114	<b>ARIZONA FORM</b>
100	140X
16	ITUX

## **Individual Amended Income Tax Return**

F	or	Calendar Year: ☐ 2010 ☐ 2009 ☐ 2008 ☐ 200	)7		2006	3 □ O	ther: (Y,Y,	Y, Y	OR Fiscal Ye	ar E	nd M	$M_1Y_1$	Y
	⁄our	First Name and Initial			Name				Your S		Security		
<u>'                                     </u>	1		┸						must er your				
	βροι 1	use's First Name and Initial (if box 4 or 6 checked)	L	Last Name enter your SSN(s).					Spouse's Social Security No.				
(	urr 2	ent Home Address - number and street, rural route Apt. No.	D	Dayti	ime Ph	none (wit	th area code)	Hom <b>94</b>	ne Phone (with a	rea co	ode)		
	 City,	Town or Post Office State Zip Code	$\dagger$				REVENU	E USE	ONLY. DO NOT M	ARKI	N THIS A	AREA.	$\neg$
	3		/c	ORIG	INAL	THIS							
_	C	heck box to indicate both filing and residency status:	ا ا	RET	<u>URN</u>	<u>RETURN</u>							
Status	4	Married filing joint return  Head of household  NAME OF QUALIFYING CHILD OR DEPENDENT	4	ı [									
Sta	5	Head of household   NAME OF QUALIFYING CHILD OR DEPENDENT	5	; [									
Filing	6	Married filing separate return: Enter spouse's name and	J		_		88						
Ë		Social Security No. above	6	; <u>[</u>	╛								
_	-	Single	-	_	╛	Ш	81		80				
>	8	Resident			4	Щ							97
esidency	9	Nonresident		=	┥	Щ	1		d: (Check only on	,			H
Sic	10	Part-year resident			┥	님	1						$\vdash$
Re	1	Part-year resident active military		=	┥	H	1						
<i>(</i> 2	$\overline{}$	Nonresident active military		_		<del>- L</del>							-
otions	13	Age 65 or over: Enter the number claimed				1	┪						
mpj	7	Blind: Enter the number claimed  Dependents: Enter the number claimed		_		<del> </del>			enter corrected				
EX EX		Qualifying parents or ancestors				<del> </del>	4			86	_		
Ą.		IMPORTANT: You <u>must</u> enter an amount in columns (a), (b),			\ for lir	200 17	ORIGINAL AM	OUNT	AMOUNT TO AD	<u> </u>	CORR	ECTED	┧
SS A		and/or 18, lines 19 through 25, lines 27, 31, 32, 35, and lines					REPORTE (a)	D	OR SUBTRACT (b)			DUNT c)	
	17	Federal adjusted gross income								17	,		П
Sch		Form 140NR and 140PY filers only: Enter Arizona gross income.					1			18			П
ona		Additions to income								19			П
Ariz		Subtotal: Form 140, 140A, 140EZ filers: Add line 17 and line 19											
, bue		140PY filers: Add lines 18 and 19								20			
<u>[a]</u>	21	Subtractions from income								21			Ш
ede	22	Arizona adjusted gross income: Subtract line 21 from line 20								22			Ш
ı,	23	Deductions23I 🗆 ITEMIZED	23	₃s⊑	STA	NDARD				23			Ш
vme	24	Personal exemptions								24			Ш
2 2	4	Arizona taxable income: Subtract lines 23 and 24 from line 22								25			Н
e an		Tax from tax table:  Table X or Y (140, 140NR or 140PY)				•		)EZ) .		. 26			Н
Š		Tax from recapture of credits from Arizona Form 301, Part II								27			Н
nd.		Subtotal of tax: Add lines 26 and 27, column (c)											Н
return.	29	Clean Elections Fund Tax Reduction claimed on original return					•			29			Н
there		Reduced tax: Subtract line 29 from line 28, column (c)						······	<u> </u>	. 30			$\vdash$
2 of th		Family income tax credit						+		31			H
ge 2		Credit type: Enter form number of each credit claimed							1 1 '	32			Н
aea.		Subtract lines 31 and 32 from line 30								. 34			
fter		Clean Elections Fund Tax Credit. See instructions								35			П
er a		Balance of tax: Subtract line 35 from line 34. If line 35 is more than											П
corr		Payments (withholding, estimated, or extension)								37			П
<u>le</u> ft		Increased Excise Tax Credit								38			
ber		Property Tax Credit								39			
an u		Other refundable credits (2010 returns only)40A1								40			Ш
ntsin	41	Payment with original return plus all payments after it was filed	d							. 41			Ш
me	42	Total payments and refundable credits: Add lines 37 through	41,	colu	ımn (c	)				. 42			Ш
000		Overpayment from original return or as later adjusted. See ins											Ш
uired d	44	Balance of credits: Subtract line 43 from line 42								. 44			Ш
		REFUND/CREDIT DUE: If line 36 is less than line 44, subtract line											Ш
th red		Amount of line 45 to be applied to 2011 estimated tax. If zero											$\sqcup$
ttach		AMOUNT OWED: If line 36 is more than line 44, subtract line 44 from							_	-			Ш
⋖	48	Check box 48 if this amended return is the result of a net oper	atin	ng lo	oss, an	d enter t	he year the loss	s was	incurred48□		2,0,	Y Y	

