82F Check box 62F if filling under extension					
Your First Name and Initial	Last Name You <u>must</u>	ur Social Security No.			
Spouse's First Name and Initial <i>(if box 4 or 6 checked)</i>	enter vour				
1					
urrent Home Address - number and street, rural route Apt. No.	Daytime Phone (with area code) Home Phon 94	e (with area code)			
ty, Town or Post Office State Zip Code					
3					
4 Married filing joint return		O NOT MARK IN THIS AREA			
6 Married filing separate return. <i>Enter spouse's name and S</i> 7 Single	ocial Security No. above.				
Enter the 8 Age 65 or over (you and/or spouse)	88				
number 9 Blind (you and/or spouse)					
Do not put a 10 Dependents. From page 2, line A2 – do not ind		80			
Check mark. 11 Qualifying parents and ancestors of your parent 12-13 Residency Status (check one): 12 Part-Year Resident					
This box may be blank or may contain a printed barcode of data from yo					
	15 Arizona income (from page 2, line B19)				
	16 Additions to income (from page 2, line C2				
	17 Add lines 15 and 16 18 Subtractions: <i>No. from line D34a</i> ► 181	<u>17 0</u> 18 0			
	19 Arizona AGI: Line 17 <i>minus</i> line 18				
	20 201 ITEMIZED 20S STANDAR	D 20 0			
	21 Personal exemptions				
	22 AZ taxable inc.: Line 19 minus lines 20 & 23 Compute the tax: Use Tax Table X or Y				
	23 Compute the tax. Use Tax Table X of Y 24 Tax from recapture of credits				
	25 Subtotal of tax: Add lines 23 and 24				
	26 - 27 261 YOURSELF 262 SPOUS				
9 Family income tax credit from worksheet on page 19 of the inst	28 Reduced tax: Subtract line 27 from line 25				
0 Credits from Arizona Form 301, Part II, line 59, or Forms 310, 3					
	31 3				
32 Clean Elections Fund Tax Credit: From worksheet on page 20 of th					
 Balance of tax: Subtract lines 29, 30 and 32 from line 28. If the sum Arizona income tax withheld during 2010 					
 Arizona income tax withined during 2010					
6 2010 Arizona extension payment (Form 204)					
7 Increased Excise Tax Credit: From worksheet on page 21 of the ins					
38 Other refundable credits: Check the box(es) and enter the amo					
 39 Total payments/refundable credits: Add lines 34 through 38 40 TAX DUE: If line 33 is larger than line 39, subtract line 39 from line 33 					
41 OVERPAYMENT: If line 39 is larger than line 33, subtract line 33 from					
42 Amount of line 41 to be applied to 2011 estimated tax					
43 Balance of overpayment: Subtract line 42 from line 41 44 - 54 Voluntary Gifts to Aid to Education (entire refund only)					
Citizens Clean Elections 46 00 Child Abuse Prevention	Domostic Violonco	00			
I Didn't Pay Enough Fund	Noighborg Holping	00			
Special Olympics	53 00 Political Gift 54	00			
 55 Check only one if making a political gift:					
57 Check applicable boxes 571 □Annualized/Other 572 □Farm					
58 Total of lines 44 through 54 and 56					
59 REFUND: Subtract line 58 from line 43. If less than zero, enter amou					
59 REFUND: Subtract line 58 from line 43. If less than zero, enter amou Direct Deposit of Refund: Check box 59A if your deposit will be ultim ROUTING NUMBER 98	lately placed in a foreign account ; <u>see instructions</u>				
60 AMOUNT OWED: Add lines 40 and 58. Make check payable to Ar		60			
60 AMOUNT OWED: Add lines 40 and 58. Make check payable to Ar Payment enclosed. Check the box and attach your paym					

