Dependent 1 Qual Anc Last Name	10	A	140A, Line 11a(a2)	
55	55	Dependent 1 Qual Anc SSN	9	N	140A, Line 11a(b)	No hyphens
56	56	Dependent 1 Qual Anc Relationship	12	A	140A, Line 11a(c)	
57	57	Dependent 1 Qual Anc Months	2	A	140A, Line 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
58	58	Dependent 1 Qual Anc Age 65+	1	A	140A, Line 11a(e)	X or null
59	59	Dependent 1 Qual Anc Deceased In Tax Year	1	A	140A, Line 11a(f)	X or null
60	60	Dependent 2 Qual Anc First Name	10	A	140A, Line 11b(a1)	
61	61	Dependent 2 Qual Anc Last Name	10	A	140A, Line 11b(a2)	
62	62	Dependent 2 Qual Anc SSN	9	N	140A, Line 11b(b)	No hyphens
63	63	Dependent 2 Qual Anc Relationship	12	A	140A, Line 11b(c)	
64	64	Dependent 2 Qual Anc Months	2	A	140A, Line 11b(d)	Valid Values are (0 - 12)
65	65	Dependent 2 Qual Anc Age 65+	1	A	140A, Line 11b(e)	X or null
66	66	Dependent 2 Qual Anc Deceased In Tax Year	1	A	140A, Line 11b(f)	X or null
67	67	Dependent 3 Qual Anc First Name	10	A	140A, Line 11c(a1)	
68	68	Dependent 3 Qual Anc Last Name	10	A	140A, Line 11c(a2)	
69	69	Dependent 3 Qual Anc SSN	9	N	140A, Line 11c(b)	No hyphens
70	70	Dependent 3 Qual Anc Relationship	12	A	140A, Line 11c(c)	
71	71	Dependent 3 Qual Anc Months	2	N	140A, Line 11c(d)	Valid Values are (0 - 12)
72	72	Dependent 3 Qual Anc Age 65+	1	A	140A, Line 11c(e)	X or null
73	73	Dependent 3 Qual Anc Deceased In Tax Year	1	A	140A, Line 11c(f)	X or null
74	74	Federal Adjusted Gross	10	N	140A, 12	
75	75	Over 65 Exemption	10	N	140A, 13	
76	76	Blind Exemption	10	N	140A, 14	
77	77	Dependent Exemption	10	N	140A, 15	
78	78	Parent Exemption	10	N	140A, 16	
79	79	Az Adjusted Gross	10	N	140A, 17	subtract Lines 13, 14, 15, and 16 from line 12.
80	80	Std Deduction Amount	10	N	140A, 18	Single, Married Filing Separate = \$5,312 Head of Household and Married Filing Joint = \$10,613

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

81	81	Personal Exemptions	10	N	140A, 19	Single=\$2200, MFJ-0 Dep.=\$4400, MFJ-1+ Dep.=\$6600, HOH=\$4400, MFS-0 Dep.=\$2200, MFS-1+ Dep.=\$3300
82	82	Az Taxable Income	10	N	140A, 20	
83	83	Computed Tax	10	N	140A, 21	
84	84	Family Income Tax Credit	10	N	140A, 22	
85	85	Balance of Tax	10	N	140A, 23	subtract line 22 from line 21.
86	86	Withholding	10	N	140A, 24	
87	87	Extension Payments	10	N	140A, 25	
88	88	Increased Excise Tax Credit	10	N	140A, 26	Use worksheet to determine amount.
89	89	Property Tax Credit	10	N	140A, 27	
90	90	Total Payments Refundable Credits	10	N	140A, 28	Add lines 24-27
91	91	Tax Due	10	N	140A, 29	If line 23 is greater than line 28, subtract line 28 from line 23
92	92	Overpayment	10	N	140A, 30	If line 28 is greater than line 23, subtract line 23 from line 28 and enter the amount.
93	93	Total Tax or Refund From Page 1	10	N	140, Line 31	Enter the amount from page 1, line 29 or 30.
94	94	Solutions Teams Assigned To Schools Contrib	10	N	140A, 32	
95	95	Wildlife Contrib	10	N	140A, 33	
96	96	Child Abuse Contrib	10	N	140A, 34	
97	97	Domestic Violence Contrib	10	N	140A, 35	
98	98	Political Contrib	10	N	140A, 36	
99	99	Neighbors Helping Contrib	10	N	140A, 37	
100	100	Special Olympics Contrib	10	N	140A, 38	
101	101	Veterans' Donation Fund	10	N	140A, 39	
102	102	I Didn't Pay Enough Fund	10	N	140A, 40	
103	103	Sustainable State Parks and Road Fund	10	N	140A, 41	
104	104	Spay/Neuter of Animals	10	N	140A, 42	
105	105	Democratic Party	1	A	140A, 43-1	"2" or null
106	106	Green Party	1	A	140A, 43-2	"3" or null - Name Change Only
107	107	Libertarian Party	1	A	140A, 43-3	"4" or null
108	108	Republican Party	1	A	140A, 43-4	"5" or null
109	109	Total Contribs	10	N	140A, 44	Add Lines 32 through 42
110	110	Refund Amount	10	N	140A, 45	Subtract Line 44 from Line 31
111	111	Foreign Account	1	A	140A, Box 45A	Y or Null; If "Y", Fields 112-115 should be disabled.
112	112	Dir Dep Routing Nbr	9	N	140A, 98	For direct deposit; direct debit is not supported.
113	113	Dir Dep Account Nbr	17	A/N	140A, 98	For direct deposit; direct debit is not supported.
114	114	Dir Dep Checking	1	A	140A, 98	X or null; direct deposit only
115	115	Dir Dep Savings	1	A	140A, 98	X or null; direct deposit only
116	116	Amount Owed	10	N	140A, 46	Add Lines 31 and 44
117	117	Prior Last Names	20	A	Front Page Line 97	Comma delimited
118	118	Primary Occupation	16	A	140A, pg2	
119	119	Spouse Occupation	16	A	140A, pg2	
120	120	Preparer Name	35	A/N	140A, pg2	
121	121	Preparer Address	35	A/N	140A, pg2	
122	122	Preparer City	21	A	140A, pg2	
123	123	Preparer State	2	A	140A, pg2	
124	124	Preparer Zip Code	9	N	140A, pg2	
125	125	Preparer FEIN	9	N	140A, pg2	No hyphens
126	126	Paid Preparer Phone Number	10	N	140A, pg2	
127	127	Employer ID (1)	9	N	W-2 (1st Wage Statement)	
128	128	Employee SSN (1)	9	N	W-2 (1st Wage Statement)	
129	129	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
130	130	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
131	131	Employer ID (2)	9	N	W-2 (2nd Wage Statement)	
132	132	Employees SSN (2)	9	N	W-2 (2nd Wage Statement)	
133	133	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
134	134	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
135	135	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
136	136	Employees SSN (3)	9	N	W-2 (3rd Wage Statement)	
137	137	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
138	138	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	
139	139	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
140	140	Employees SSN (4)	9	N	W-2 (4th Wage Statement)	
141	141	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
142	142	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
143	143	Payer's ID (1)	9	N	1099-R (1st Statement)	
144	144	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
145	145	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
146	146	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
147	147	1099 Az WH (1)	10	N	1099-R (1st Statement)	
148	148	Payer's ID (2)	9	N	1099-R (2nd Statement)	
149	149	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
150	150	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
151	151	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
152	152	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
153	153	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

Arizona 140NR - Non-Resident Return						
2D Barcode Record Layout						
2017 FIELD NO	2018 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	2018
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 hyphens
15	15	Address line 1	35	A/N	140NR, 2	Address line 1 or % (care of) line or recipient name if TP is deceased
16	16	Address line 2	35	A/N	140NR, 2	Address line 2 or Address line if 1 is % or deceased TP
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 available
20	20	Daytime Number	10	N	140NR, 94	
21	21	Married/Joint	1	A	140NR, 4	X or null
22	22	Injured Spouse Protection of Joint Overpayment	1	A	140NR, 4A	
23	23	Head of Household	1	A	140NR, 5	X or null
24	24	Married filing Separate	1	A	140NR, 6	X or null
25	25	Single	1	A	140NR, 7	X or null
26	26	Age 65 or over	1	N	140NR, 8	
27	27	Blind	1	N	140NR, 9	
28	28	Dependents	2	N	140NR, 10	
29	29	6 Month Extension	1	A	140NR, 82F	X or null
30	30	Res Status Non	1	A	140NR, 11	X or null
31	31	Res Status Non Active Military	1	A	140NR, 12	X or null
32	32	Res Status Composite	1	A	140NR, 13	X or null
33	33	Dependent Information Additional Space	1	A	140NR, Box 10	X or null
34	34	Dependent 1 First Name	10	A	140NR, 10A(A1)	
35	35	Dependent 1 Last Name	10	A	140NR, 10A(A2)	
36	36	Dependent 1 SSN	9	N	140NR, 10A(B)	No hyphens
37	37	Dependent 1 Relationship	12	A	140NR, 10A(C)	
38	38	Dependent 1 Months	2	A	140NR, 10A(D)	Valid Values are (0 - 12) & S (Stillborn)
39	39	Dependent 1 Name Not Qualifying	1	A	140NR, 10A(E)	X or null
40	40	Dependent 1 Name Education	1	A	140NR, 10A(F)	X or null
41	41	Dependent 2 First Name	10	A	140NR, 10B(A1)	
42	42	Dependent 2 Last Name	10	A	140NR, 10B(A2)	
43	43	Dependent 2 SSN	9	N	140NR, 10B(B)	No hyphens
44	44	Dependent 2 Relationship	12	A	140NR, 10B(C)	
45	45	Dependent 2 Months	2	A	140NR, 10B(D)	Valid Values are (0 - 12) & S (Stillborn)
46	46	Dependent 2 Name Not Qualifying	1	A	140NR, 10B(E)	X or null
47	47	Dependent 2 Name Education	1	A	140NR, 10B(F)	X or null
48	48	Dependent 3 First Name	10	A	140NR, 10C(A1)	
49	49	Dependent 3 Last Name	10	A	140NR, 10C(A2)	
50	50	Dependent 3 SSN	9	N	140NR, 10C(B)	No hyphens
51	51	Dependent 3 Relationship	12	A	140NR, 10C(C)	
52	52	Dependent 3 Months	2	A	140NR, 10C(D)	Valid Values are (0 - 12) & S (Stillborn)
53	53	Dependent 3 Name Not Qualifying	1	A	140NR, 10C(E)	X or null
54	54	Dependent 3 Name Education	1	A	140NR, 10C(F)	X or null
55	55	Dependent 4 First Name	10	A	140NR, 10D(A1)	
56	56	Dependent 4 Last Name	10	A	140NR, 10D(A2)	
57	57	Dependent 4 SSN	9	N	140NR, 10D(B)	No hyphens
58	58	Dependent 4 Relationship	12	A	140NR, 10D(C)	
59	59	Dependent 4 Months	2	A	140NR, 10D(D)	Valid Values are (0 - 12) & S (Stillborn)
60	60	Dependent 4 Name Not Qualifying	1	A	140NR, 10D(E)	X or null
61	61	Dependent 4 Name Education	1	A	140NR, 10D(F)	X or null
62	62	Married/spouse of active mil. qual. for MSRR Act	1	A	140NR, Box 14	value "1" if checked; "0" or null if blank
63	63	Wages, Salaries, etc. Fed	10	N	140NR, 15 Fed	
64	64	Wages, Salaries, etc. AZ	10	N	140NR, 15 AZ	
65	65	Interest Fed	10	N	140NR, 16 Fed	
66	66	Interest AZ	10	N	140NR, 16 AZ	
67	67	Dividends Fed	10	N	140NR, 17 Fed	
68	68	Dividends AZ	10	N	140NR, 17 AZ	
69	69	AZ Inc Tax Ref Fed	10	N	140NR, 18 Fed	
70	70	AZ Inc Tax Ref AZ	10	N	140NR, 18 AZ	
71	71	Business Inc (Sch. C) Fed	10	N	140NR, 19 Fed	
72	72	Business Inc (Sch. C) AZ	10	N	140NR, 19 AZ	
73	73	Gain/Loss (Sch. D) Fed	10	N	140NR, 20 Fed	
74	74	Gain/Loss (Sch. D) AZ	10	N	140NR, 20 AZ	
75	75	Rents etc (Sch. E) Fed	10	N	140NR, 21 Fed	
76	76	Rents etc (Sch. E) AZ	10	N	140NR, 21 AZ	
77	77	Other Fed Inc Fed	10	N	140NR, 22 Fed	
78	78	Other Fed Inc AZ	10	N	140NR, 22 AZ	
79	79	Total Income Fed	10	N	140NR, 23 Fed	add lines 15-22 in FEDERAL column
80	80	Total Income AZ	10	N	140NR, 23 AZ	add lines 15-22 in ARIZONA column
81	81	Other Fed Adjust Fed	10	N	140NR, 24 Fed	
82	82	Other Fed Adjust AZ	10	N	140NR, 24 AZ	
83	83	Fed Adjusted Gross	10	N	140NR, 25	Subtract lines 24 from line 23 in FEDERAL column
84	84	Arizona Income	10	N	140NR, 26	Subtract lines 24 from line 23 in ARIZONA column
85	85	Arizona Income Ratio	5	D(4,3)	140NR, 27	Divide line 26 by line 25. Enter 100% as 1.000; 50% as .500; 80.6% as .806
86	86	Total Depreciation	10	N	140NR, 28	
87	87	Partnership Income Adjustment Add	10	N	140NR, 29	Name Change Only
88	88	Net capital (loss) derived from the exchange of legal tender	10	N	140NR, 30	Added TY2018
89	89	Other Additions	10	N	140NR, 31	
90	90	Total Additions	10	N	140NR, 32	Add lines 26, 28, 29, 30 and 31
91	91	Arizona Sourced net capital Gain/Loss	10	N	140NR, 33	
92	92	Total Net Short-Term Capital Gain/Loss	10	N	140NR, 34	
93	93	Total Net Long-Term Capital Gain/Loss	10	N	140NR, 35	

