**ARIZONA FORM** 

## **Individual Amended Income Tax Return**

2004

_		For calendar year Y Y J, or fiscal year beginn			$O_1Y$	$\underline{Y} \underline{Y} \underline{Y}_{J}$ , and $\underline{Q}$					
/ -	_	FIRST NAME AND INITIAL	LAST N	AME				YOUR SOC	IAL SE	ECURITY NO.	
	1										
		DINT RETURN, SPOUSE'S FIRST NAME AND INITIAL	LAST N	AME				SPOUSE'S	SOCI	AL SECURITY NO.	
	1										
F	RES	ENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO.	DAYTIN	IE PHONE	W/ARE	A CODE:		<b>1</b>	IMF	PORTANT	<b>1</b>
[	2		<b>94</b> HO	ME PHONE	W/AR	EA CODE:		You <b>n</b>	nust (	enter your SSN	ls.
С	ITY,	TOWN OR POST OFFICE STATE ZIP CODE					FOR DO	R USE C	NLY	,	
	3	)									
	=	heck box to indicate both filing and residency status:		Original Return	This Return	1					
<u>v</u>	4	Married filing joint return	4	Retuiii	Ketuiii	1					
Status	5	Head of household: Name of qualifying child or dependent				1					
0	9 6	Married filing separate return. Enter spouse's Social Security Number				88					
Filing	ľ	above and full name here. ▶	6					T			
_	1	Single				1		<u> </u>			
_		Resident				81		80			
ج ج	1 ,	Nonrocident	0			Original Form I	Filad: (Chock	only one	١		97
Jen	10	Nonresident	10			1Form 140				1	
esic	10	Part year resident active military	10 11	$\vdash$		<b>2</b> Form 140A					
ď	111	Part-year resident active military	11 12	$\vdash$		1					
		Nonresident active military		_		3Form 140EZ					
ons		Age 65 or over: Enter the number claimed.				<b>4</b> Form 140NR					$\vdash$
not		Blind: Enter the number claimed				<b>5</b> Form 140PY If 140NR or 140	DV ontor corre	octod nor	to	<b>5</b>	
ě.	15	Dependents: Enter the number claimed.	15			Arizona residen	•	,	_	86   1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	16	Qualifying parents or ancestors: Enter the number claimed	16				<u> </u>				
	IM	PORTANT: You must enter an amount in columns (a), (b), and (c) for			'	ORIGINAL AMOUNT REPORTED	AMOUNT TO E OR SUBTR	ACTED		CORRECTED AMOUNT	
	.	18, lines 19 through 25, lines 27, 31, 32, 35, and lines 37	throug	h 40.	$\vdash$	(a)	(b)			(c)	
nts	17	Federal adjusted gross income							17		_
/me	١٠٠	Tomi 14011 and 1401 I mors only. Enter rinzona gross income			··				18		+
pa/	4	Additions to income					-		19		+
anv	20	Subtotal: Form 140, 140A, 140EZ filers: Add lines 17 and line 19. F									
5	:l	140PY filers: Add lines 18 and 19							20		_
atta	21	Subtractions from income							21		_
ţ	' 1	Arizona adjusted gross income. Subtract line 21 from line 20							22		_
do n	' I	Deductions (itemized or standard)							23		+
=	24	Personal exemptions							24		+
ģ	123	Arizona taxable income. Subtract lines 23 and 24 from line 22							25		
80		Tax from tax rate table: ☐ Table X or Y (140, 140NR or 140PY) ☐				) <u>, 140A or 140EZ)</u>	I		26		
Ë		Tax from recapture of credits from Arizona Form 301, Part II							27		
	28	Subtotal of tax. Add lines 26 and 27, column (c)			<u>,</u>				28		
u.n,	29	Clean Elections Fund Tax Reduction claimed on original return							29		
rei	30	Reduced tax. Subtract line 29 from line 28, column (c)				·····			30		
the	31	Family income tax credit							31		
o e	32	Family income tax credit			L		1		32		
)ade	33	Credit type: Enter form number of each credit claimed: 33	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		Ш						
Str	34	Subtract lines 31 and 32 from line 30				,			34		
of last	35	Clean Elections Fund Tax Credit. See instructions							35		
ck	36	Balance of tax. Subtract line 35 from line 34. If line 35 is more than I	line 34,	enter zer	о				36		
ba	37	Payments (withholding, estimated, or extension)							37		
h to	38	Increased Excise Tax Credit							38		
attach	39	Property Tax Credit							39		
i. at	40	Other refundable credits. 40A1 313 40A2 326 40A3 327 40A4	□329 4	<b>0A5</b> □33	80				40		_
7-2s	41	Payment with original return plus all payments after it was filed							41		
Ŋ	42	Total payments and refundable credits. Add lines 37 through 41, colu	umn (c).						42		
hin	43	Overpayment from original return or as later adjusted. See instruction	ns						43		
ttac	44	40 Other refundable credits. 40A1 313 40A2 326 40A3 327 40A4 329 40A5 330  41 Payment with original return plus all payments after it was filed.  42 Total payments and refundable credits. Add lines 37 through 41, column (c).  43 Overpayment from original return or as later adjusted. See instructions.  44 Balance of credits: Subtract line 43 from line 42.  45 REFUND/CREDIT DUE: If line 36 is less than line 44, subtract line 36 from line 44, and enter amount of refund/credit									
If a	45	REFUND/CREDIT DUE: If line 36 is less than line 44, subtract line 3	36 from I	line 44, a	nd en	ter amount of refu	und/credit		45		
		Amount of line 45 to be applied to 2005 estimated tax. If zero, enter '							46		
		AMOUNT OWED: If line 36 is more than line 44, subtract line 44 from							47		
_	48	Is this amended return the result of a net operating loss? If "yes", che	eck the	<i>box:</i> <b>48</b> [	] <u>Y</u> E	S				DOR USE ONL	Y
ΑD	OR	91-5380f (04)							82	99	

