ARIZONA FORM **140ET**

Credit for Increased Excise Taxes



Your First Name and Initial			Last Name	You <u>m</u>	Your Social Security No.	
Spouse's First Name and Initial (if box 4 or 6 checked)			Last Name	enter y	enter your SSN(s).	
Current Home Address - number	and street, r	rural route Apt. No.	. Daytime Phone (w		whone (<i>with area code</i>)	
City, Town or Post Office	State	Zip Code		REVENUE US	E ONLY. DO NOT MARK IN THIS A	
Filing Status: (check the ap	propriate b	iox)				
4 Married filing joint claim		NAME OF QUALIFYING	CHILD OR DEPENDENT			
 5 Head of household 6 Married filing separate classifier 			cial Security No. abo	88		
7 Single		spouse's name and So	cial Security No. abo	ve.		
				81	80	
Who Can Use Form 140E File Form 140ET only if you						
county, state, or federal p Your federal adjusted gros \$25,000 or less if you a \$12,500 or less if single \$25,000 or less if you a \$12,500 or less if marrie	ss income re married e; re filing as	filing a joint claim; head of household;	forms (h) Do no may c		t in the instructions for thos u are filing Form 140PTC. M m 140PTC.	
8 I have read the above infor			lify to claim this cre	edit on this form	8 🗆 yes [
9 List dependents (see instru			•			
		LAST NAME		SOCIAL SECURITY	NUMBER	
9A1				SOCIAL SECURITY	NUMBER	
				SOCIAL SECURITY	NUMBER	
9A1 9A2 9A3 0 Total number of dependent		on lines 9A1 through				
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