Legend
Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

93	94	Net Long-Term Capital Gain From Assets	10	N	140NR, 36	
94	95	Capital Gain Allowable Subt. Calculation	10	N	140NR, 37	Multiply line 36 by 25% (.25)
95	96	Net Capital Gain From Invest Small Buss	10	N	140NR, 38	
	97	Net capital (loss) derived from the exchange of legal tender	10	N	140NR, 39	Added TY2018
96	98	Recalculated AZ Depreciation	10	N	140NR, 40	
97	99	Partnership Income Adjustment Sub	10	N	140NR, 41	Name Change Only
98	100	Total Subtractions	10	N	140NR, 42	Subtract lines 37 through 41 from line 32
99	101	Total From Line 40	10	N	140NR, 43	
100	102	Int. Savings Bond	10	N	140NR, 44	
101	103	AZ Lottery Winnings	10	N	140NR, 45	
102	104	Agric Crops Contrib	10	N	140NR, 46	
103	105	Other Subtractions	10	N	140NR, 47	
104	106	Subtotal	10	N	140NR, 48	Subtract lines 44 through 47 from line 43
105	107	Age 65 Exempt Amt	10	N	140NR, 49	
106	108	Blind Exempt Amt	10	N	140NR, 50	
107	109	Dep Exempt Amount	10	N	140NR, 51	
108	110	Total Exemptions	10	N	140NR, 52	Add lines 49, 50, and 51
	111	AZ Exempt Portion	10	N	140NR, 53	Multiply line 52 by the Arizona Income Ratio on line 27
109	112	AZ Adjusted Gross	10	N	140NR, 54	Subtract line 53 from line 48
111	113	Itemized Deductions	1	A	140NR, 55-I	X or null
112	114	Standard Deductions	1	A	140NR, 55-S	X or null
		Deduction Amount			140NR, 55	
	115		10	N		ITIMIZED OR PRORATED IF NOT MILITARY Single, Married Filing Separate = \$5,312 Married Filing Jointly, Head of Household = \$10,613
113		Personal Exemptions			140NR, 56	PRORATED IF NOT MILITARY. Single=\$2200, MFJ-0 Dep.=\$4400, MFJ-1+ Dep.=\$6600, HOH=\$4400, MFS-0 Dep.=\$2200, MFS-1+ Dep.=\$3300
	116		10	N		
114						
115	117	Az Taxable Income	10	N	140NR, 57	Subtract 55 and 56 from 54, if < 0 enter 0
116	118	Computed Tax	10	N	140NR, 58	
117	119	Tax from Recapture Credits	10	N	140NR, 59	
118	120	Subtotal of tax	10	N	140NR, 60	
119	121	Credits from Arizona Credit Forms	10	N	140NR, 61	
120	122	Balance of Tax	10	N	140NR, 62	subtract line 61 from line 60. If 61 > 60 enter 0
121	123	Withholding	10	N	140NR, 63	
122	124	Estimated Payments	10	N	140NR, 64a	
123	125	Claim of Right	10	N	140NR, 64b	
124		Total Estimated Payments	10	N	140NR, 64c	
125	126	Extension Payments	10	N	140NR, 65	
126	127	Refundable Credit Form 308-I	1	A	140NR, 66-1	value "1" if checked; "0" or null if blank
127		Refundable Credit Form 342	1	A	140NR, 64-2	Removed TY2018
128	128	Refundable Credit Form 349	1	A	140NR, 66-2	value "2" if checked; "0" or null if blank
129	129	Other Refundable Credits	10	N	140NR, 66	
130	130	Total Payments	10	N	140NR, 67	Add line 63 - 66
131	131	Tax Due	10	N	140NR, 68	If 62 > 67 subtract 67 from 62 and enter tax due
132	132	Overpayment	10	N	140NR, 69	If 67 > 62 subtract 62 from 67 and enter overpayment
	133	Next Year's Est Pmt	10	N	140NR, 70	
133						Amount of Line 69 to be Applied to 2019 Estimated Tax
134	134	Bal of Overpayment	10	N	140NR, 71	Subtract 70 from 69
135	135	Solutions Teams Assigned To Schools Contrib	10	N	140NR, 72	
136	136	Wildlife Contrib	10	N	140NR, 73	
137	137	Child Abuse Contrib	10	N	140NR, 74	
138	138	Domestic Violence Contrib	10	N	140NR, 75	
139	139	Political Contrib	10	N	140NR, 76	
140	140	Neighbors Helping Contrib	10	N	140NR, 77	
141	141	Special Olympics Contrib	10	N	140NR, 78	
142	142	Veterans' Donation Fund	10	N	140NR, 79	
143	143	I Didn't Pay Enough Fund	10	N	140NR, 80	
144	144	Sustainable State Parks and Road Fund	10	N	140NR, 81	
145	145	Spay/Neuter of Animals	10	N	140NR, 82	
146	146	Democratic Party	1	A	140NR, 83-1	"2" or null
147	147	Green Party	1	A	140NR, 83-2	"3" or null - Name Change Only
148	148	Libertarian Party	1	A	140NR, 83-3	"4" or null
149	149	Republican Party	1	A	140NR, 83-4	"5" or null
150	150	Est Pmt Pen	10	N	140NR, 84	
151	151	Annualized Other	1	A	140NR, 85-1	Y or null
152	152	Farmer/Fisherman	1	A	140NR, 85-2	Y or null
153	153	Form 221 Attached	1	A	140NR, 85-3	Y or null
154		AZLTHSA Penalty	1	A	140NR, 85-4	Y or null
155	154	Tot Contrib/Penalty	10	N	140NR, 86	Add Lines 72 through 82, and 84
156	155	Refund Amount	10	N	140NR, 87	Subtract Line 86 from Line 71
157	156	Foreign Account	1	A	140NR Line 87A	Y or Null; If "Y", Fields 158-161 should be disabled.
158	157	Dir Dep Routing Nbr	9	N	140NR, 98	For direct deposit; direct debit is not supported.
159	158	Dir Dep Account Nbr	17	A/N	140NR, 98	For direct deposit; direct debit is not supported.
160	159	Dir Dep Checking	1	A	140NR, 98	X or null; direct deposit only
161	160	Dir Dep Savings	1	A	140NR, 98	X or null; direct deposit only
162	161	Amount Owed	10	N	140NR, 88	Add Lines 68 and Line 86
163	162	Prior Last Names	20	A	Front Page, 97	Comma delimited
164	163	Primary Occupation	16	A	140NR,pg2	
165	164	Spouse Occupation	16	A	140NR,pg2	
166	165	Preparer Name	35	A/N	140NR,pg2	
167	166	Preparer FEIN	9	N	140NR,pg2	No hyphens
168	167	Preparer Address	35	A/N	140NR,pg2	
169	168	Preparer City	21	A	140NR,pg2	
170	169	Preparer State	2	A	140NR,pg2	
171	170	Preparer Zip Code	9	N	140NR,pg2	
172	171	Paid Preparer Phone Number	10	N	140NR,pg2	
173	172	Med/Dent Expenses	10	N	AZSchA(NR) 1	
174		MSA Distribut Used	10	N	AZSchA(NR) 2	Removed TY2018
175	173	Fed Med Deductions	10	N	AZSchA(NR) 2	
176		Total Med Deducts	10	N	AZSchA(NR) 4	Removed TY2018
177	174	Medical Add Adjust	10	N	AZSchA(NR) 3	
178	175	Medical Subt Adjust	10	N	AZSchA(NR) 4	
179	176	Fed Credit Int Paid	10	N	AZSchA(NR) 5	

180	177	Wagering Loss Fed	10	N	AZSchA(NR) 6	
181	178	Gambling Winnings	10	N	AZSchA(NR) 7	
182	179	AZ Lottery Subt	10	N	AZSchA(NR) 8	
183	180	Max Gamble Loss Deduct	10	N	AZSchA(NR) 9	
184	181	Gamble Subt Adjust	10	N	AZSchA(NR) 10	
185	182	Contribution Adjust	10	N	AZSchA(NR) 11	
186	183	Sum Add Adjust	10	N	AZSchA(NR) 12	
187	184	Sum Subt Adjust	10	N	AZSchA(NR) 13	
188	185	Tot Fed Item Deduct	10	N	AZSchA(NR) 14	
189	186	Sum Az Item Deduct	10	N	AZSchA(NR) 18	
190	187	Az Itemized Deductions	10	N	AZSchA(NR) 20	
191	188	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
192	189	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
193	190	Medical Allowance	10	N	FedSchA(2-D) 3	
194	191	Total Medical/Dental	10	N	FedSchA(2-D) 4	
195	192	State and Local Taxes	10	N	FedSchA(2-D) 5	
196	193	Real Estate Taxes	10	N	FedSchA(2-D) 6	
197	194	Personal Property Taxes	10	N	FedSchA(2-D) 7	
198	195	Other Taxes	10	N	FedSchA(2-D) 8	
199	196	Total Other Taxes	10	N	FedSchA(2-D) 9	
200	197	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
201	198	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
202	199	Deductible Points	10	N	FedSchA(2-D) 12	
203	200	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
204	201	Investment Interest	10	N	FedSchA(2-D) 14	
205	202	Total Interest	10	N	FedSchA(2-D) 15	
206	203	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
207	204	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	
208	205	Carryover Prior Year	10	N	FedSchA(2-D) 18	
209	206	Total Contrib	10	N	FedSchA(2-D) 19	
210	207	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
211	208	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
212	209	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
213	210	Tot Other Exp	10	N	FedSchA(2-D) 23	
214	211	Gross Misc Ded	10	N	FedSchA(2-D) 24	
215	212	Miscellaneous Allow	10	N	FedSchA(2-D) 26	
216	213	Total Misc Deduct	10	N	FedSchA(2-D) 27	
217	214	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28	
218	215	Total Item Deduct	10	N	FedSchA(2-D) 29	
219	216	Employer ID (1)	9	N	W-2 (1st Wage Statement)	
220	217	Employee SSN (1)	9	N	W-2 (1st Wage Statement)	
221	218	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
222	219	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
223	220	Employer ID (2)	9	N	W-2 (2nd Wage Statement)	
224	221	Employee SSN (2)	9	N	W-2 (2nd Wage Statement)	
225	222	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
226	223	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
227	224	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
228	225	Employee SSN (3)	9	N	W-2 (3rd Wage Statement)	
229	226	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
230	227	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	
231	228	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
232	229	Employee SSN (4)	9	N	W-2 (4th Wage Statement)	
233	230	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
234	231	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
235	232	Payer's ID (1)	9	N	1099-R (1st Statement)	
236	233	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
237	234	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
238	235	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
239	236	1099 Az WH (1)	10	N	1099-R (1st Statement)	
240	237	Payer's ID (2)	9	N	1099-R (2nd Statement)	
241	238	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
242	239	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
243	240	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
244	241	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
245	242	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)	
246	243	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)	
247	244	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)	
248	245	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)	
249	246	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)	
250	247	Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)	Removed TY2018
251	248	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)	
252	249	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)	
253	250	Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)	Removed TY2018
254	251	Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)	Removed TY2018
255	249	Increased Research Act Ind Credit a	10	N	301, Line 4a (Form 308-I)	
256	250	Increased Research Act Ind Credit b	10	N	301, Line 4b (Form 308-I)	
257	251	Increased Research Act Ind Credit c	10	N	301, Line 4c (Form 308-I)	
258	252	Tax Paid Other State Cntry Credit a	10	N	301, Line 5a (Form 309)	
259	253	Tax Paid Other State Cntry Credit c	10	N	301, Line 5c (Form 309)	
260	254	Solar Energy Devices Credit a	10	N	301, Line 6a (Form 310)	
261	255	Solar Energy Devices Credit b	10	N	301, Line 6b (Form 310)	
262	256	Solar Energy Devices Credit c	10	N	301, Line 6c (Form 310)	
263	257	Agri Water Conserv Sys Credit a	10	N	301, Line 7a (Form 312)	
264	258	Agri Water Conserv Sys Credit b	10	N	301, Line 7b (Form 312)	
265	259	Agri Water Conserv Sys Credit c	10	N	301, Line 7c (Form 312)	
266	260	Polution Control Credit a	10	N	301, Line 8a (Form 315)	
267	261	Polution Control Credit b	10	N	301, Line 8b (Form 315)	
268	262	Polution Control Credit c	10	N	301, Line 8c (Form 315)	
269	263	Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 9a (Form 319)	Removed TY2018
270	264	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 9b (Form 319)	
271	265	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 9c (Form 319)	
272	266	Employ TANF Recipients Credit a	10	N	301, Line 10a (Form 320)	
273	267	Employ TANF Recipients Credit b	10	N	301, Line 10b (Form 320)	
274	268	Employ TANF Recipients Credit c	10	N	301, Line 10c (Form 320)	
275	269	Contrib Qual Chart Orgns Credit a	10	N	301, Line 11a (Form 321)	
276	270	Contrib Qual Chart Orgns Credit b	10	N	301, Line 11b (Form 321)	
277	271	Contrib Qual Chart Orgns Credit c	10	N	301, Line 11c (Form 321)	

Legend
Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

278	271	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 12a (Form 322)	
279	272	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 12b (Form 322)	
280	273	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 12c (Form 322)	
281	274	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 13a (Form 323)	
282	275	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 13b (Form 323)	
283	276	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 13c (Form 323)	
284	277	Agri Pol Cntrl Equip Credit a	10	N	301, Line 14a (Form 325)	
285	278	Agri Pol Cntrl Equip Credit b	10	N	301, Line 14b (Form 325)	
286	279	Agri Pol Cntrl Equip Credit c	10	N	301, Line 14c (Form 325)	
287	280	Donation School Site Credit a	10	N	301, Line 15a (Form 331)	
288	281	Donation School Site Credit b	10	N	301, Line 15b (Form 331)	
289	282	Donation School Site Credit c	10	N	301, Line 15c (Form 331)	
290	283	Healthy Forest Enterprises Credit a	10	N	301, Line 16a (Form 332)	
291	284	Healthy Forest Enterprises Credit b	10	N	301, Line 16b (Form 332)	
292	285	Healthy Forest Enterprises Credit c	10	N	301, Line 16c (Form 332)	
293	286	Employ Natl Guard Members Credit a	10	N	301, Line 17a (Form 333)	
294	287	Employ Natl Guard Members Credit b	10	N	301, Line 17b (Form 333)	
295	288	Employ Natl Guard Members Credit c	10	N	301, Line 17c (Form 333)	
296	289	Business Contrib School Tuition Org a	10	N	301, Line 18a (Form 335-I)	
297	290	Business Contrib School Tuition Org b	10	N	301, Line 18b (Form 335-I)	
298	291	Business Contrib School Tuition Org c	10	N	301, Line 18c (Form 335-I)	
299	292	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 19a (Form 336)	
300	293	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 19b (Form 336)	
301	294	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 19c (Form 336)	
302	295	Invest Qual Small Bus Credit a	10	N	301, Line 20a (Form 338)	
303	296	Invest Qual Small Bus Credit b	10	N	301, Line 20b (Form 338)	
304	297	Invest Qual Small Bus Credit c	10	N	301, Line 20c (Form 338)	
305	298	Military Fam Relf Fnd Credit a	10	N	301, Line 21a (Form 340)	
306	299	Military Fam Relf Fnd Credit c	10	N	301, Line 21c (Form 340)	
307	300	Business Contrib School Tuition Disabled a	10	N	301, Line 22a (Form 341-I)	
308	301	Business Contrib School Tuition Disabled b	10	N	301, Line 22b (Form 341-I)	
309	302	Business Contrib School Tuition Disabled c	10	N	301, Line 22c (Form 341-I)	
310	303	Renew Energy Prod Tax Credit a	10	N	301, Line 23a (Form 343)	
311	304	Renew Energy Prod Tax Credit b	10	N	301, Line 23b (Form 343)	
312	305	Renew Energy Prod Tax Credit c	10	N	301, Line 23c (Form 343)	
313		Solar Liquid Fuel Credit a	10	N	301, Line 24a (Form 344)	Removed TY2018
314		Solar Liquid Fuel Credit c	10	N	301, Line 24c (Form 344)	Removed TY2018
315	306	New Employment Credit a	10	N	301, Line 24a (Form 345)	
316	307	New Employment Credit b	10	N	301, Line 24b (Form 345)	
317	308	New Employment Credit c	10	N	301, Line 24c (Form 345)	
318	309	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 25a (Form 346)	
319	310	Incrs Resrch Act Basic Resrch Credit b	10	N	301, Line 25b (Form 346)	
320	311	Incrs Resrch Act Basic Resrch Credit c	10	N	301, Line 25c (Form 346)	
321		Qual Hlth Ins Plan Credit b	10	N	301, Line 26b (Form 347)	Removed TY2018
322		Qual Hlth Ins Plan Credit c	10	N	301, Line 26c (Form 347)	Removed TY2018
323	312	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 26a (Form 348)	
324	313	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 26b (Form 348)	
325	314	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 26c (Form 348)	
326	315	Renew Energy Invest Prod Sif Consum Credit a	10	N	301, Line 27a (Form 351)	
327	316	Renew Energy Invest Prod Sif Consum Credit b	10	N	301, Line 27b (Form 351)	
328	317	Renew Energy Invest Prod Sif Consum Credit c	10	N	301, Line 27c (Form 351)	
329	318	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 28a (Form 352)	
330	319	Contrib Qual Foster Care Char Orgns Credit b	10	N	301, Line 28b (Form 352)	Added TY2018
331	320	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 28c (Form 352)	
332	321	Total Available Nonrefundable Tax Credits	10	N	301, Line 30	Add Lines 1 through 28 Column c Only
332	322	Total AZ Tax	10	N	301, Line 31	Tax From F140 L47 or F140PY L58 or F140NR L58 or F140X L35
333	323	Tax Recap Environ Tech Fac Credit	10	N	301, Line 32	From AZ Credit Form 305 Part 5 Line 21
334	324	Tax Recap Credits Hlthy Forest Entrs	10	N	301, Line 33	From AZ Credit Form 332 Part 10 Line 40 and Part 11 Line 46
335		Tax Recap Credits Renew Engy Ind	10	N	301, Line 34c	Removed TY2019
336	325	Tax Recap Credits Qual Facs	10	N	301, Line 34	From AZ Credit Form 349 Part 7 Line 19
337	326	Tax Recap Crdts Renew Engy Invest Prod Sif Cons	10	N	301, Line 35	From AZ Credit Form 351 Part 2 Line 24
338	327	Total Recapture of Credits	10	N	301, Line 36	Add Lines 35 through 35 Enter Here and on F140 L48, F140PY L59, F140NR L59, F140X L36
339	328	Subtotal Tax Credits and Recap Credits	10	N	301, Line 37	Add Lines 31 and 36
340	329	Family Income Tax Credit	10	N	301, Line 38	From F140 L50 or F140PY L61 or F140X L38
341	330	Total Tax Credits and Recap Credits	10	N	301, Line 39	Subtract Lines 38 from Line 37. If less than Zero Enter Zero
342	331	Enterprise Zone Credit Used	10	N	301, Line 40 (Form 304)	
343	332	Environ Tech Fac Credit Used	10	N	301, Line 41 (Form 305)	
344	333	Military Reuse Zone Credit Used	10	N	301, Line 42 (Form 306)	
345		Recycling Equipment Credit Used	10	N	301, Line 43 (Form 307)	Removed TY2018
346	334	Increased Research Act Indiv Credit Used	10	N	301, Line 43 (Form 308-I)	
347	335	Tax Paid Other State Ctry Credit Used	10	N	301, Line 44 (Form 309)	
348	336	Solar Energy Devices Credit Used	10	N	301, Line 45 (Form 310)	
349	337	Agri Water Conserv Sys Credit Used	10	N	301, Line 46 (Form 312)	
350	338	Polution Control Credit Used	10	N	301, Line 47 (Form 315)	
351	339	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 48 (Form 319)	
352	340	Employ TANF Recipients Credit Used	10	N	301, Line 49 (Form 320)	
353	341	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 50 (Form 321)	
354	342	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 51 (Form 322)	
355	343	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 52 (Form 323)	
356	344	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 53 (Form 325)	
357	345	Donation School Site Credit Used	10	N	301, Line 54 (Form 331)	
358	346	Healthy Forest Enterprises Credit Used	10	N	301, Line 55 (Form 332)	
359	347	Employ Natl Guard Members Credit Used	10	N	301, Line 56 (Form 333)	
360	348	Business Contrib School Tuition Org Used	10	N	301, Line 57 (Form 335-I)	
361	349	Solar Energy Devices Comm Indus Used	10	N	301, Line 58 (Form 336)	
362	350	Invest Qual Small Bus Credit Used	10	N	301, Line 59 (Form 338)	
363	351	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 60 (Form 340)	
364	352	Business Contrib School Tuition Disabled Used	10	N	301, Line 61 (Form 341-I)	
365	353	Renew Energy Prod Tax Credit Used	10	N	301, Line 62 (Form 343)	
366		Solar Liquid Fuel Credit Used	10	N	301, Line 63 (Form 344)	Removed TY2018
367	354	New Employment Credit Used	10	N	301, Line 63 (Form 345)	
368	355	Incrs Resrch Act Basic Resrch Credit Used	10	N	301, Line 64 (Form 346)	
369		Qual Hlth Ins Plans Credit Used	10	N	301, Line 65 (Form 347)	Removed TY2018
370	356	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 65 (Form 348)	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