orm	I. Danandant Evanotions of	a mat list waxwaalf ay amawaa aa damamday	4-	
AK		o not list yourself or spouse as depender If more space is needed, attach a separate sheet.	its	NO OF MONTHS LIVED IN VOLE
	FIRST AND LAST NAME	SOCIAL SECURITY NO.	DEL ATIONOLUD	NO. OF MONTHS LIVED IN YOU
	FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	HOME DURING THE TAXABLE YE
	Enter the names of any dependent	age 65 or over listed above that you cannot claim as	a dependent on your fede	eral return:
۱R	II: Qualifying Parents and Ar	cestors of Your Parents Exemptions (Ariz	zona residents only	)
		ncestors of your parents for which you are claiming an		
		at you listed in Part I, above, as a dependent. For info		-
	parents, see the instructions for the		ormation on who is a quali	rying parent or anocotor or your
	parents, see the mandetons for the	onginar return that you med.		NO. OF MONTHS LIVED IN YOUR
	FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	HOME DURING THE TAXABLE YE
	THE TABLE TO THE	0001/12 02001(1111(0)	TEE/ (TOTOTH)	THE ME DOTAINS THE 17 VOIDE FE
	required. If the change(s) pertain(s (Form 1040X), please attach a cop	for which you are reporting a change then give the rea to an IRS audit, please attach a copy of the agent's rear and all supporting schedules.		
		) to an IRS audit, please attach a copy of the agent's r		
rt	V: Name and Address on Orig	) to an IRS audit, please attach a copy of the agent's r	report. If you filed an ame	ended federal return with the IRS
rt	V: Name and Address on Orig	) to an IRS audit, please attach a copy of the agent's repair and all supporting schedules.	eturn, write "same" on the	ended federal return with the IRS
	V: Name and Address on Orig If your name and address is the sal	inal Return ne on this amended return as it was on your original re	eturn, write "same" on the	line below.
	V: Name and Address on Orig If your name and address is the sal	inal Return ne on this amended return as it was on your original re	eturn, write "same" on the	line below.
I h cc	V: Name and Address on Orig If your name and address is the sal	inal Return ne on this amended return as it was on your original re	eturn, write "same" on the	line below.
I H	V: Name and Address on Origing If your name and address is the same Name  Name  Inversed this return and any attachment in plete. Declaration of preparer (other to	inal Return ne on this amended return as it was on your original re Number and Street, etc. s with it. Under penalties of perjury, I declare that to the land taxpayer) is based on all information of which prep	eturn, write "same" on the	line below.
I h cc	V: Name and Address on Origing If your name and address is the same Name  Name  Inversed this return and any attachment in plete. Declaration of preparer (other to	inal Return ne on this amended return as it was on your original re Number and Street, etc. s with it. Under penalties of perjury, I declare that to the land taxpayer) is based on all information of which prep	eturn, write "same" on the	line below.
	V: Name and Address on Origing If your name and address is the same Name  Inversed this return and any attachment in plete. Declaration of preparer (other to DUR SIGNATURE	inal Return ne on this amended return as it was on your original re Number and Street, etc.  s with it. Under penalties of perjury, I declare that to the total taxpayer) is based on all information of which prep	eturn, write "same" on the	line below.
	V: Name and Address on Origing If your name and address is the same Name  Inversed this return and any attachment in plete. Declaration of preparer (other to DUR SIGNATURE	inal Return ne on this amended return as it was on your original re Number and Street, etc.  s with it. Under penalties of perjury, I declare that to the pan taxpayer) is based on all information of which prep	eturn, write "same" on the	line below.
	V: Name and Address on Orig If your name and address is the sale.  Name  Inverse read this return and any attachment in plete. Declaration of preparer (other to DUR SIGNATURE.  POUSE'S SIGNATURE  AND PREPARER'S SIGNATURE	inal Return ne on this amended return as it was on your original re Number and Street, etc.  s with it. Under penalties of perjury, I declare that to the pan taxpayer) is based on all information of which prep	eturn, write "same" on the  City,  ne best of my knowledge a barer has any knowledge.	line below.