ETURN —	140EZ	Resident Personal Income Tax Return (EZ Form)				2017	
<u>~ </u>	Your First Name and Middle Initial		Last Name		Your S	Social Security Number	
STO TE	Spouse's First Name and Middle Initial (if box 4 is checked)		Last Name		your SSN(s). Spouse's Social Security No		
	Current Home Address - number and s	street, rural route	A	pt. No.	Daytime Phone	(with area code)	
≥ =	City, Town or Post Office	State	ZIP Code	Last Nan	<u> </u>	Prior Year(s) (if differer	
4 3						9	
DO NOT STAPLE ANY ITEMS TO	82F Check box 82F if filing under extension You must use Arizona Form 140 if: • Your Arizona taxable income on line 8 is \$50,000 or more. • You are claiming estimated payments.				E USE ONLY. DO N	OT MARK IN THIS ARE	
	 You are taking a subtraction for: 						
	 active duty military pay 			81 PM		80 RCVD	
	– wages earned on Indian reservation(s)						
	FILING STATUS: Check one box. 4 ☐ Married filing joint return 4a ☐ Injured Spouse Protection of Joint Overpayment 5 ☐ Single 6 Federal adjusted gross income from your federal return						
					6	0	
	7 Standard deduction and personal exemption: If you checked filing status box 4, enter \$14,636; if you						
	checked filing status box 5, enter \$7,333					0	
:	8 Arizona taxable income: Subtract line 7 from line 6. If less than zero, enter "0"					0	
\Box	9 Amount of tax from Optional Tax Tables					0	
4. J	10 Family income tax credit (from worksheet see page 5 of instructions)					0	
٦ ع	11 Balance of tax: Subtract line 10 from line 9. If line 10 is more than line 9, enter "0"					0	
5	12 Arizona income tax withheld during 2017					0	
_	14 Increased Excise Tax Credit (from worksheet see page 6 of the instructions)					0	
ocuments after Form 140EZ	15 Total payments/credits: Add lines 12 through 14					0	
	16 TAX DUE / AMOUNT OWED: If line 11 is more than line 15, subtract line 15 from line 11. Skip line 17.						
	Make check payable to Arizona Department of Revenue; include SSN on payment					0	
	17 OVERPAYMENT / REFUND: If line 15 is more than line 11, subtract line 11 from line 15					0	
	Direct Deposit of Refund: Check box 17A if your deposit will be ultimately placed in a foreign account; see instructions. 17A						
5	- CI I Checking or -	NUMBER AC	COUNT NUMBER				
<u> </u>	98 S Savings						
edules or o	Under penalties of perjury, I declare that I have read this return and any documents with it, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. YOUR SIGNATURE DATE OCCUPATION						
SCL	→						
E SIGN H	SPOUSE'S SIGNATURE		DATE	ATE SPOUSE'S OCCUPATION			
PLEASE	PAID PREPARER'S SIGNATURE DATE		FIRM'S NAME (P	FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)			
P	PAID PREPARER'S STREET ADDRESS					PAID PREPARER'S TIN	
<u> </u>	PAID PREPARER'S CITY STATE		ZIP CC	ZIP CODE		PAID PREPARER'S PHONE NUMBER	
anyı	 If you are sending a payment wi Arizona Department of Revenue Include the payment with Forr If you are expecting a refund or 	e, PO Box 52016, Phoenix n 140EZ.					