371	357	Renew Energy Invest Prod Slf Consum Credit Used	10	N	301, Line 66 (Form 351)	
372	358	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 67 (Form 352)	
373	359	Total Nonrefundable Tax Credits Used	10	N	301, Line 69	Add Lines 40 through 67. Total Cannot be more than 39. Enter this amount on Form 140 L51, 140PY L62, 140NR L61, or 104X L39
374	360	Description of Income Items a	30	A	309, Line 1a	
375	361	Description of Income Items b	30	A	309, Line 1b	
376	362	Description of Income Items c	30	A	309, Line 1c	
377	363	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
378	364	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
379	365	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
380	366	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
381	367	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
382	368	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
383	369	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
384	370	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
385	371	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
386	372	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
387	373	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
388	374	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
389	375	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
390	376	AZ Tax Liabie Less Credits	10	N	309, Line 7	
391	377	Amt Part1 Line6	10	N	309, Line 8	
392	378	Amt AZ Income Tax Imposed	10	N	309, Line 9	
393	379	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)
394	380	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
395	381	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
396	382	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
397	383	Tot Income Taxable By Other	10	N	309, Line 14	
398	384	Pct Income Taxable By Other	6	D(4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
399	385	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
400	386	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
401	387	Description of Income Items a	30	A	309, Line 1a (2)	
402	388	Description of Income Items b	30	A	309, Line 1b (2)	
403	389	Description of Income Items c	30	A	309, Line 1c (2)	
404	390	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
405	391	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
406	392	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
407	393	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
408	394	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
409	395	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
410	396	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
411	397	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
412	398	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
413	399	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
414	400	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
415	401	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
416	402	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
417	403	AZ Tax Liabie Less Credits	10	N	309, Line 7 (2)	
418	404	Amt Part1 Line6	10	N	309, Line 8 (2)	
419	405	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
420	406	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)
421	407	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
422	408	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
423	409	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6
424	410	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
425	411	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)
426	412	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
427	413	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
428	414	Address of Solar Energy Device	35	A/N	310, Line 1a	
429	415	City of Solar Energy Device	21	A	310, Line 1b	
430	416	State of Solar Energy Device	2	A	310, Line 1c	
431	417	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
432	418	Cost of Solar Energy Device	10	N	310, Line 2	
433	419	Percentage of Cost Solar Energy Device	10	N	310, Line 3	AZ Credit Form 310 Multiply Line 2 by .25 (25%)
434	420	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
435	421	Amt Credit Prior Years	10	N	310, Line 5	
436	422	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
437	423	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
438	424	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
439	425	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
440	426	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
441	427	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
442	428	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
443	429	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
444	430	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
445	431	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
446	432	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
447	433	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
448	434	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
449	435	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
450	436	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
451	437	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
452	438	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
453	439	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
454	440	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
455	441	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
456	442	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
457	443	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
458	444	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
459	445	Name of Qualifying Charity 1	30	A	321, Line 1a	
460	446	Location of Qualifying Charity 1	30	A	321, Line 1b	
461	447	Amt Contributed 1	10	N	321, Line 1c	
462	448	Name of Qualifying Charity 2	30	A	321, Line 2a	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

463	449	Location of Qualifying Charity 2	30	A	321, Line 2b	
464	450	Amount Contributed 2	10	N	321, Line 2c	
465	451	Name of Qualifying Charity 3	30	A	321, Line 3a	
466	452	Location of Qualifying Charity 3	30	A	321, Line 3b	
467	453	Amount Qualifying Charity Contributed 3	10	N	321, Line 3c	
468	454	Continuation Sheet 4h or Zero	10	N	321, Line 4	Amount from line 4h of Continuation Sheet or Zero.
469	455	Total Qualifying Charity	10	N	321, Line 5	Add lines 1-4 Column c
470	456		30	A	321, Line 6a	
471	457	Location of Qualifying Charity 4	30	A	321, Line 6b	
472	458	Amt Contributed 4	10	N	321, Line 6c	
473	459	Name of Qualifying Charity 5	30	A	321, Line 7a	
474	460	Location of Qualifying Charity 5	30	A	321, Line 7b	
475	461	Amount Contributed 5	10	N	321, Line 7c	
476	462	Name of Qualifying Charity 6	30	A	321, Line 8a	
477	463	Location of Qualifying Charity 6	30	A	321, Line 8b	
478	464	Amount Qualifying Charity Contributed 6	10	N	321, Line 8c	
479	465	Continuation Sheet 9h or Zero	10	N	321, Line 9	Amount from line 9h of Continuation Sheet or Zero.
480	466	Total Qualifying Charity2	10	N	321, Line 10	Add lines 6-9 Column c
481	467	Total Cash Contri Qual Charity	10	N	321, Line 11	AZ Credit Form 321 Add Line 5 and Line 10
482	468	Allowable Charity Credit	10	N	321, Line 12	AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$400 Married
483	469	Current Year's Qualifying Charity Credit	10	N	321, Line 13	Enter smaller of Line 11 or Line 12
484	470	Original Credit Amount 12b	10	N	321, Line 14b	Enter Amount from Prior Year 5
485	471	Previous Used Amount 12c	10	N	321, Line 14c	Enter Amount from Prior Year 5
486	472	Available Credit Carryover 12d	10	N	321, Line 14d	Enter Amount from Prior Year 5
487	473	Original Credit Amount 13b	10	N	321, Line 15b	Enter Amount from Prior Year 4
488	474	Previous Used Amount 13c	10	N	321, Line 15c	Enter Amount from Prior Year 4
489	475	Available Credit Carryover 13d	10	N	321, Line 15d	Enter Amount from Prior Year 4
490	476	Original Credit Amount 14b	10	N	321, Line 16b	Enter Amount from Prior Year 3
491	477	Previous Used Amount 14c	10	N	321, Line 16c	Enter Amount from Prior Year 3
492	478	Available Credit Carryover 14d	10	N	321, Line 16d	Enter Amount from Prior Year 3
493	479	Original Credit Amount 15b	10	N	321, Line 17b	Enter Amount from Prior Year 2
494	480	Previous Used Amount 15c	10	N	321, Line 17c	Enter Amount from Prior Year 2
495	481	Available Credit Carryover 15d	10	N	321, Line 17d	Enter Amount from Prior Year 2
496	482	Original Credit Amount 16b	10	N	321, Line 18b	Enter Amount from Prior Year 1
497	483	Previous Used Amount 16c	10	N	321, Line 18c	Enter Amount from Prior Year 1
498	484	Available Credit Carryover 16d	10	N	321, Line 18d	Enter Amount from Prior Year 1
499	485	Total Available Credit Carryover	10	N	321, Line 19	Add Lines 14 through 18 Column d
500	486	Current Yr's Credit	10	N	321, Line 20	
501	487	Available Carryover	10	N	321, Line 21	
502	488	Total Available Credit	10	N	321, Line 22	
503	489	Name of Public School 1	30	A	322, Line 1a	
504	490	School District Name/Number 1	30	A	322, Line 1b	
505	491	Location of Public School 1	30	A	322, Line 1c	
506	492	Amt of Fees Paid 1	10	N	322, Line 1d	
507	493	Name of Public School 2	30	A	322, Line 2a	
508	494	School District Name/Number 2	30	A	322, Line 2b	
509	495	Location of Public School 2	30	A	322, Line 2c	
510	496	Amt of Fees Paid 2	10	N	322, Line 2d	
511	497	Name of Public School 3	30	A	322, Line 3a	
512	498	School District Name/Number 3	30	A	322, Line 3b	
513	499	Location of Public School 3	30	A	322, Line 3c	
514	500	Amt of Fees Paid 3	10	N	322, Line 3d	
515	501	Continuation Sheet 4h or Zero	10	N	322, Line 4	Amount from line 4h of Continuation Sheet or Zero.
516	502	Cash Contributions Public Schools	10	N	322, Line 5	Add lines 1-4 Column d
517	503	Name of Public School 4	30	A	322, Line 6a	
518	504	School District Name/Number 4	30	A	322, Line 6b	
519	505	Location of Public School 4	30	A	322, Line 6c	
520	506	Amt of Fees Paid 4	10	N	322, Line 6d	
521	507	Name of Public School 5	30	A	322, Line 7a	
522	508	School District Name/Number 5	30	A	322, Line 7b	
523	509	Location of Public School 5	30	A	322, Line 7c	
524	510	Amt of Fees Paid 5	10	N	322, Line 7d	
525	511	Name of Public School 6	30	A	322, Line 8a	
526	512	School District Name/Number 6	30	A	322, Line 8b	
527	513	Location of Public School 6	30	A	322, Line 8c	
528	514	Amt of Fees Paid 6	10	N	322, Line 8d	
529	515	Continuation Sheet 9h or Zero	10	N	322, Line 9	Amount from line 9h of Continuation Sheet or Zero.
530	516	Cash Contributions Public Schools2	10	N	322, Line 10	Add lines 6-9 Column d
531	517	Total Cash and Credit Contri Pub Schools	10	N	322, Line 11	Add Line 5 and Line 10
532	518	Allowable Cash Contributions Public Schools	10	N	322, Line 12	Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
533	519	Current Year's Credit	10	N	322, Line 13	Enter smaller of Line 11 or Line 12
534	520	Original Credit Amount 7	10	N	322, Line 14b	Enter Amount from Prior Year 5
535	521	Previous Used Amount 7	10	N	322, Line 14c	Enter Amount from Prior Year 5
536	522	Available Credit Carryover 7	10	N	322, Line 14d	Enter Amount from Prior Year 5
537	523	Original Credit Amount 8	10	N	322, Line 15b	Enter Amount from Prior Year 4
538	524	Previous Used Amount 8	10	N	322, Line 15c	Enter Amount from Prior Year 4
539	525	Available Credit Carryover 8	10	N	322, Line 15d	Enter Amount from Prior Year 4
540	526	Original Credit Amount 9	10	N	322, Line 16b	Enter Amount from Prior Year 3
541	527	Previous Used Amount 9	10	N	322, Line 16c	Enter Amount from Prior Year 3
542	528	Available Credit Carryover 9	10	N	322, Line 16d	Enter Amount from Prior Year 3
543	529	Original Credit Amount 10	10	N	322, Line 17b	Enter Amount from Prior Year 2
544	530	Previous Used Amount 10	10	N	322, Line 17c	Enter Amount from Prior Year 2
545	531	Available Credit Carryover 10	10	N	322, Line 17d	Enter Amount from Prior Year 2
546	532	Original Credit Amount 11	10	N	322, Line 18b	Enter Amount from Prior Year 1
547	533	Previous Used Amount 11	10	N	322, Line 18c	Enter Amount from Prior Year 1
548	534	Available Credit Carryover 11	10	N	322, Line 18d	Enter Amount from Prior Year 1
549	535	Total Available Carryover	10	N	322, Line 19	Add lines 14-18 Column d
550	536	Current Year's Total Credit	10	N	322, Line 20	Form 301, Part 1, line 13, column a
551	537	Available Credit Carryover	10	N	322, Line 21	Form 301, Part 1, line 13, column b
552	538	Total Available Credit	10	N	322, Line 22	Form 301, Part 1, line 13, column c
553	539	Name of School 1	30	A	323, Line 1a	
554	540	Street Address of School 1	30	A	323, Line 1b	
555	541	City State of School 1	30	A	323, Line 1c	
556	542	Amt of Contribution School 1	10	N	323, Line 1d	
557	543	Name of School 2	30	A	323, Line 2a	
558	544	Street Address of School 2	30	A	323, Line 2b	
559	545	City State of School 2	30	A	323, Line 2c	

