FOR CALENDAR YEAR

| return.<br>  | Arizona Form<br>140EZ  | Resident Personal Income Tax Return (EZ Form                               |               |                                      |   |                        | FOR CALENDAR YEAR                           |
|--|--|--|---------------|--------------------------------------|---|------------------------|---|
| ш  | Your First Name and Middle Initial   | Last Name  | ist Name      |                                      |   | Social Security Number |   |
| TI OT S  | Spouse's First Name and Middle Initia  | Last Name  |               |                                      | your<br>SSN(s).   |                        |   |
|  | Current Home Address - number and  | street, rural route  |               | Apt. No.                             | D   |                        | (with area code)                            |
|  | City, Town or Post Office  | State  | ZIP Code      |                                      | Last Names  | Used in Last Fou       | r Prior Year(s) (if different) 97           |
| DO NOT STAPLE ANY ITEMS TO<br>[                            | <ul> <li>82F Check box 82F if filing under extension</li> <li>You <u>must</u> use Arizona Form 140 if: <ul> <li>Your Arizona taxable income on line 8 is \$50,000 or more.</li> <li>You are claiming estimated payments.</li> <li>You are taking a subtraction for:</li> </ul> </li> </ul>   |  |               |                                      | REVENUE USE ONLY. DO NOT MARK IN THIS AREA.         88         88         81         PM         80         RCVD |                        |   |
|  | <ul> <li>active duty military</li> <li>wages earned on I</li> </ul>  |  |               |                                      | <u>81</u> · ···   |                        | 80  |
|  | <ul> <li>FILING STATUS: Check one box.</li> <li>4 	Married filing joint return 4a 	Injured Spouse Protection of Joint Overpayment</li> <li>5 	Single</li> </ul>  |  |               |                                      |   |                        |   |
| .40EZ.   | <ul> <li>6 Federal adjusted gross income from your federal return</li></ul>  |  |               |                                      |   |                        | 00<br>00<br>00<br>00<br>00                  |
| ents after Form 140EZ                                      | <ol> <li>Balance of tax: Subtract line 10 from line 9. If line 10 is more than line 9, enter "0"</li></ol>   |  |               |                                      |   | 12<br>13<br>14         | 00<br>00<br>00<br>00<br>00<br>00            |
|  | 16       TAX DUE / AMOUNT OWED: If line 11 is more than line 15, subtract line 15 from line 11. Skip Make check payable to Arizona Department of Revenue; include SSN on paym         17       OVERPAYMENT / REFUND: If line 15 is more than line 11, subtract line 11 from line 15         Direct Deposit of Refund:       Check box 17A if your deposit will be ultimately placed in a foreign account structure of the structu |  |               |                                      | ent   | 17                     | 00  |
| Place any required federal and AZ schedules or other docum | 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, t true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled  |  |               |                                      |   |                        | ge and belief, they are<br>s any knowledge. |
| and AZ   |  |  | DATE          | DATE SPOUSE'S OCCUPATION             |   |                        |   |
| ederal an  | PAID PREPARER'S SIGNATURE DATE   |  | FIRM'S NAMI   | FIRM'S NAME (PREPARER'S IF SELF-EMPI |   | ED)                    |   |
| P  | PAID PREPARER'S STREET ADDRESS   |  |               |                                      |   | PAID PREPARER'S TIN    |   |
| 'n   | PAID PREPARER'S CITY   | STATE  | ZIF           | CODE                                 | F   | PAID PREPARÉR'S        | PHONE NUMBER                                |
| olace any re   | <ul> <li>If you are sending a payment w<br/>Arizona Department of Revenue<br/>Include the payment with For</li> <li>If you are expecting a refund or<br/>Arizona Department of Revenue</li> </ul>  | e, PO Box 52016, Phoenix,<br><b>m 140EZ.</b><br>owe no tax, or owe tax but | are not sendi | ng a payme                           | nt, mail to:  |                        |   |