	me (as shown on page 1)		Your Socia	I Security No.		
Δ1	List children and other dependents. Do n	at list voursalf or spousa If mo				
AI	List children and other dependents. Do n	of list yourself or spouse. If mo	ore space is needed,			
	attach a separate sheet.	NO. OF MONTHS LIV				
	FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	IN YOUR HOME IN 2	010	
nts						
A2 A3	Enter total number of persons listed in A1	here and on the front of this fo	rm, box 10	TO	TAL A2	
a A3	a Enter the names of the dependents lis	ted above who do not qualify a	s your dependent on y	our federal return:		
<u>م</u>						
PARTA:	b Enter dependents listed above who we	ere not claimed on your federal	return due to education	on credits:		
L L						
A	List qualifying parents and ancestors of y	our parents. If more space is n	eeded, attach a separa	ate sheet.		
	You cannot list the same person here and	also on line A1. For information	on on who is a			
	qualifying parent or ancestor of your pare			NO. OF MONTHS LIV	/ED	
	FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	IN YOUR HOME IN 2	010	
	<u></u>				<u></u>	
A5	Enter total number of persons listed in A4	here and on the front of this fo	rm box 11	TO	TAL A5	
	Dates of Arizona residency: From	to	1111, DOX 11			
БО	-		·	2010 FEDERA Amount from Federal R		ARIZONA ount Only
e	List other state(s) of residency:			J		
SI	Wages, salaries, tips, etc				00	0
<u><u> </u></u>	Interest				00	0
B10	Dividends				00	0
	Arizona income tax refunds				00	0
<u></u> ЕВ11	Alimony received			. B11	00	0
ຍັ <mark>B12</mark>	Business income (or loss) from federal So	hedule C		. B12	00	0
DB13	Gains (or losses) from federal Schedule L)		. B13	00	0
B14	Rents, royalties, partnerships, estates, tru	sts, small business corporation	s from federal Schedule	E. B14	00	0
	Other income reported on your federal rel				00	0
হ।	Total income: Add lines B7 through B15				00	0
	Federal adjustments. Attach your own sche				00	0
					00	0
-	Federal adjusted gross income: Subtract li					0
	Arizona income: Subtract line B17 from line					
	Arizona percentage: Divide line B19 by line					9
	I.R.C. §179 expense in excess of allowab					0
=	Total depreciation included in Arizona gro					0
<u> </u>	Other additions to income: See instructions				C23	0
<u>C24</u>	Total: Add lines C21 through C23. Enter here	and on the front of this form on line	9 16			0
_ບ D25	Exemption: Age 65 or over. Multiply the nu	mber in box 8, page 1, by \$2,100		. D25	00	
5 D26	Exemption: Blind. Multiply the number in bo	x 9, page 1, by \$1,500		. D26	00	
<u>C</u> D27	Exemption: Dependents. Multiply the numl	per in box 10, page 1, by \$2,300		. D27	00	
5 D28	Exemption: Qualifying parents and ances	tors. Multiply the number in box 1	1, page 1, by \$10,000	. D28	00	
D29					00	
D30						0
RLAA	Interest on U.S. obligations such as U.S.					0
	Arizona state lottery winnings included on					0
ומ						0
	U.S. Social Security or Railroad Retireme					
γ	65				D34	0
עD35						0
D36					D36	0
E37	Last name(s) used in prior years - if different					
IERE	I have read this return and any attachm true, correct and complete. Declaration					
Ξ	YOUR SIGNATURE	DA	TE OCC	UPATION		
lign		DA	TE SPO	USE'S OCCUPATION		
ASE SIGN	SPOUSE'S SIGNATURE					
PLEASE SIGN	PAID PREPARER'S SIGNATURE		FIRM'S NAME (PRE	EPARER'S IF SELF-EMP		
PLEASE	PAID PREPARER'S SIGNATURE	PARER'S ADDRESS		PAID	PREPARER'S PHO	

2010 Arizona Tax Tables X and Y For Form 140PY

Table X - Use Table X if your filing status is Single or Married Filing Separate											
	(a)	(b)		(c)		(d)			(e)		(f)
If taxable income from Form 140PY, page 1, line 22 is: Over But Not over		Enter the amount from Form 140PY, page 1, line 22	Multiply the amount entered in column (b) by		Enter the result	Subtract				Your tax. Round the resul and enter this amount on Form 140PY, page 1, line 23	
\$0	\$10,000		Х	.0259	=		_		0.00	=	
\$10,000	\$25,000		Х	.0288	=		-	\$	29.00	=	
\$25,000	\$50,000		Х	.0336	=		-	\$	149.00	=	
\$50,000	\$150,000		Х	.0424	=		-	\$	589.00	=	
\$150,000) and over		Х	.0454	=		_	\$	1,039.00	=	

Table Y - Use Table Y if your filing status is Married Filing Joint or Head of Household										
((a)	(b)		(c)		(d)		(e)		(f)
from For page 1	le income rm 140PY, , line 22 is: But Not over	Enter the amount from Form 140PY, page 1, line 22		Multiply the amount entered in column (b) by		Enter the result		Subtract		Your tax. Round the result and enter this amount on Form 140PY, page 1, line 23
\$0	\$20,000		X	.0259	=		_	0.00	=	
\$20,000	\$50,000		Х	.0288	=		-	\$ 58.00	=	
\$50,000	\$100,000		Х	.0336	=		-	\$ 298.00	=	
\$100,000	\$300,000		Х	.0424	=		-	\$ 1,178.00	=	
\$300,000) and over		Х	.0454	=		-	\$ 2,078.00	=	