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	(as shown on page 1)			Your Socia	al Security No.		
RT I:	Dependent Exemptions - d	lo not list	yourself or spouse as	depender	nts		
	List children and other dependents		•	-			
-	FIRST AND LAST NAME:	. Il lilore spe	SOCIAL SECURITY NO.	1	IONSHIP		NTHS LIVED IN YOU NG THE TAXABLE YE
	FIRST AND LAST NAME:		SOCIAL SECURITY NO.	RELAII	IONSHIP	HOME DUKIN	NG THE TAXABLE TE
				+			
				+			
	Enter the names of the dependents	listed above	who do not qualify as your d	opondont on v	our fodoral ro	turo:	
,	Enter the names of the dependents	ilisted above	who do not qualify as your d	ependent on y	our rederaire	ituiri.	
	Enter dependents listed above who	were not cla	imed on your federal return d	ue to education	on credits:		
•			,				
			I			l	
	separate sheet. Do not list the sar parent or ancestor of your parents,				pendent. For		
	FIRST AND LAST NAME:		SOCIAL SECURITY NO.	RELAT	IONSHIP		NTHS LIVED IN YOU NG THE TAXABLE YE
	Income, Deductions, and C List the line reference from page of documents required. If the change return with the IRS (Form 1040X), p	1 for which y (s) pertain(s)	to an IRS audit, please attac	h a copy of th		-	
t IV:	List the line reference from page of documents required. If the change return with the IRS (Form 1040X), page of the line of t	1 for which y (s) pertain(s) blease attach	to an IRS audit, please attact a copy and all supporting sol	h a copy of th nedules.	e agent's repo	ort. If you file	ed an amended fed
t IV:	List the line reference from page of documents required. If the change return with the IRS (Form 1040X), page of the line of t	1 for which y (s) pertain(s) blease attach ginal Retu me on this an	to an IRS audit, please attact a copy and all supporting sol	h a copy of th nedules. our original retu	e agent's repo urn, <i>write "sar</i>	ort. If you file	ed an amended fed
t IV:	List the line reference from page of documents required. If the change return with the IRS (Form 1040X), page of the line of t	1 for which y (s) pertain(s) blease attach ginal Retu me on this an	to an IRS audit, please attact a copy and all supporting sol	h a copy of th nedules. our original retu	e agent's repo	ort. If you file	ed an amended fed
t IV:	List the line reference from page of documents required. If the change return with the IRS (Form 1040X), page of the line of t	1 for which y (s) pertain(s) blease attach ginal Retu me on this an	to an IRS audit, please attact a copy and all supporting sol	h a copy of th nedules. our original retu	e agent's repo urn, <i>write "sar</i>	ort. If you file	ed an amended fed
t IV:	List the line reference from page of documents required. If the change return with the IRS (Form 1040X), page of the line of t	ginal Retume on this an Number	to an IRS audit, please attact a copy and all supporting solution at the supporting solution at the supporting solution at the supporting solution at the support and support	our original return Apt. No. Ci	urn, write "sar ity, Town or Po	me" on the lin	ed an amended fed  the below.  State Zip Code  and belief, they ar
t IV:	Name and Address on Origing your name and address is the same Name	ginal Retume on this an Number	to an IRS audit, please attact a copy and all supporting solution at the supporting solution at the supporting solution at the supporting solution at the support and support	our original return Apt. No. Ci	urn, write "sar ity, Town or Po the best of mation of which	me" on the lin	ed an amended fed  the below.  State Zip Code  and belief, they ar

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.

PAID PREPARER'S ADDRESS

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.

PAID PREPARER'S TIN

PAID PREPARER'S PHONE NO.