560	546	Amt of Contribution School 2	10	N	323, Line 2d	
561	547	Name of School 3	30	A	323, Line 3a	
562	548	Street Address of School 3	30	A	323, Line 3b	
563	549	City State of School 3	30	A	323, Line 3c	
564	550	Amt of Contribution School 3	10	N	323, Line 3d	
565	551	Continuation Sheet 4h or Zero	10	N	323, Line 4	Amount from line 4h of Continuation Sheet or Zero.
566	552	Total Contributions School Prev Tuition	10	N	323, Line 5	Add lines 1-4 Column d
567	553	Name of School 4	30	A	323, Line 6a	
568	554	Street Address of School 4	30	A	323, Line 6b	
569	555	City State of School 4	30	A	323, Line 6c	
570	556	Amt of Contribution School 4	10	N	323, Line 6d	
571	557	Name of School 5	30	A	323, Line 7a	
572	558	Street Address of School 5	30	A	323, Line 7b	
573	559	City State of School 5	30	A	323, Line 7c	
574	560	Amt of Contribution School 5	10	N	323, Line 7d	
575	561	Name of School 6	30	A	323, Line 7a	
576	562	Street Address of School 6	30	A	323, Line 8b	
577	563	City State of School 6	30	A	323, Line 8c	
578	564	Amt of Contribution School 6	10	N	323, Line 8d	
579	565	Continuation Sheet 9h or Zero	10	N	322, Line 9	Amount from line 9h of Continuation Sheet or Zero.
580	566	Total Contributions School Tuition	10	N	323, Line 10	Add lines 6-9 Column d
581	567	Total Amt of Contribution Prev and Curr	10	N	323, Line 11	Add Lines 5 and 10
582	568	Allowable Contributions School Tuition	10	N	323, Line 12	Single Taxpayer or Heads of Household Enter \$546 Married Taxpayer Enter \$100
583	569	Current Year's Credit	10	N	323, Line 13	Enter smaller of Line 11 or Line 12
584	570	Original Credit Amount 6	10	N	323, Line 14b	Enter Amount from Prior Year 5
585	571	Previous Used Amount 6	10	N	323, Line 14c	Enter Amount from Prior Year 5
586	572	Available Credit Carryover 6	10	N	323, Line 14d	Enter Amount from Prior Year 5
587	573	Original Credit Amount 7	10	N	323, Line 15b	Enter Amount from Prior Year 4
588	574	Previous Used Amount 7	10	N	323, Line 15c	Enter Amount from Prior Year 4
589	575	Available Credit Carryover 7	10	N	323, Line 15d	Enter Amount from Prior Year 4
590	576	Original Credit Amount 8	10	N	323, Line 16b	Enter Amount from Prior Year 3
591	577	Previous Used Amount 8	10	N	323, Line 16c	Enter Amount from Prior Year 3
592	578	Available Credit Carryover 8	10	N	323, Line 16d	Enter Amount from Prior Year 3
593	579	Original Credit Amount 9	10	N	323, Line 17b	Enter Amount from Prior Year 2
594	580	Previous Used Amount 9	10	N	323, Line 17c	Enter Amount from Prior Year 2
595	581	Available Credit Carryover 9	10	N	323, Line 17d	Enter Amount from Prior Year 2
596	582	Original Credit Amount 10	10	N	323, Line 18b	Enter Amount from Prior Year 1
597	583	Previous Used Amount 10	10	N	323, Line 18c	Enter Amount from Prior Year 1
598	584	Available Credit Carryover 10	10	N	323, Line 18d	Enter Amount from Prior Year 1
599	585	Total Available Carryover	10	N	323, Line 19	Add lines 14-18 Column d
600	586	Current Year's Total Credit	10	N	323, Line 20	Form 301, Part 1, line 14, column a
601	587	Available Credit Carryover	10	N	323, Line 21	Form 301, Part 1, line 14, column b
602	588	Total Available Credit	10	N	323, Line 22	Form 301, Part 1, line 14, column c
603	589	Total Contribs Current Tx Yr	10	N	323, Line 23	
604	590	Max Credit Allow CR323	10	N	323, Line 24	
605	591	Total Excess Contributions	10	N	323, Line 25	
593	592	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
594	593	ADVS Receipt No	1	A	340, Box 1-NO	X or null
594	594	Qualified Donations pre-9/11	10	A	340, Line 2	Added TY2018
595	595	Qualified Donations post-9/11	10	A	340, Line 3	Added TY2018
595	596	Total Qualified Donations	10	N	340, Line 4	
596	597	Allowable Qualified Donations	10	N	340, Line 5	Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
597	598	Current Year's Credit	10	N	340, Line 6	Enter smaller of Line 4 or Line 5
598	599	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
599	600	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
600	601	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
601	602	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
602	603	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
603	604	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
604	605	Name of School 1	30	A	348, Line 2a	
605	606	Address of School 1	30	A	348, Line 2b	
606	607	City State of School 1	30	A	348, Line 2c	
607	608	Amt of Contribution 2015 1	10	N	348, Line 2d	
608	609	Name of School 2	30	A	348, Line 3a	
609	610	Address of School 2	30	A	348, Line 3b	
610	611	City State of School 2	30	A	348, Line 3c	
611	612	Amt of Contribution 2015 2	10	N	348, Line 3d	
612	613	Name of School 3	30	A	348, Line 4a	
613	614	Address of School 3	30	A	348, Line 4b	
614	615	City State of School 3	30	A	348, Line 4c	
628	616	Amt of Contribution 2015 3	10	N	348, Line 4d	
629	617	Continuation Sheet 5h or Zero	10	N	348, Line 5	Amount from line 5h of Continuation Sheet or Zero.
630	618	Total Contributions Certified School Tuition Prev Yr	10	N	348, Line 6	Add lines 2-5 Column d
631	619	Name of School 4	30	A	348, Line 7a	
632	620	Address of School 4	30	A	348, Line 7b	
633	621	City State of School 4	30	A	348, Line 7c	
634	622	Amt of Contribution 2016 4	10	N	348, Line 7d	
635	623	Name of School 5	30	A	348, Line 8a	
636	624	Address of School 5	30	A	348, Line 8b	
637	625	City State of School 5	30	A	348, Line 8c	
638	626	Amt of Contribution 2016 5	10	N	348, Line 8d	
639	627	Name of School 6	30	A	348, Line 9a	
640	628	Address of School 6	30	A	348, Line 9b	
641	629	City State of School 6	30	A	348, Line 9c	
642	630	Amt of Contribution 2016 6	10	N	348, Line 9d	
643	631	Continuation Sheet 10h or Zero	10	N	348, Line 10	Amount from line 10h of Continuation Sheet or Zero.
644	632	Total Contributions Certified School Tuition	10	N	348, Line 11	Add lines 7-10 Column d
645	633	Total Contributions Prev and Curr	10	N	348, Line 12	Add lines 6 and 11
646	634	Allowable Credit Claimed Form 323	10	N	348, Line 13	Single Taxpayer or Heads of Household Enter \$546 Married Taxpayer Enter \$100
647	635	Potential Credit	10	N	348, Line 14	Subtract Line 13 from Line 12
648	636	Allowable Max Credit	10	N	348, Line 15	Single Taxpayer or Heads of Household Enter \$543 Married Taxpayer Enter \$100
649	637	Current Year's Credit	10	N	348, Line 16	Enter smaller of Line 14 or Line 15
650	638	Original Credit Amount 10	10	N	348, Line 17b	Enter Amount from Prior Year 5
651	639	Previous Used Amount 10	10	N	348, Line 17c	Enter Amount from Prior Year 5
652	640	Available Credit Carryover 10	10	N	348, Line 17d	Enter Amount from Prior Year 5
653	641	Original Credit Amount 11	10	N	348, Line 18b	Enter Amount from Prior Year 4

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

654	642	Previous Used Amount 11	10	N	348, Line 18c	Enter Amount from Prior Year 4
655	643	Available Credit Carryover 11	10	N	348, Line 18d	Enter Amount from Prior Year 4
656	644	Original Credit Amount 12	10	N	348, Line 19b	Enter Amount from Prior Year 3
657	645	Previous Used Amount 12	10	N	348, Line 19c	Enter Amount from Prior Year 3
658	646	Available Credit Carryover 12	10	N	348, Line 19d	Enter Amount from Prior Year 3
659	647	Original Credit Amount 13	10	N	348, Line 20b	Enter Amount from Prior Year 2
660	648	Previous Used Amount 13	10	N	348, Line 20c	Enter Amount from Prior Year 2
661	649	Available Credit Carryover 13	10	N	348, Line 20d	Enter Amount from Prior Year 2
662	650	Original Credit Amount 14	10	N	348, Line 21b	Enter Amount from Prior Year 1
663	651	Previous Used Amount 14	10	N	348, Line 21c	Enter Amount from Prior Year 1
664	652	Available Credit Carryover 14	10	N	348, Line 21d	Enter Amount from Prior Year 1
665	653	Total Available Carryover	10	N	348, Line 22	Add lines 17-21 Column d
666	654	Current Year's Total Credit	10	N	348, Line 23	Form 301, Part 1, line 26, column a
667	655	Available Credit Carryover	10	N	348, Line 24	Form 301, Part 1, line 26, column b
668	656	Total Available Credit	10	N	348, Line 25	Form 301, Part 1, line 26, column c
669	657	Name of Qualifying Foster Charity Code 1	30	A	352, Line 1a	
670	658	Name of Qualifying Foster Care Charity 1	30	A	352, Line 1b	
671	659	Amount Contributed 1	10	N	352, Line 1c	
672	660	Name of Qualifying Foster Charity Code 2	30	A	352, Line 2a	
673	661	Name of Qualifying Foster Care Charity 2	30	A	352, Line 2b	
674	662	Amount Contributed 2	10	N	352, Line 2c	
675	663	Name of Qualifying Foster Care Charity 3	30	A	352, Line 3a	
676	664	Location of Qualifying Foster Care Charity 3	30	A	352, Line 3b	
677	665	Amount Qualifying Foster Care Charity Contributed 3	10	N	352, Line 3c	
678	666	Continuation Sheet 4h or Zero	10	N	352, Line 4	Amount from line 4h of Continuation Sheet or Zero.
679	667	Total Qualifying Foster Care Charity	10	N	352, Line 5	Add lines 1-4 Column c
680	668	Name of Qualifying Foster Charity Code 4	30	A	352, Line 6a	
681	669	Name of Qualifying Foster Care Charity 4	30	A	352, Line 6b	
682	670	Amt Contributed 4	10	N	352, Line 6c	
683	671	Name of Qualifying Foster Charity Code 5	30	A	352, Line 7a	
684	672	Name of Qualifying Foster Care Charity 5	30	A	352, Line 7b	
685	673	Amount Contributed 5	10	N	352, Line 7c	
686	674	Name of Qualifying Foster Charity Code 6	30	A	352, Line 8a	
687	675	Name of Qualifying Foster Care Charity 6	30	A	352, Line 8b	
688	676	Amt Qualifying Charity Contributed 6	10	N	352, Line 8c	
689	677	Total Qualifying Charity2	10	N	352, Line 9	Amount from line 9h of Continuation Sheet or Zero.
690	678	Continuation Sheet 9h or Zero			352, Line 10	Add lines 6-9 Column c
691	679	Total Cash Contri Qual Charity	10	N	352, Line 11	Add lines 5 and 10
692	680	Allowable Charity Credit	10	N	352, Line 12	Single Taxpayer or Heads of Household Enter \$500 Married Taxpayer Enter \$100
693	681	Current Year's Qualifying Charity Credit	10	N	352, Line 13	Enter smaller of Line 11 or Line 12
694	682	Original Credit Amount 12b	10	N	352, Line 14b	Enter Amount from Prior Year 2
695	683	Previous Used Amount 12c	10	N	352, Line 14c	Enter Amount from Prior Year 2
696	684	Available Credit Carryover 12d	10	N	352, Line 14d	Enter Amount from Prior Year 2
697	685	Original Credit Amount 13b	10	N	352, Line 15b	Enter Amount from Prior Year 1
698	686	Previous Used Amount 13c	10	N	352, Line 15c	Enter Amount from Prior Year 1
699	687	Available Credit Carryover 13d	10	N	352, Line 15d	Enter Amount from Prior Year 1
700	688	Original Credit Amount 14b	10	N	352, Line 16b	Enter Amount from Prior Year 3
701	689	Previous Used Amount 14c	10	N	352, Line 16c	Enter Amount from Prior Year 3
702	690	Available Credit Carryover 14d	10	N	352, Line 16d	Enter Amount from Prior Year 3
703	691	Original Credit Amount 15b	10	N	352, Line 17b	Enter Amount from Prior Year 2
704	692	Previous Used Amount 15c	10	N	352, Line 17c	Enter Amount from Prior Year 2
705	693	Available Credit Carryover 15d	10	N	352, Line 17d	Enter Amount from Prior Year 2
706	694	Original Credit Amount 16b	10	N	352, Line 18b	Enter Amount from Prior Year 1
707	695	Previous Used Amount 16c	10	N	352, Line 18c	Enter Amount from Prior Year 1
708	696	Available Credit Carryover 16d	10	N	352, Line 18d	Enter Amount from Prior Year 1
709	697	Total Available Credit Carryover	10	N	352, Line 19	Add Lines 14 through 18 Column d
710	698	Current Yr's Credit	10	N	352, Line 20	Amount from 301, Part 1, line 13, Column a
711	699	Available Carryover	10	N	352, Line 21	Amount from 301, Part 1, line 13, Column b
712	700	Total Available Credit	10	N	352, Line 22	Amount from 301, Part 1, line 13, Column c
713	701	Trailer	5	A	*EOD*	

