

140

Or fiscal year beginning MM/DD and ending MM/DD

66

YOUR FIRST NAME AND INITIAL, LAST NAME, YOUR SOCIAL SECURITY NO., IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL, LAST NAME, SPOUSE'S SOCIAL SECURITY NO., PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE, APT. NO., DAYTIME PHONE W/AREA CODE, HOME PHONE W/AREA CODE, CITY, TOWN OR POST OFFICE, STATE, ZIP CODE

IMPORTANT You must enter your SSNs.

FOR DOR USE ONLY

Filing Status (Married filing joint return, Head of household, Married filing separate return, Single), Exemptions (Age 65 or over, Blind, Dependents, Qualifying parents and ancestors)

12 Federal adjusted gross income, 13 Additions to income, 14 Add lines 12 and 13, 15 Elective subtraction of 2003 federal retirement contributions, 16 Subtractions from income, 17 Arizona adjusted gross income, 18 Deductions, 19 Personal exemptions, 20 Arizona taxable income, 21 Compute the tax using amount on line 20 and Tax Rate Table X, Y or Optional Tax Rate Tables, 22 Tax from recapture of credits from Arizona Form 301, line 31, 23 Subtotal of tax, 24-25 Clean Elections Fund Tax Reduction, 26 Reduced tax, 27 Family income tax credit from worksheet on page 15 of instructions, 28 Credits from Arizona Form 301, line 58, or Forms 310, 321, 322, and 323 if Form 301 is not required, 29 Credit type, 30 Clean Elections Fund Tax Credit, 31 Balance of tax, 32 Arizona income tax withheld during 2003, 33 Arizona estimated tax payments for 2003, 34 Amount paid with 2003 Arizona extension request (Form 204), 35 Increased Excise Tax Credit from worksheet on page 18 of the instructions, 36 Property Tax Credit from Form 140PTC, 37 Other refundable credits, 38 Total payments/refundable credits, 39 TAX DUE, 40 OVERPAYMENT, 41 Amount of line 40 to be applied to 2004 estimated tax, 42 Balance of overpayment, 43-50 Voluntary Gifts to: Aid to Education, Arizona Wildlife, Citizens Clean Elections, Child Abuse Prevention, Domestic Violence Shelter, Neighbors Helping Neighbors, Special Olympics, Political Gift, 51 Check only one if making a political gift, 52 Estimated payment penalty and MSA withdrawal penalty, 53 Check applicable boxes, 54 Total of lines 43, 44, 45, 46, 47, 48, 49, 50 and 52, 55 REFUND, 56 AMOUNT OWED

**PART A: Dependents and Qualifying Parents - do not list yourself or spouse**

If completing Part A, also complete Part C, lines C16 and/or C17 and C18.

A1	LIST CHILDREN AND OTHER DEPENDENTS. If more space is needed, attach a separate sheet.	NO. OF MONTHS LIVED IN YOUR HOME IN 2003
FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP

A2 Enter total number of persons listed in A1 here and on the front of this form, box 10. **Also complete Part C below**..... TOTAL **A2**

A3 Enter the names of the dependents age 65 or over listed above who do not qualify as your dependent on your federal return:

A4 List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor of your parents, see page 5 of the instructions.

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2003

A5 Enter total number of persons listed in A4 here and on the front of this form, box 11. .... TOTAL **A5**

**PART B: Additions to Income**

B6	Non-Arizona municipal interest.....	B6	
B7	Early withdrawal of Arizona Retirement System contributions not included on your federal return.....	B7	
B8	Ordinary income portion of lump-sum distributions excluded on your federal return.....	B8	
B9	Total federal depreciation.....	B9	
B10	Medical savings account (MSA) distributions. See page 6 of the instructions.....	B10	
B11	I.R.C. §179 expense in excess of allowable amount. See page 6 of the instructions.....	B11	
B12	Other additions to income. See instructions and attach your own schedule.....	B12	
B13	<b>Total.</b> Add lines B6 through B12. Enter here and on the front of this form, line 13.....	B13	

**PART C: Subtractions from Income**

C14	Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100.....	C14	
C15	Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500.....	C15	
C16	Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300.....	C16	
C17	Exemption: Qualifying parents and ancestors of your parents. Multiply the number in box 11, page 1, by \$10,000.....	C17	
C18	<b>Total exemptions: Add lines C14 through C17. If you have no other subtractions from income, skip lines C19 through C29 and enter the amount on line C18 on Form 140, Page 1, line 16.</b> .....	C18	
C19	Interest on U.S. obligations such as U.S. savings bonds and treasury bills.....	C19	
C20	Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer).....	C20	
C21	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only).....	C21	
C22	U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return.....	C22	
C23	Recalculated Arizona depreciation.....	C23	
C24	Certain wages of American Indians.....	C24	
C25	Income tax refund from other states. See instructions.....	C25	
C26	Deposits and employer contributions into MSAs. See page 10 of the instructions.....	C26	
C27	Construction of an energy efficient residence. See page 10 of the instructions. Enter number: C27a <input type="text"/> , then amount.....	C27	
C28	Other subtractions from income. See instructions and attach your own schedule.....	C28	
C29	<b>Total:</b> Add lines C18 through C28. Enter here and on the front of this form, line 16.....	C29	

**Part D: Last Name(s) Used in Prior Years if different from name(s) used in current year**

D30

**PLEASE SIGN HERE**

I have read this return and any attachments with it. Under penalties of perjury, I declare that 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 \_\_\_\_\_

▶ SPOUSE'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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

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

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.  
 If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 85072-2138.