2018						
2D Barcode Record Layout						
2017	2018	FIELD NAME	LENGTH	TYPE	FORM & Line Number	BUSINESS RULE
FIELD NO	FIELD NO					
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	2018
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 hyphens
15	15	Address line 1	35	A/N	140PY, 2	Address line 1 or % (care of) line or recipient name if TP is deceased
16	16	Address line 2	35	A/N	140PY, 2	Address line 2 or Address line if 1 is % or deceased TP
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 available
20	20	Daytime Number	10	N	140PY, 94	
21	21	Married/Joint	1	A	140PY, 4	X or null
22	22	Injured Spouse Protection of Joint Overpayment	1	A	140PY, 4A	#REF!
23	23	Head of Household	1	A	140PY, 5	X or null
24	24	Married filing Separate	1	A	140PY, 6	X or null
25	25	Single	1	A	140PY, 7	X or null
26	26	Age 65 or over	1	N	140PY, 8	
27	27	Blind	1	N	140PY, 9	
28	28	Dependents	2	N	140PY, 10	
29	29	Parents/Ancestors	2	N	140PY, 11	
30	30	6 Month Extension	1	A	140PY, 82F	X or null
31	31	Part Year Other	1	A	140PY, 12	X or null
32	32	Part Year Active Military	1	A	140PY, 13	X or null
33	33	Dependent Information Additional Space	1	A	140PY, Box 10	X or null
34	34	Dependent 1 First Name	10	A	140PY, 10a(a1)	
35	35	Dependent 1 Last Name	10	A	140PY, 10a(a2)	
36	36	Dependent 1 SSN	9	N	140PY, 10a(b)	No hyphens
37	37	Dependent 1 Relationship	12	A	140PY, 10a(c)	
38	38	Dependent 1 Months	2	A	140PY, 10a(d)	Valid Values are (0 - 12) & S (Stillborn)
39	39	Dependent 1 Name Not Qualifying	1	A	140PY, 10a(e)	X or null
40	40	Dependent 1 Name Education	1	A	140PY, 10a(f)	X or null
41	41	Dependent 2 First Name	10	A	140PY, 10b(a1)	
42	42	Dependent 2 Last Name	10	A	140PY, 10b(a2)	
43	43	Dependent 2 SSN	9	N	140PY, 10b(b)	No hyphens
44	44	Dependent 2 Relationship	12	A	140PY, 10b(c)	
45	45	Dependent 2 Months	2	A	140PY, 10b(d)	Valid Values are (0 - 12) & S (Stillborn)
46	46	Dependent 2 Name Not Qualifying	1	A	140PY, 10b(e)	X or null
47	47	Dependent 2 Name Education	1	A	140PY, 10b(f)	X or null
48	48	Parent Info More Space--Qualifying Ancestors	1	A	140PY, Box 11	X or null
49	49	Parent 1 First Name	10	A	140PY, 11a(a1)	
50	50	Parent 1 Last Name	10	A	140PY, 11a(a2)	
51	51	Parent 1 SSN	9	N	140PY, 11a(b)	
52	52	Parent 1 Relationship	12	A	140PY, 11a(c)	
53	53	Parent 1 Months	2	N	140PY, 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
54	54	Parent 1 Age 65+	1	A	140PY, 11a(e)	X or null
55	55	Parent 1 Deceased In Tax Year	1	A	140PY, 11a(f)	X or null
56	56	Parent 2 First Name	10	A	140PY, 11a(a1)	
57	57	Parent 2 Last Name	10	A	140PY, 11a(a2)	
58	58	Parent 2 SSN	9	N	140PY, 11a(b)	
59	59	Parent 2 Relationship	12	A	140PY, 11a(c)	
60	60	Parent 2 Months	2	N	140PY, 11a(d)	Valid Values are (0 - 12) & S (Stillborn)
61	61	Parent 2 Age 65+	1	A	140PY, 11a(e)	X or null
62	62	Parent 2 Deceased In Tax Year	1	A	140PY, 11a(f)	X or null
63	63	Date of AZ Residence	17	A	140PY, 14	MMDDCCYY,MMDDCCYY Comma Delimited
64	64	Wages, Salaries Fed	10	N	140PY, 15Fed	
65	65	Wages, Salaries AZ	10	N	140PY, 15AZ	
66	66	Interest Fed	10	N	140PY, 16Fed	
67	67	Interest AZ	10	N	140PY, 16AZ	
68	68	Dividends Fed	10	N	140PY, 17Fed	
69	69	Dividends AZ	10	N	140PY, 17AZ	
70	70	AZ Inc Tax Refnd Fed	10	N	140PY, 18Fed	
71	71	AZ Inc Tax Refund AZ	10	N	140PY, 18AZ	
72	72	Alimony Received Fed	10	N	140PY, 19Fed	Removed TY2018
73	73	Alimony Received AZ	10	N	140PY, 19AZ	Removed TY2018
74	74	Business Inc (C) Fed	10	N	140PY, 19Fed	
75	75	Business Inc (C) AZ	10	N	140PY, 19AZ	
76	76	Gain/Loss (D) Fed	10	N	140PY, 20Fed	
77	77	Gain/Loss (D) AZ	10	N	140PY, 20AZ	
78	78	Rents etc (E) Fed	10	N	140PY, 21Fed	
79	79	Rents etc (E) AZ	10	N	140PY, 21AZ	
80	80	Other Fed Income Fed	10	N	140PY, 22Fed	
81	81	Other Fed Income AZ	10	N	140PY, 22AZ	
82	82	Total Income Fed	10	N	140PY, 23 Fed	Add lines 15-22 FED
83	83	Total Income AZ	10	N	140PY, 23AZ	Add lines 15-22 AZ
84	84	Other Fed Adjust Fed	10	N	140PY, 24 Fed	
85	85	Other Fed Adjust AZ	10	N	140PY, 24 AZ	
86	86	Fed Adjusted Gross	10	N	140PY, 25	Subtract line 24 from line 23

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

87	85	Arizona Income	10	N	140PY, 26	Subtract line 24 from line 23
88	86	Arizona Income Ratio	5	D(4,3)	140PY, 27	Divide line 26 by line 25 Enter 100% as 1.000; 50% as 0.500; 80.63% as 0.806
89	87	Total Depreciation	10	N	140PY, 28	
	88	Net capital (loss) derived from the exchange of legal tender	10	N	140PY, 29	Added TY2018
90	89	Other Additions	10	N	140PY, 30	
91	90	Total Additions	10	N	140PY, 31	Add lines 26, 28, 29 and 30
92	91	Total Arizona sourced net capital Gain/Loss	10	N	140PY, 32	
93	92	Total Net Short-Term Capital Gains	10	N	140PY, 33	
94	93	Total Net Long-Term Capital Gains	10	N	140PY, 34	
95	94	Total Capital Gains Assets	10	N	140PY, 35	
96	95	Allowable Subtraction Calculation	10	N	140PY, 36	Multiply Line 35 by 25% (.25)
97	96	Net Capital Gain - Investment In Qual. Small Business	10	N	140PY, Line 37	
	97	Net capital (loss) derived from the exchange of legal tender	10	N	140PY, Line 38	Added TY2018
98	98	Subtractions from Income	10	N	140PY, 39	Subtract lines 36, 37, and 38 from line 31
99	99	Total From Line 38	10	N	140PY, 40	Enter Amount from Page 1 Line 39
100	100	Recalculated Arizona Depreciation	10	N	140PY, 41	
101	101	Contributions To 529 College Savings Plans	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 41 through 46 from line 40
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 27
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	ITIMIZED OR PRORATED IF NOT MILITARY Single, Married Filing Separate = \$5,312 Married Filing Jointly, Head of Household = \$10,613
117	117	Personal Exemptions	10	N	140PY, 56	Single=\$2200, MFJ-0 Dep.=\$4400, MFJ-1+ Dep.=\$6600, HOH=\$4400, MFS-0 Dep.=\$2200, MFS-1+ Dep.=\$3300
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 Tax Table X or Y
120	120	Tax from Recapture Credits	10	N	140PY, 59	Amount from AZ Credit Form 301 Part 2 Line 36
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 69
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	
128	128	Total Estimated Payments	10	N	140NR, 65c	
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		Refundable Credit Form 342	1	A	140PY, 68-2	Removed TY2018. value "2" if checked; "0" or null if blank
133	132	Refundable Credit Form 349	1	A	140PY, 68-2	value "2" if checked; "0" or null if blank
134	133	Other Refundable Credits	10	N	140PY, 68	
135	134	Total Payments	10	N	140PY, 69	Add Lines 64 through 68
136	135	Tax Due	10	N	140PY, 70	If 63 is larger than 69, Subtract Line 69 from 63, Skip 71, 72, 73
137	136	Overpayment	10	N	140PY, 71	If 69 is larger than 63, Subtract Line 63 from 69
138	137	Next Year's Est Pmt	10	N	140PY, 72	Amount of Line 71 to be applied to 2019 estimated tax
139	138	Bal of Overpayment	10	N	140PY, 73	Subtract Line 72 from 71
140	139	Solutions Teams Assigned To Schools Contrib	10	N	140PY, 74	
141	140	Wildlife Contrib	10	N	140PY, 75	
142	141	Child Abuse Contrib	10	N	140PY, 76	
143	142	Domestic Violence Contrib	10	N	140PY, 77	
144	143	Political Contrib	10	N	140PY, 78	
145	144	Neighbors Helping Contrib	10	N	140PY, 79	
146	145	Special Olympics Contrib	10	N	140PY, 80	
147	146	Veterans' Donation Fund	10	N	140PY, 81	
148	147	I Didn't Pay Enough Fund	10	N	140PY, 82	
149	148	Sustainable State Parks and Road Fund	10	N	140PY, 83	
150	149	Spay/Neuter of Animals	10	N	140PY, 84	
151	150	Democratic Party	1	A	140PY, 85-1	"2" or null
152	151	Green Party	1	A	140PY, 85-2	"3" or null - Rename Only
153	152	Libertarian Party	1	A	140PY, 85-3	"4" or null
154	153	Republican Party	1	A	140PY, 85-4	"5" or null
155	154	Est Pmt Pen	10	N	140PY, 86	
156	155	Annualized Other	1	A	140PY, 87-1	Y or null
157	156	Farmer/Fisherman	1	A	140PY, 87-2	Y or null
158	157	Form 221 Attached	1	A	140PY, 87-3	Y or null
159		AZLTHSA Penalty	1	A	140PY, 87-4	Removed TY2018. Y or null
160	158	Tot Contrib/Penalty	10	N	140PY, 88	Add lines 74 through 84 and 86
161	159	Refund Amount	10	N	140PY, 89	Subtract Line 88 from 73, If less than zero, enter amount owed on line 90
162	160	Foreign Account	1	A	140PY, 89A	Y or Null; If "Y", Fields 163-166 should be disabled.
163	161	Dir Dep Routing Nbr	9	N	140PY, 98	For direct deposit; direct debit is not supported.
164	162	Dir Dep Account Nbr	17	A/N	140PY, 98	For direct deposit; direct debit is not supported.
165	163	Dir Dep Checking	1	A	140PY, 98	X or null; direct deposit only
166	164	Dir Dep Savings	1	A	140PY, 98	X or null; direct deposit only
167	165	Amount Owed	10	N	140PY, 90	Add lines 70 and 88
168	166	Prior Last Names	20	A	Front Page, 97	Comma delimited
169	167	Primary Occupation	16	A	140PY, pg2	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

170	168	Spouse Occupation	16	A	140PY_pg2	
171	169	Preparer Name	35	A/N	140PY_pg2	
172	170	Preparer FEIN	9	N	140PY_pg2	No hyphens
173	171	Preparer Address	35	A/N	140PY_pg2	
174	172	Preparer City	21	A	140PY_pg2	
175	173	Preparer State	2	A	140PY_pg2	
176	174	Preparer Zip Code	9	N	140PY_pg2	
177	175	Paid Preparer Phone Number	10	N	140PY_pg2	
178	176	Medical/Dental Expenses	10	N	FedSchA(2-D) 1	
179	177	Adjusted Gross Income	10	N	FedSchA(2-D) 2	
180	178	Medical Allowance	10	N	FedSchA(2-D) 3	
181	179	Total Medical/Dental	10	N	FedSchA(2-D) 4	
182	180	State and Local Taxes	10	N	FedSchA(2-D) 5	
183	181	Real Estate Taxes	10	N	FedSchA(2-D) 6	
184	182	Personal Property Taxes	10	N	FedSchA(2-D) 7	
185	183	Other Taxes	10	N	FedSchA(2-D) 8	
186	184	Total Other Taxes	10	N	FedSchA(2-D) 9	
187	185	Mortgage Interest from 1098	10	N	FedSchA(2-D) 10	
188	186	Other Mortgage Interest	10	N	FedSchA(2-D) 11	
189	187	Deductible Points	10	N	FedSchA(2-D) 12	
190	188	Qualified Mortgage Insurance Premiums	10	N	FedSchA(2-D) 13	
191	189	Investment Interest	10	N	FedSchA(2-D) 14	
192	190	Total Interest	10	N	FedSchA(2-D) 15	
193	191	Total Cash/Check Contrib	10	N	FedSchA(2-D) 16	
194	192	Non-Cash/Check Contrib	10	N	FedSchA(2-D) 17	
195	193	Carryover Prior Year	10	N	FedSchA(2-D) 18	
196	194	Total Contrib	10	N	FedSchA(2-D) 19	
197	195	Casualty/Theft Loss	10	N	FedSchA(2-D) 20	
198	196	Unreimb Emp Exp	10	N	FedSchA(2-D) 21	
199	197	Tax Preparation Fees	10	N	FedSchA(2-D) 22	
200	198	Tot Other Exp	10	N	FedSchA(2-D) 23	
201	199	Gross Misc Ded	10	N	FedSchA(2-D) 24	
202	200	Miscellaneous Allow	10	N	FedSchA(2-D) 26	
203	201	Total Misc Deduct	10	N	FedSchA(2-D) 27	
204	202	Tot Other Misc Deduct	10	N	FedSchA(2-D) 28	
205	203	Total Item Deduct	10	N	FedSchA(2-D) 29	
206	204	Medical/Dental Expenses	10	N	AZSchA(PY)/(PYN) 1	
207	205	Taxes Allowed	10	N	AZSchA(PY)/(PYN) 2	
208	206	Interest Expense	10	N	AZSchA(PY)/(PYN) 3	
209	207	Gifts Charity Allowed on Fed	10	N	AZSchA(PY)/(PYN) 4	
210	208	Casualty loss 1040	10	N	AZSchA(PY)/(PYN) 5	
211	209	Casualty Loss 4684	10	N	AZSchA(PY)/(PYN) 6	
212	210	Amount of Loss AZ	10	N	AZSchA(PY)/(PYN) 7	
213	211	Casualty Percentage	5	D(4,3)	AZSchA(PY)/(PYN) 8	Divide 7 by 6. Enter 100.0% as 1.000; 50.0% as 0.500; 80.63% as 0.806
214	212	Casualty Total	10	N	AZSchA(PY)/(PYN) 9	
215	213	Miscellaneous Fed	10	N	AZSchA(PY)/(PYN) 10	Multiply 5 by 8
216	214	Miscellaneous AZ	10	N	AZSchA(PY)/(PYN) 11	Removed TY2018
217	215	Misc Percentage	5	D(4,3)	AZSchA(PY)/(PYN) 12	Removed TY2018
218	216	Misc Deduction Fed	10	N	AZSchA(PY)/(PYN) 13	Removed TY2018
219	217	Misc Deduction %	10	N	AZSchA(PY)/(PYN) 14	Removed TY2018
220	218	Other Miscellaneous	10	N	AZSchA(PY)/(PYN) 15	Removed TY2018
221	219	Wagering losses	10	N	AZSchA(PY)/(PYN) 11	
222	220	Tot Gamble Wins AZ	10	N	AZSchA(PY)/(PYN) 12	
223	221	AllowGamble Subt	10	N	AZSchA(PY)/(PYN) 13	
224	222	Gamble Loss Deduct	10	N	AZSchA(PY)/(PYN) 14	
225	223	Gambling Total	10	N	AZSchA(PY)/(PYN) 15	If 14 is less than 11 subtract 14 from 11
226	224	Gambling Calculate	10	N	AZSchA(PY)/(PYN) 16	
227	225	Total	10	N	AZSchA(PY) 17	Add 1,2,3,4,9,16
228	226	Tentative AZ Item	10	N	AZSchA(PY)/(PYN) 23	Removed TY2018
229	227	FGI Reductions	10	N	AZSchA(PY)/(PYN) 24	Removed TY2018
230	228	Allowed Itemized Deductions	10	N	AZSchA(PY)/(PYN) 25	Removed TY2018
231	229	Percentage Itemized Deductions	10	N	AZSchA(PY)/(PYN) 26	Removed TY2018
232	230	Multi Result	10	N	AZSchA(PY)/(PYN) 27	Removed TY2018
233	231	Sub Result	10	N	AZSchA(PY)/(PYN) 28	Removed TY2018
234	232	Part2 Med/Dent Exp	10	N	AZSchA (PYN) 17	
235	233	Part2 MSA Distr Used	10	N	AZSchA (PYN) 18	Removed TY2018
236	234	Part2 Fed Med Deduct	10	N	AZSchA (PYN) 18	
237	235	Part2 Tot Med Deduct	10	N	AZSchA (PYN) 20	Removed TY2018
238	236	Part2 Med Add Adjust	10	N	AZSchA (PYN) 19	
239	237	Part2 Med Subt Adj	10	N	AZSchA (PYN) 20	
240	238	Part2 Fed Credit Int Paid	10	N	AZSchA (PYN) 21	
241	239	Part2 WagerLossFed	10	N	AZSchA (PYN) 22	
242	240	Part2 Gamble Win	10	N	AZSchA (PYN) 23	
243	241	Part2 AZ Lottery Subt	10	N	AZSchA (PYN) 24	
244	242	Part2 Max Gamble Loss Deduct	10	N	AZSchA (PYN) 25	
245	243	Part2 Gambling Subt Adj	10	N	AZSchA (PYN) 26	
246	244	Part2 Contrib Ad	10	N	AZSchA (PYN) 27	
247	245	Part2 Sum Add Adj	10	N	AZSchA (PYN) 28	
248	246	Part2 Sum Subt Adj	10	N	AZSchA (PYN) 29	
249	247	Part2 Tot Fed Item Deductions	10	N	AZSchA (PYN) 30	
250	248	Part2 Sum line 28	10	N	AZSchA (PYN) 31	
251	249	Part2 SumTotAzItem Deduct	10	N	AZSchA (PYN) 32	
252	250	Part2 Adj ItemDeduct	10	N	AZSchA (PYN) 33	
253	251	Part2 Subt Subtotal	10	N	AZSchA (PYN) 34	
254	252	Part2 Tot Line 23	10	N	AZSchA (PYN) 49	Removed TY2018
255	253	Part2 Subt Sum	10	N	AZSchA (PYN) 34	Removed TY2018
256	254	Part2 Az Percentage	5	D(4,3)	AZSchA (PYN) 35	Enter 100.0% as 1.000; 50.0% as 0.500; 80.63% as 0.806
257	255	Part2 Multi Sum	10	N	AZSchA (PYN) 36	
258	256	Part2 Az Item Deduct	10	N	AZSchA (PYN) 53	Removed TY2018
259	257	Employer ID (1)	9	N	W-2 (1st Wage Statement)	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

260	258	Employees SSN (1)	9	N	W-2 (1st Wage Statement)	
261	259	Arizona Wages (1)	10	N	W-2 (1st Wage Statement)	
262	260	Arizona Withholding (1)	10	N	W-2 (1st Wage Statement)	
263	261	Employer ID (2)	9	N	W-2 (2nd Wage Statement)	
264	262	Employees SSN (2)	9	N	W-2 (2nd Wage Statement)	
265	263	Arizona Wages (2)	10	N	W-2 (2nd Wage Statement)	
266	264	Arizona Withholding (2)	10	N	W-2 (2nd Wage Statement)	
267	265	Employer ID (3)	9	N	W-2 (3rd Wage Statement)	
268	266	Employees SSN (3)	9	N	W-2 (3rd Wage Statement)	
269	267	Arizona Wages (3)	10	N	W-2 (3rd Wage Statement)	
270	268	Arizona Withholding (3)	10	N	W-2 (3rd Wage Statement)	
271	269	Employer ID (4)	9	N	W-2 (4th Wage Statement)	
272	270	Employees SSN (4)	9	N	W-2 (4th Wage Statement)	
273	271	Arizona Wages (4)	10	N	W-2 (4th Wage Statement)	
274	272	Arizona Withholding (4)	10	N	W-2 (4th Wage Statement)	
275	273	Payer's ID (1)	9	N	1099-R (1st Statement)	
276	274	Recipient's SSN (1)	9	N	1099-R (1st Statement)	
277	275	1099 Gross Amt (1)	10	N	1099-R (1st Statement)	
278	276	1099 Taxable Amount (1)	10	N	1099-R (1st Statement)	
279	277	1099 Az WH (1)	10	N	1099-R (1st Statement)	
280	278	Payer's ID (2)	9	N	1099-R (2nd Statement)	
281	279	Recipient's SSN (2)	9	N	1099-R (2nd Statement)	
282	280	1099 Gross Amt (2)	10	N	1099-R (2nd Statement)	
283	281	1099 Taxable Amount (2)	10	N	1099-R (2nd Statement)	
284	282	1099 Az WH (2)	10	N	1099-R (2nd Statement)	
285	283	Enterprise Zone Credit b	10	N	301, Line 1b (Form 304)	
286	284	Enterprise Zone Credit c	10	N	301, Line 1c (Form 304)	
287	285	Environ Tech Fac Credit a	10	N	301, Line 2a (Form 305)	
288	286	Environ Tech Fac Credit b	10	N	301, Line 2b (Form 305)	
289	287	Environ Tech Fac Credit c	10	N	301, Line 2c (Form 305)	
290	288	Military Reuse Zone Credit a	10	N	301, Line 3a (Form 306)	Removed TY2018
291	289	Military Reuse Zone Credit b	10	N	301, Line 3b (Form 306)	
292	290	Military Reuse Zone Credit c	10	N	301, Line 3c (Form 306)	
293		Recycling Equipment Credit b	10	N	301, Line 4b (Form 307)	Removed TY2018
294		Recycling Equipment Credit c	10	N	301, Line 4c (Form 307)	Removed TY2018
295	291	Increased Research Act Ind Credit a	10	N	301, Line 4a (Form 308-I)	
296	292	Increased Research Act Ind Credit b	10	N	301, Line 4b (Form 308-I)	
297	293	Increased Research Act Ind Credit c	10	N	301, Line 4c (Form 308-I)	
298	294	Tax Paid Other State Cntry Credit a	10	N	301, Line 5a (Form 309)	
299	295	Tax Paid Other State Cntry Credit c	10	N	301, Line 5c (Form 309)	
300	296	Solar Energy Devices Credit a	10	N	301, Line 6a (Form 310)	
301	297	Solar Energy Devices Credit b	10	N	301, Line 6b (Form 310)	
302	298	Solar Energy Devices Credit c	10	N	301, Line 6c (Form 310)	
303	299	Agri Water Conserv Sys Credit a	10	N	301, Line 7a (Form 312)	
304	300	Agri Water Conserv Sys Credit b	10	N	301, Line 7b (Form 312)	
305	301	Agri Water Conserv Sys Credit c	10	N	301, Line 7c (Form 312)	
306	302	Polution Control Credit a	10	N	301, Line 8a (Form 315)	
307	303	Polution Control Credit b	10	N	301, Line 8b (Form 315)	
308	304	Polution Control Credit c	10	N	301, Line 8c (Form 315)	
309	305	Solar Heat and Elect Veh Outlets Credit a	10	N	301, Line 9a (Form 319)	Removed TY2018
310	306	Solar Heat and Elect Veh Outlets Credit b	10	N	301, Line 9b (Form 319)	
311	307	Solar Heat and Elect Veh Outlets Credit c	10	N	301, Line 9c (Form 319)	
312	308	Employ TANF Recipients Credit a	10	N	301, Line 10a (Form 320)	
313	309	Employ TANF Recipients Credit b	10	N	301, Line 10b (Form 320)	
314	310	Employ TANF Recipients Credit c	10	N	301, Line 10c (Form 320)	
315	311	Contrib Qual Chart Orgns Credit a	10	N	301, Line 11a (Form 321)	
316	312	Contrib Qual Chart Orgns Credit b	10	N	301, Line 11b (Form 321)	
317	313	Contrib Qual Chart Orgns Credit c	10	N	301, Line 11c (Form 321)	
318	314	Contrib Fees Paid Pub Schs Credit a	10	N	301, Line 12a (Form 322)	
319	315	Contrib Fees Paid Pub Schs Credit b	10	N	301, Line 12b (Form 322)	
320	316	Contrib Fees Paid Pub Schs Credit c	10	N	301, Line 12c (Form 322)	
321	317	Contrib Priv Sch Tuit Orgns Credit a	10	N	301, Line 13a (Form 323)	
322	318	Contrib Priv Sch Tuit Orgns Credit b	10	N	301, Line 13b (Form 323)	
323	319	Contrib Priv Sch Tuit Orgns Credit c	10	N	301, Line 13c (Form 323)	
324	320	Agri Pol Cntrl Equip Credit a	10	N	301, Line 14a (Form 325)	
325	321	Agri Pol Cntrl Equip Credit b	10	N	301, Line 14b (Form 325)	
326	322	Agri Pol Cntrl Equip Credit c	10	N	301, Line 14c (Form 325)	
327	323	Donation School Site Credit a	10	N	301, Line 15a (Form 331)	
328	324	Donation School Site Credit b	10	N	301, Line 15b (Form 331)	
329	325	Donation School Site Credit c	10	N	301, Line 15c (Form 331)	
330	326	Healthy Forest Enterprises Credit a	10	N	301, Line 16a (Form 332)	
331	327	Healthy Forest Enterprises Credit b	10	N	301, Line 16b (Form 332)	
332	328	Healthy Forest Enterprises Credit c	10	N	301, Line 16c (Form 332)	
333	329	Employ Natl Guard Members Credit a	10	N	301, Line 17a (Form 333)	
334	330	Employ Natl Guard Members Credit b	10	N	301, Line 17b (Form 333)	
335	331	Employ Natl Guard Members Credit c	10	N	301, Line 17c (Form 333)	
336	332	Business Contrib School Tuition Org a	10	N	301, Line 18a (Form 335-I)	
337	333	Business Contrib School Tuition Org b	10	N	301, Line 19b (Form 335-I)	
338	334	Business Contrib School Tuition Org c	10	N	301, Line 18c (Form 335-I)	
339	335	Solar Energy Devices Comm Ind Credit a	10	N	301, Line 19a (Form 336)	
340	336	Solar Energy Devices Comm Ind Credit b	10	N	301, Line 19b (Form 336)	
341	337	Solar Energy Devices Comm Ind Credit c	10	N	301, Line 19c (Form 336)	
342	338	Invest Qual Small Bus Credit a	10	N	301, Line 20a (Form 338)	
343	339	Invest Qual Small Bus Credit b	10	N	301, Line 20b (Form 338)	
344	340	Invest Qual Small Bus Credit c	10	N	301, Line 20c (Form 338)	
345	341	Military Fam Relf Fnd Credit a	10	N	301, Line 21a (Form 340)	
346	342	Military Fam Relf Fnd Credit c	10	N	301, Line 21c (Form 340)	
347	343	Business Contrib School Tuition Disabled a	10	N	301, Line 22a (Form 341-I)	
348	344	Business Contrib School Tuition Disabled b	10	N	301, Line 22b (Form 341-I)	
349	345	Business Contrib School Tuition Disabled c	10	N	301, Line 22c (Form 341-I)	
350	346	Renew Energy Prod Tax Credit a	10	N	301, Line 23a (Form 343)	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

351	347	Renew Energy Prod Tax Credit b	10	N	301, Line 23b (Form 343)	
352	348	Renew Energy Prod Tax Credit c	10	N	301, Line 23c (Form 343)	
353		Solar Liquid Fuel Credit a	10	N	301, Line 25a (Form 344)	Removed TY2018
354		Solar Liquid Fuel Credit c	10	N	301, Line 25c (Form 344)	Removed TY2018
355	349	New Employment Credit a	10	N	301, Line 24a (Form 345)	
356	350	New Employment Credit b	10	N	301, Line 24b (Form 345)	
357	351	New Employment Credit c	10	N	301, Line 24c (Form 345)	
358	352	Increased Resrch Act Basic Resrch Credit a	10	N	301, Line 25a (Form 346)	
359	353	Incres Resrch Act Basic Resrch Credit b	10	N	301, Line 25b (Form 346)	
360	354	Incres Resrch Act Basic Resrch Credit c	10	N	301, Line 25c (Form 346)	
361		Qual Hlth Ins Plan Credit b	10	N	301, Line 28b (Form 347)	Removed TY2018
362		Qual Hlth Ins Plan Credit c	10	N	301, Line 28c (Form 347)	Removed TY2018
363	355	Contrib Cert Schl Tuit Orgns Credit a	10	N	301, Line 26a (Form 348)	
364	356	Contrib Cert Schl Tuit Orgns Credit b	10	N	301, Line 26b (Form 348)	
365	357	Contrib Cert Schl Tuit Orgns Credit c	10	N	301, Line 26c (Form 348)	
366	358	Renew Energy Invest Prod Sif Consum Credit a	10	N	301, Line 27a (Form 351)	
367	359	Renew Energy Invest Prod Sif Consum Credit b	10	N	301, Line 27b (Form 351)	
368	360	Renew Energy Invest Prod Sif Consum Credit c	10	N	301, Line 27c (Form 351)	
369	361	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 28a (Form 352)	
	362	Contrib Qual Foster Care Char Orgns Credit a	10	N	301, Line 28b (Form 352)	Added TY2018
370	363	Contrib Qual Foster Care Char Orgns Credit c	10	N	301, Line 28c (Form 352)	
371	364	Total Available Nonrefundable Tax Credits	10	N	301, Line 30	Add Lines 1 through 28 Column c Only
372	365	Total AZ Tax	10	N	301, Line 31	Tax From F140 L47 or F140PY L58 or F140NR L58 or F140X L35
373	366	Tax Recap Environ Tech Fac Credit	10	N	301, Line 32	From AZ Credit Form 305 Part 5 Line 21
374	367	Tax Recap Credits Hlthy Forest Entrs	10	N	301, Line 33	From AZ Credit Form 332 Part 10 Line 40 and Part 11 Line 46
375		Tax Recap Credits Renew Engy Ind	10	N	301, Line 37c	Removed TY2108
376	368	Tax Recap Credits Qual Facs	10	N	301, Line 34	From AZ Credit Form 349 Part 7 Line 19
377	369	Tax Recap Crdts Renew Engy Invest Prod Sif Cons	10	N	301, Line 35	From AZ Credit Form 351 Part 2 Line 24
378	370	Total Recapture of Credits	10	N	301, Line 36	Add Lines 32 through 35 Enter Here and on F140 L48, F140PY L59, F140NR L59, F140X L36
379	371	Subtotal Tax Credits and Recap Credits	10	N	301, Line 37	Add Lines 31 and 36
380	372	Family Income Tax Credit	10	N	301, Line 38	From F140 L50 or F140PY L61 or F140X L38
381	373	Total Tax Credits and Recap Credits	10	N	301, Line 39	Subtract Lines 38 from Line 37. If less than Zero Enter Zero
382	374	Enterprise Zone Credit Used	10	N	301, Line 40 (Form 304)	
383	375	Environ Tech Fac Credit Used	10	N	301, Line 41 (Form 305)	
384	376	Military Reuse Zone Credit Used	10	N	301, Line 42 (Form 306)	
385		Recycling Equipment Credit Used	10	N	301, Line 47 (Form 307)	Removed TY2018
386	377	Increased Research Act Indiv Credit Used	10	N	301, Line 43 (Form 308-I)	
387	378	Tax Paid Other State Ctry Credit Used	10	N	301, Line 44 (Form 309)	
388	379	Solar Energy Devices Credit Used	10	N	301, Line 45 (Form 310)	
389	380	Agri Water Conserv Sys Credit Used	10	N	301, Line 46 (Form 312)	
390	381	Polution Control Credit Used	10	N	301, Line 47 (Form 315)	
391	382	Solar Heat and Elect Veh Outlets Credit Used	10	N	301, Line 48 (Form 319)	
392	383	Employ TANF Recipients Credit Used	10	N	301, Line 49 (Form 320)	
393	384	Contrib Qual Chart Orgns Credit Used	10	N	301, Line 50 (Form 321)	
394	385	Contrib Fees Paid Pub Schs Credit Used	10	N	301, Line 51 (Form 322)	
395	386	Contrib Priv Sch Tuit Orgns Credit Used	10	N	301, Line 52 (Form 323)	
396	387	Agri Pol Cntrl Equip Credit Used	10	N	301, Line 53 (Form 325)	
397	388	Donation School Site Credit Used	10	N	301, Line 54 (Form 331)	
398	389	Healthy Forest Enterprises Credit Used	10	N	301, Line 55 (Form 332)	
399	390	Employ Natl Guard Members Credit Used	10	N	301, Line 56 (Form 333)	
400	391	Business Contrib School Tuition Org Used	10	N	301, Line 57 (Form 335-I)	
401	392	Solar Energy Devices Comm Indus Used	10	N	301, Line 58 (Form 336)	
402	393	Invest Qual Small Bus Credit Used	10	N	301, Line 59 (Form 338)	
403	394	Donations Military Fam Relf Fnd Credit Used	10	N	301, Line 60 (Form 340)	
404	395	Business Contrib School Tuition Disabled a	10	N	301, Line 61 (Form 341-I)	
405	396	Renew Energy Prod Tax Credit Used	10	N	301, Line 62 (Form 343)	
406		Solar Liquid Fuel Credit Used	10	N	301, Line 68 (Form 344)	Removed TY2018
407	397	New Employment Credit Used	10	N	301, Line 63 (Form 345)	
408	398	Incres Resrch Act Basic Resrch Credit Used	10	N	301, Line 64 (Form 346)	
409		Qual Hlth Ins Plans Credit Used	10	N	301, Line 71 (Form 347)	Removed TY2018
410	399	Contrib Cert Schl Tuit Orgns Credit Used	10	N	301, Line 65 (Form 348)	
411	400	Renew Energy Invest Prod Sif Consum Credit Used	10	N	301, Line 66 (Form 351)	
412	401	Contrib Qual Foster Care Char Orgns Credit Used	10	N	301, Line 67 (Form 352)	
413	403	Total Nonrefundable Tax Credits Used	10	N	301, Line 69	Add Lines 40 through 67. Total Cannot be more than 39. Enter this amount on Form 140 L51, 140PY L62, 140NR L61, or 104X
414	404	Description of Income Items a	30	A	309, Line 1a	
415	405	Description of Income Items b	30	A	309, Line 1b	
416	406	Description of Income Items c	30	A	309, Line 1c	
417	407	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a	
418	408	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b	
419	409	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c	
420	410	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a	
421	411	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b	
422	412	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c	
423	413	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a	
424	414	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b	
425	415	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c	
426	416	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a	Enter smaller of Line 3 or 4
427	417	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b	Enter smaller of Line 3 or 4
428	418	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c	Enter smaller of Line 3 or 4
429	419	Tot Income Taxable by Both AZ Other	10	N	309, Line 6	Add Line 5 a, b, and c
430	420	AZ Tax Liable Less Credits	10	N	309, Line 7	
431	421	Amt Part1 Line6	10	N	309, Line 8	
432	422	Amt AZ Income Tax Imposed	10	N	309, Line 9	
433	423	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)
434	424	Amt AZ Tax Liability After Credits	10	N	309, Line 11	Multiply Line 7 by the Decimal on Line 10
435	425	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b	
436	426	Tot Income Taxable By Both	10	N	309, Line 13	From Part 1 Line 6
437	427	Tot Income Taxable By Other	10	N	309, Line 14	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

438	428	Pct Income Taxable by Other	6	D(4,3)	309, Line 15	Divide Line 13 by Line 14 (Cannot be greater than 1.000)
439	429	Tot Amt Tax Paid Other	10	N	309, Line 16	Multiply Line 12 by the Decimal on Line 15
440	430	Credit Allow Tax Paid Other	10	N	309, Line 17	Enter smaller of Line 11 or 16
441	431	Description of Income Items a	30	A	309, Line 1a (2)	
442	432	Description of Income Items b	30	A	309, Line 1b (2)	
443	433	Description of Income Items c	30	A	309, Line 1c (2)	
444	434	Amt Income Listed Report AZ Oth St Cntry a	10	N	309, Line 2a (2)	
445	435	Amt Income Listed Report AZ Oth St Cntry b	10	N	309, Line 2b (2)	
446	436	Amt Income Listed Report AZ Oth St Cntry c	10	N	309, Line 2c (2)	
447	437	Amt Income Include AZ Adj Gross a	10	N	309, Line 3a (2)	
448	438	Amt Income Include AZ Adj Gross b	10	N	309, Line 3b (2)	
449	439	Amt Income Include AZ Adj Gross c	10	N	309, Line 3c (2)	
450	440	Amt Income Include Oth Adj Gross a	10	N	309, Line 4a (2)	
451	441	Amt Income Include Oth Adj Gross b	10	N	309, Line 4b (2)	
452	442	Amt Income Include Oth Adj Gross c	10	N	309, Line 4c (2)	
453	443	Amt Income Taxable by Both AZ Oth a	10	N	309, Line 5a (2)	Enter smaller of Line 3 or 4
454	444	Amt Income Taxable by Both AZ Oth b	10	N	309, Line 5b (2)	Enter smaller of Line 3 or 4
455	445	Amt Income Taxable by Both AZ Oth c	10	N	309, Line 5c (2)	Enter smaller of Line 3 or 4
456	446	Tot Income Taxable by Both AZ Other	10	N	309, Line 6 (2)	Add Line 5 a, b, and c
457	447	AZ Tax Liabie Less Credits	10	N	309, Line 7 (2)	
458	448	Amt Part1 Line6	10	N	309, Line 8 (2)	
459	449	Amt AZ Income Tax Imposed	10	N	309, Line 9 (2)	
460	450	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)
461	451	Amt AZ Tax Liability After Credits	10	N	309, Line 11 (2)	Multiply Line 7 by the Decimal on Line 10
462	452	Amt Income Tax Paid St or Cntry	10	N	309, Line 12b (2)	
463	453	Tot Income Taxable By Both	10	N	309, Line 13 (2)	From Part 1 Line 6
464	454	Tot Income Taxable By Other	10	N	309, Line 14 (2)	
465	455	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)
466	456	Tot Amt Tax Paid Other	10	N	309, Line 16 (2)	Multiply Line 12 by the Decimal on Line 15
467	457	Credit Allow Tax Paid Other	10	N	309, Line 17 (2)	Enter smaller of Line 11 or 16
468	458	Address of Solar Energy Device	35	A/N	310, Line 1a	
469	459	City of Solar Energy Device	21	A	310, Line 1b	
470	460	State of Solar Energy Device	2	A	310, Line 1c	
471	461	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
472	462	Cost of Solar Energy Device	10	N	310, Line 2	
473	463	Percentage of Cost Solar Energy Device	10	N	310, Line 3	AZ Credit Form 310 Multiply Line 2 by .25 (25%)
474	464	Enter Lesser of Line 3 or \$1000	10	N	310, Line 4	
475	465	Amt Credit Prior Years	10	N	310, Line 5	
476	466	Total Credit Current Prior Years	10	N	310, Line 6	Add Lines 4 and 5
477	467	Enter Lesser of Line 6 or \$1000	10	N	310, Line 7	
478	468	Subtotal Allowable Credit	10	N	310, Line 8	Subtract Line 5 from Line 7
479	469	Total Allowable Credit	10	N	310, Line 9	Enter smaller of Line 4 or Line 8
480	470	Original Credit Amount 10b	10	N	310, Line 10b	Enter Amount from Prior Year 5
481	471	Previous Used Amount 10c	10	N	310, Line 10c	Enter Amount from Prior Year 5
482	472	Available Carryover Amount 10d	10	N	310, Line 10d	Enter Amount from Prior Year 5
483	473	Original Credit Amount 11b	10	N	310, Line 11b	Enter Amount from Prior Year 4
484	474	Previous Used Amount 11c	10	N	310, Line 11c	Enter Amount from Prior Year 4
485	475	Available Carryover Amount 11d	10	N	310, Line 11d	Enter Amount from Prior Year 4
486	476	Original Credit Amount 12b	10	N	310, Line 12b	Enter Amount from Prior Year 3
487	477	Previous Used Amount 12c	10	N	310, Line 12c	Enter Amount from Prior Year 3
488	478	Available Carryover Amount 12d	10	N	310, Line 12d	Enter Amount from Prior Year 3
489	479	Original Credit Amount 13b	10	N	310, Line 13b	Enter Amount from Prior Year 2
490	480	Previous Used Amount 13c	10	N	310, Line 13c	Enter Amount from Prior Year 2
491	481	Available Carryover Amount 13d	10	N	310, Line 13d	Enter Amount from Prior Year 2
492	482	Original Credit Amount 14b	10	N	310, Line 14b	Enter Amount from Prior Year 1
493	483	Previous Used Amount 14c	10	N	310, Line 14c	Enter Amount from Prior Year 1
494	484	Available Carryover Amount 14d	10	N	310, Line 14d	Enter Amount from Prior Year 1
495	485	Total Available Carryover	10	N	310, Line 15	Add Lines 10 through 14 column d
496	486	Current Year Credit	10	N	310, Line 16	Enter Amount from Part 1 Line 9
497	487	Current Available Carryover	10	N	310, Line 17	Enter Amount from Part 2 Line 15 Column d
498	488	Total Available Credit	10	N	310, Line 18	Add Lines 16 and 17
499	489	Qualifying Charity Code 1	30	A	321, Line 1a	
500	490	Qualifying Charity Name 1	30	A	321, Line 1b	
501	491	Amt Contributed 1	10	N	321, Line 1c	
502	492	Qualifying Charity Code 2	30	A	321, Line 2a	
503	493	Qualifying Charity Name 2	30	A	321, Line 2b	
504	494	Amount Contributed 2	10	N	321, Line 2c	
505	495	Qualifying Charity Code 3	30	A	321, Line 3a	
506	496	Qualifying Charity Name 3	30	A	321, Line 3b	
507	497	Amount Qualifying Charity Contributed 3	10	N	321, Line 3c	
508	498	Continuation Sheet 4h or Zero	10	N	321, Line 4	Amount from line 4h of Continuation Sheet or Zero.
509	499	Total Qualifying Charity	10	N	321, Line 5	Add lines 1-4 Column c
510	500	Qualifying Charity Code 4	30	A	321, Line 6a	
511	501	Qualifying Charity Name 4	30	A	321, Line 6b	
512	502	Amt Contributed 4	10	N	321, Line 6c	
513	503	Qualifying Charity Code 5	30	A	321, Line 7a	
514	504	Qualifying Charity Name 5	30	A	321, Line 7b	
515	505	Amount Contributed 5	10	N	321, Line 7c	
516	506	Qualifying Charity Code 6	30	A	321, Line 8a	
517	507	Qualifying Charity Name 6	30	A	321, Line 8b	
518	508	Amount Qualifying Charity Contributed 6	10	N	321, Line 8c	
519	509	Continuation Sheet 9h or Zero	10	N	321, Line 9	Amount from line 9h of Continuation Sheet or Zero.
520	510	Total Cash Contri Qual Charity	10	N	321, Line 10	Add lines 6-9 Column c
521	511	Total Qualifying Charity2	10	N	321, Line 11	Add lines 5 and 10
522	512	Allowable Charity Credit	10	N	321, Line 12	AZ Credit Form 321 Single Taxpayer or Heads of Household Enter \$400 Married Taxpayer Enter \$800
523	513	Current Year's Qualifying Charity Credit	10	N	321, Line 13	Enter smaller of Line 11 or Line 12
524	514	Original Credit Amount 12b	10	N	321, Line 14b	Enter Amount from Prior Year 5
525	515	Previous Used Amount 12c	10	N	321, Line 14c	Enter Amount from Prior Year 5
526	516	Available Credit Carryover 12d	10	N	321, Line 14d	Enter Amount from Prior Year 5
527	517	Original Credit Amount 13b	10	N	321, Line 15b	Enter Amount from Prior Year 4

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

528	518	Previous Used Amount 13c	10	N	321, Line 15c	Enter Amount from Prior Year 4
529	519	Available Credit Carryover 13d	10	N	321, Line 15d	Enter Amount from Prior Year 4
530	520	Original Credit Amount 14b	10	N	321, Line 16b	Enter Amount from Prior Year 3
531	521	Previous Used Amount 14c	10	N	321, Line 16c	Enter Amount from Prior Year 3
532	522	Available Credit Carryover 14d	10	N	321, Line 16d	Enter Amount from Prior Year 3
533	523	Original Credit Amount 15b	10	N	321, Line 17b	Enter Amount from Prior Year 2
534	524	Previous Used Amount 15c	10	N	321, Line 17c	Enter Amount from Prior Year 2
535	525	Available Credit Carryover 15d	10	N	321, Line 17d	Enter Amount from Prior Year 2
536	526	Original Credit Amount 16b	10	N	321, Line 18b	Enter Amount from Prior Year 1
537	527	Previous Used Amount 16c	10	N	321, Line 18c	Enter Amount from Prior Year 1
538	528	Available Credit Carryover 16d	10	N	321, Line 18d	Enter Amount from Prior Year 1
539	529	Total Available Credit Carryover	10	N	321, Line 19	Add Lines 14 through 18 Column d
540	530	Current Yr's Credit	10	N	321, Line 20	Form 301, Part 1, line 13, Column a
541	531	Available Carryover	10	N	321, Line 21	Form 301, Part 1, line 13, Column b
542	532	Total Available Credit	10	N	321, Line 22	Form 301, Part 1, line 13, Column c
543	533	CTDS Code 1	30	A	322, Line 1a	
544	534	School Name 1	30	A	322, Line 1b	
545	535	School District 1	30	A	322, Line 1c	
546	536	Amt of Fees Paid 1	10	N	322, Line 1d	
547	537	CTDS Code 2	30	A	322, Line 2a	
548	538	School Name 2	30	A	322, Line 2b	
549	539	School District 2	30	A	322, Line 2c	
550	540	Amt of Fees Paid 2	10	N	322, Line 2d	
551	541	CTDS Code 3	30	A	322, Line 3a	
552	542	School Name 3	30	A	322, Line 3b	
553	543	School District 3	30	A	322, Line 3c	
554	544	Amt of Fees Paid 3	10	N	322, Line 3d	
555	545	Continuation Sheet 4h or Zero	10	N	322, Line 4	Amount from line 4h of Continuation Sheet or Zero.
556	546	Cash Contributions Public Schools	10	N	322, Line 5	Add lines 1-4 Column d
557	547	CTDS Code 4	30	A	322, Line 6a	
558	548	School Name 4	30	A	322, Line 6b	
559	549	School District 4	30	A	322, Line 6c	
560	550	Amt of Fees Paid 4	10	N	322, Line 6d	
561	551	CTDS Code 5	30	A	322, Line 7a	
562	552	School Name 5	30	A	322, Line 7b	
563	553	School District 5	30	A	322, Line 7c	
564	554	Amt of Fees Paid 5	10	N	322, Line 7d	
565	555	CTDS Code 6	30	A	322, Line 8a	
566	556	School Name 6	30	A	322, Line 8b	
567	557	School District 6	30	A	322, Line 8c	
568	558	Amt of Fees Paid 6	10	N	322, Line 8d	
569	559	Continuation Sheet 9h or Zero	10	N	322, Line 9	Amount from line 9h of Continuation Sheet or Zero.
570	560	Cash Contributions Public Schools2	10	N	322, Line 10	Add lines 6-9 Column d
571	561	Total Cash and Credit Contri Pub Schools	10	N	322, Line 11	Add lines 5 and 10
572	562	Allowable Cash Contributions Public Schools	10	N	322, Line 12	Single / Heads of Household = \$200 Married = \$400
573	563	Current Year's Credit	10	N	322, Line 13	Enter smaller of Line 11 or Line 12
574	564	Original Credit Amount 7	10	N	322, Line 14b	Enter Amount from Prior Year 5
575	565	Previous Used Amount 7	10	N	322, Line 14c	Enter Amount from Prior Year 5
576	566	Available Credit Carryover 7	10	N	322, Line 14d	Enter Amount from Prior Year 5
577	567	Original Credit Amount 8	10	N	322, Line 15b	Enter Amount from Prior Year 4
578	568	Previous Used Amount 8	10	N	322, Line 15c	Enter Amount from Prior Year 4
579	569	Available Credit Carryover 8	10	N	322, Line 15d	Enter Amount from Prior Year 4
580	570	Original Credit Amount 9	10	N	322, Line 16b	Enter Amount from Prior Year 3
581	571	Previous Used Amount 9	10	N	322, Line 16c	Enter Amount from Prior Year 3
582	572	Available Credit Carryover 9	10	N	322, Line 16d	Enter Amount from Prior Year 3
583	573	Original Credit Amount 10	10	N	322, Line 17b	Enter Amount from Prior Year 2
584	574	Previous Used Amount 10	10	N	322, Line 17c	Enter Amount from Prior Year 2
585	575	Available Credit Carryover 10	10	N	322, Line 17d	Enter Amount from Prior Year 2
586	576	Original Credit Amount 11	10	N	322, Line 18b	Enter Amount from Prior Year 1
587	577	Previous Used Amount 11	10	N	322, Line 18c	Enter Amount from Prior Year 1
588	578	Available Credit Carryover 11	10	N	322, Line 18d	Enter Amount from Prior Year 1
589	579	Total Available Carryover	10	N	322, Line 19	Add lines 14-18 Column d
590	580	Current Year's Total Credit	10	N	322, Line 20	Form 301, Part 1, line 13, Column a
591	581	Available Credit Carryover	10	N	322, Line 21	Form 301, Part 1, line 13, Column b
592	582	Total Available Credit	10	N	322, Line 22	Form 301, Part 1, line 13, Column c
593	583	Name of School 1	30	A	323, Line 1a	
594	584	Street Address of School 1	30	A	323, Line 1b	
595	585	City State of School 1	30	A	323, Line 1c	
596	586	Amt of Contribution School 1	10	N	323, Line 1d	
597	587	Name of School 2	30	A	323, Line 2a	
598	588	Street Address of School 2	30	A	323, Line 2b	
599	589	City State of School 2	30	A	323, Line 2c	
600	590	Amt of Contribution School 2	10	N	323, Line 2d	
601	591	Name of School 3	30	A	323, Line 3a	
602	592	Street Address of School 3	30	A	323, Line 3b	
603	593	City State of School 3	30	A	323, Line 3c	
604	594	Amt of Contribution School 3	10	N	323, Line 3d	
605	595	Continuation Sheet 4h or Zero	10	N	323, Line 4	Amount from line 4h of Continuation Sheet or Zero.
606	596	Total Contributions School Prev Tuition	10	N	323, Line 5	Add lines 1-4 Column d
607	597	Name of School 4	30	A	323, Line 6a	
608	598	Street Address of School 4	30	A	323, Line 6b	
609	599	City State of School 4	30	A	323, Line 6c	
610	600	Amt of Contribution School 4	10	N	323, Line 6d	
611	601	Name of School 5	30	A	323, Line 7a	
612	602	Street Address of School 5	30	A	323, Line 7b	
613	603	City State of School 5	30	A	323, Line 7c	
614	604	Amt of Contribution School 5	10	N	323, Line 7d	
615	605	Name of School 6	30	A	323, Line 8a	
616	606	Street Address of School 6	30	A	323, Line 8b	
617	607	City State of School 6	30	A	323, Line 8c	
618	608	Amt of Contribution School 6	10	N	323, Line 8d	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

619	609	Continuation Sheet 9h or Zero			323, Line 9	Amount from line 9h of Continuation Sheet or Zero.
620	610	Total Contributions School Tuition	10	N	323, Line 10	Add lines 6-9 Column d
621	611	Total Amt of Contribution 2015	10	N	323, Line 11	Add Lines 5 and 10
622	612	Allowable Contributions School Tuition		N	323, Line 12	Single Taxpayer or Heads of Household Enter \$546 Married Taxpayer Enter \$1092
623	613	Current Year's Credit	10	N	323, Line 13	Enter smaller of Line 11 or Line 12
624	614	Original Credit Amount 6	10	N	323, Line 14b	Enter Amount from Prior Year 5
625	615	Previous Used Amount 6	10	N	323, Line 14c	Enter Amount from Prior Year 5
626	616	Available Credit Carryover 6	10	N	323, Line 14d	Enter Amount from Prior Year 5
627	617	Original Credit Amount 7	10	N	323, Line 15b	Enter Amount from Prior Year 4
628	618	Previous Used Amount 7	10	N	323, Line 15c	Enter Amount from Prior Year 4
629	619	Available Credit Carryover 7	10	N	323, Line 15d	Enter Amount from Prior Year 4
630	620	Original Credit Amount 8	10	N	323, Line 16b	Enter Amount from Prior Year 3
631	621	Previous Used Amount 8	10	N	323, Line 16c	Enter Amount from Prior Year 3
632	622	Available Credit Carryover 8	10	N	323, Line 16d	Enter Amount from Prior Year 3
633	623	Original Credit Amount 9	10	N	323, Line 17b	Enter Amount from Prior Year 2
634	624	Previous Used Amount 9	10	N	323, Line 17c	Enter Amount from Prior Year 2
635	625	Available Credit Carryover 9	10	N	323, Line 17d	Enter Amount from Prior Year 2
636	626	Original Credit Amount 10	10	N	323, Line 18b	Enter Amount from Prior Year 1
637	627	Previous Used Amount 10	10	N	323, Line 18c	Enter Amount from Prior Year 1
638	628	Available Credit Carryover 10	10	N	323, Line 18d	Enter Amount from Prior Year 1
639	629	Total Available Carryover	10	N	323, Line 19	Add lines 14-18 Column d
640	630	Current Year's Total Credit	10	N	323, Line 20	Form 301, Part 1, line 14, column a
641	631	Available Credit Carryover	10	N	323, Line 21	Form 301, Part 1, line 14, column b
642	632	Total Available Credit	10	N	323, Line 22	Form 301, Part 1, line 14, column c
643	633	Total Contribs Current Tx Yr	10	N	323, Line 23	
644	634	Max Credit Allow CR323	10	N	323, Line 24	Single Taxpayer or Heads of Household Enter \$546 Married Taxpayer Enter \$1092
645	635	Total Excess Contributions	10	N	323, Line 25	Subtract line 24 from line 23 or zero
646	636	ADVS Receipt Yes	1	A	340, Box 1-YES	X or null
647	637	ADVS Receipt No	1	A	340, Box 1-NO	X or null
648	638	Qualified Donations pre-9/11	10	N	340, Line 2	Added TY2018
648	639	Qualified Donations post-9/11	10	N	340, Line 3	Added TY2018
648	640	Total Qualified Donations	10	N	340, Line 4	
649	641	Allowable Qualified Donations	10	N	340, Line 5	Single Taxpayer or Heads of Household Enter \$200 Married Taxpayer Enter \$400
650	642	Current Year's Credit	10	N	340, Line 6	Enter smaller of Line 4 or Line 5
651	643	Claiming School Credit Form 323 Yes	1	A	348, Box 1a-YES	X or null
652	644	Claiming School Credit Form 323 No	1	A	348, Box 1a-NO	X or null
653	645	Excess School Credit Form 323 Yes	1	A	348, Box 1b-YES	X or null
654	646	Excess School Credit Form 323 No	1	A	348, Box 1b-NO	X or null
655	647	Claiming Carryover Only Yes	1	A	348, Box 1c-YES	X or null
656	648	Claiming Carryover Only No	1	A	348, Box 1c-NO	X or null
657	649	Name of School 1	30	A	348, Line 2a	
658	650	Address of School 1	30	A	348, Line 2b	
659	651	City State of School 1	30	A	348, Line 2c	
660	652	Amt of Contribution 2015 1	10	N	348, Line 2d	
661	653	Name of School 2	30	A	348, Line 3a	
662	654	Address of School 2	30	A	348, Line 3b	
663	655	City State of School 2	30	A	348, Line 3c	
664	656	Amt of Contribution 2015 2	10	N	348, Line 3d	
665	657	Name of School 3	30	A	348, Line 4a	
666	658	Address of School 3	30	A	348, Line 4b	
667	659	City State of School 3	30	A	348, Line 4c	
668	660	Amt of Contribution 2015 3	10	N	348, Line 4d	
669	661	Amount from line 5h of Continuation Sheet or Zero.	10	N	348, Line 5	Amount from line 5h of Continuation Sheet or Zero.
670	662	Total Contributions Certified School Tuition Prev Yr	10	N	348, Line 6	Add lines 2-5 Column d
671	663	Name of School 4	30	A	348, Line 7a	
672	664	Address of School 4	30	A	348, Line 7b	
673	665	City State of School 4	30	A	348, Line 7c	
674	666	Amt of Contribution 2016 4	10	N	348, Line 7d	
675	667	Name of School 5	30	A	348, Line 8a	
676	668	Address of School 5	30	A	348, Line 8b	
677	669	City State of School 5	30	A	348, Line 8c	
678	670	Amt of Contribution 2016 5	10	N	348, Line 8d	
679	671	Name of School 6	30	A	348, Line 9a	
680	672	Address of School 6	30	A	348, Line 9b	
681	673	City State of School 6	30	A	348, Line 9c	
682	674	Amt of Contribution 2016 6	10	N	348, Line 9d	
683	675	Amount from line 5h of Continuation Sheet or Zero.	10	N	348, Line 10	Amount from line 5h of Continuation Sheet or Zero.
684	676	Total Contributions Certified School Tuition	10	N	348, Line 11	Add lines 7-10 Column d
685	677	Total Contributions Prev and Curr	10	N	348, Line 12	Add Line 6 and 11
686	678	Allowable Credit Claimed Form 323	10	N	348, Line 13	Enter amount from Form 323, Part 1 Line 5
687	679	Potential Credit	10	N	348, Line 14	Subtract Line 13 from Line 12
688	680	Allowable Max Credit	10	N	348, Line 15	Single Taxpayer or Heads of Household Enter \$543 Married Taxpayer Enter \$1085
689	681	Current Year's Credit	10	N	348, Line 16	Enter the smaller of Line 14 or Line 15
690	682	Original Credit Amount 10	10	N	348, Line 17b	Enter Amount from Prior Year 5
691	683	Previous Used Amount 10	10	N	348, Line 17c	Enter Amount from Prior Year 5
692	684	Available Credit Carryover 10	10	N	348, Line 17d	Enter Amount from Prior Year 5
693	685	Original Credit Amount 11	10	N	348, Line 18b	Enter Amount from Prior Year 4
694	686	Previous Used Amount 11	10	N	348, Line 18c	Enter Amount from Prior Year 4
695	687	Available Credit Carryover 11	10	N	348, Line 18d	Enter Amount from Prior Year 4
696	688	Original Credit Amount 12	10	N	348, Line 19b	Enter Amount from Prior Year 3
697	689	Previous Used Amount 12	10	N	348, Line 19c	Enter Amount from Prior Year 3
698	690	Available Credit Carryover 12	10	N	348, Line 19d	Enter Amount from Prior Year 3
699	691	Original Credit Amount 13	10	N	348, Line 20b	Enter Amount from Prior Year 2
700	692	Previous Used Amount 13	10	N	348, Line 20c	Enter Amount from Prior Year 2
701	693	Available Credit Carryover 13	10	N	348, Line 20d	Enter Amount from Prior Year 2
702	694	Original Credit Amount 14	10	N	348, Line 21b	Enter Amount from Prior Year 1
703	695	Previous Used Amount 14	10	N	348, Line 21c	Enter Amount from Prior Year 1

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

704	696	Available Credit Carryover 14		N	348, Line 21d	Enter Amount from Prior Year 1
705	697	Total Available Carryover	10	N	348, Line 22	Add lines 17-21 column d
706	698	Current Year's Total Credit	10	N	348, Line 23	Form 301, Part 1, line 29, column a
707	699	Available Credit Carryover	10	N	348, Line 24	Form 301, Part 1, line 29, column b
708	700	Total Available Credit	10	N	348, Line 25	Form 301, Part 1, line 29, column c
709	701	Qualifying Foster Care Charity Code 1	30	A	352, Line 1a	Changed TY2018
710	702	Qualifying Foster Care Charity Name 1	30	A	352, Line 1b	Changed TY2018
711	703	Amt Contributed 1	10	N	352, Line 1c	
712	704	Qualifying Foster Care Charity Code 2	30	A	352, Line 2a	Changed TY2018
713	705	Qualifying Foster Care Charity Name 2	30	A	352, Line 2b	Changed TY2018
714	706	Amount Contributed 2	10	N	352, Line 2c	
715	707	Qualifying Foster Care Charity Code 3	30	A	352, Line 3a	Changed TY2018
716	708	Qualifying Foster Care Charity Name 3	30	A	352, Line 3b	Changed TY2018
717	709	Amount Qualifying Foster Care Charity Contributed 3	10	N	352, Line 3c	
718	710	Amount from line 4h of Continuation Sheet or Zero.	10	N	352, Line 4	Amount from line 4h of Continuation Sheet or Zero.
719	711	Total Qualifying Foster Care Charity	10	N	352, Line 5	Add lines 1-4 Column c
720	712	Qualifying Foster Care Charity Code 4	30	A	352, Line 6a	Changed TY2018
721	713	Qualifying Foster Care Charity Name 4	30	A	352, Line 6b	Changed TY2018
722	714	Amt Contributed 4	10	N	352, Line 6c	
723	715	Qualifying Foster Care Charity Code 5	30	A	352, Line 7a	Changed TY2018
724	716	Qualifying Foster Care Charity Name 5	30	A	352, Line 7b	Changed TY2018
725	717	Amount Contributed 5	10	N	352, Line 7c	
726	718	Qualifying Foster Care Charity Code 6	30	A	352, Line 8a	Changed TY2018
727	719	Qualifying Foster Care Charity Name 6	30	A	352, Line 8b	Changed TY2018
728	720	Amount Qualifying Charity Contributed 6	10	N	352, Line 8c	
729	721	Amount from line 9h of Continuation Sheet or Zero.	10	N	352, Line 9	Amount from line 9h of Continuation Sheet or Zero.
730	722	Total Qualifying Charity2	10	N	352, Line 10	Add lines 6-9 Column c
731	723	Total Cash Contri Qual Charity	10	N	352, Line 11	Add Line 5 and Line 10
732	724	Allowable Charity Credit	10	N	352, Line 12	Single Taxpayer or Heads of Household Enter \$500 Married Taxpayer Enter \$1000
733	725	Current Year's Qualifying Charity Credit	10	N	352, Line 13	Enter smaller of Line 11 or Line 12
734	726	Original Credit Amount 12b	10	N	352, Line 14b	Enter Amount from Prior Year 5
735	727	Previous Used Amount 12c	10	N	352, Line 14c	Enter Amount from Prior Year 5
736	728	Available Credit Carryover 12d	10	N	352, Line 14d	Enter Amount from Prior Year 5
737	729	Original Credit Amount 13b	10	N	352, Line 15b	Enter Amount from Prior Year 4
738	730	Previous Used Amount 13c	10	N	352, Line 15c	Enter Amount from Prior Year 4
739	731	Available Credit Carryover 13d	10	N	352, Line 15d	Enter Amount from Prior Year 4
740	732	Original Credit Amount 14b	10	N	352, Line 16b	Enter Amount from Prior Year 3
741	733	Previous Used Amount 14c	10	N	352, Line 16c	Enter Amount from Prior Year 3
742	734	Available Credit Carryover 14d	10	N	352, Line 16d	Enter Amount from Prior Year 3
743	735	Original Credit Amount 15b	10	N	352, Line 17b	Enter Amount from Prior Year 2
744	736	Previous Used Amount 15c	10	N	352, Line 17c	Enter Amount from Prior Year 2
745	737	Available Credit Carryover 15d	10	N	352, Line 17d	Enter Amount from Prior Year 2
746	738	Original Credit Amount 16b	10	N	352, Line 18b	Enter Amount from Prior Year 1
747	739	Previous Used Amount 16c	10	N	352, Line 18c	Enter Amount from Prior Year 1
748	740	Available Credit Carryover 16d	10	N	352, Line 18d	Enter Amount from Prior Year 1
749	741	Total Available Credit Carryover	10	N	352, Line 19	Add Lines 14 through 18 Column d
750	742	Current Yr's Credit	10	N	352, Line 20	Form 301, Part 1, line 28, column a
751	743	Available Carryover	10	N	352, Line 21	Form 301, Part 1, line 28, column b
752	744	Total Available Credit	10	N	352, Line 22	Form 301, Part 1, line 28, column c
753	745	Trailer	5	A	*EOD*	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

Arizona 140PTC - Property Tax Credit						
2D Barcode Record Layout						
2017 FIELD NO	2018 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		2018
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 49-52 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	Gain/Loss Prop Spouse	10	N	140PTCPartID2	
67	67	Gain/Loss 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	

Legend

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018

86	86	Other Income Spouse	10	N	140PTCPartI2	
87	87	Other Income Other	10	N	140PTCPartI3	
88	88	Total Other Income	10	N	140PTCPartI4	
89	89	Tot Household Income	10	N	140PTCPartJ	
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

Blue: Additions and Changes for TY2018
Orange: Deleted Items for TY2018