ONE STAPLE. NO TAPE.

Arizona Form 140PY Part-Year Resident Personal Income Tax Return

FOR CALENDAR YEAR 2013

	OR FISCAL YEAR BEGINNING [M,M,D,D]	Y,Y,Y,Y) AND	ENDING M	$M_1D_1D_1Y_1Y_1$	Y Y 66			
82	E Check box 82F if filing under extension							
Yo	our First Name and Middle Initial	Last Name		Your Social Security No.				
1	Enter					1 1		
Sp	use's First Name and Middle Initial (if box 4 or 6 checked) Last Name				Spouse's	Social Security No.		
1				SSN(s).	l l		
Cı	urrent Home Address - number and street, rural route		Apt. No.	Daytim	ne Phone (wit	th area code)		
2				94				
Ci	ty, Town or Post Office State	ZIP Code		Last Names Use	d in Prior Yea	ar(s)		
3								
S	4 Married filing joint return		le le		NLY. DO NOT I	MARK IN THIS AREA.		
ÄTL	Head of household – Enter name of qualifying child or d	ependent on next line	88					
STS								
	6 Married filing separate return. Enter spouse's name ar							
Orner. FILING STATUS	7 Single	,						
ft	♦ Enter the number claimed. Do not put a check m	nark.				0 RCVD		
to upper left corner. EXEMPTIONS FILING	8 Age 65 or over (you and/or spouse)	C. DM						
Der 1PT	9 Blind (you and/or spouse)							
릴	10 Dependents. From page 2, line A2 – do not include	self or spouse.	L					
	11 Qualifying parents and grandparents from page 2, line	e A5.						
	-13 Residency Status (check one): 12 Part-Year Resident	t Other than Active	Military 13	Part-Year Resi	dent Active M	lilitary		
staple 14	Federal adjusted gross income (from your federal return)		14		00			
TS 15	Arizona income (from page 2, line B19)				15	00		
№ 16	Additions to income (from page 2, line C24)				16	00		
9 17	Subtotal: Add lines 15 and 16 and enter the total				17	00		
0 18						00		
40b/20	AZ capital gain or (loss): 19A 00. Net long-term capital gain subtraction (from page 2, line E40) 19							
7 20	20 Arizona adjusted gross income. Subtract lines 18 and 19 from line 17, and enter the difference							
<u>=</u> 21	Deductions: Check box and enter amount. See instructions	ARD 21	00					
E 21	22 Personal exemptions. See instructions							
L 23	Arizona taxable income: Subtract lines 21 and 22 from line 20. If	23	00					
after 25		I	00					
					l	00		
1 26		I	00					
documents 26 27 28 29	,	I	00					
징 28						00		
						00		
<u>a 30</u>						00		
other 31	ŭ					00		
5 32	1 7				I	00		
8 33	,					00		
schedules					I	00		
9 36	Total payments/refundable credits: Add lines 31 through 35				I	00		
					l	00		
¥ ₂₀	-		-			00		
and	Amount of line 38 to be applied to 2014 estimated tax			•		00		
2 40	Balance of overpayment: Subtract line 39 from line 38				I	00		
9 41		s Assigned To School		00 Arizona		12 00		
ed		nce Shelter		00 Politcal		15 00		
required federal		ing Neighbors				18 00		
ire		ough Fund		00				
<u>n</u> 51	Voluntary Political Gift (check only one): 511 Americans Elect			Libertarian 515	Republican			
<u>9</u> 52						00		
SI 53	531 ☐ Annualized/Other 532 ☐ Farmer or Fisherman 533 ☐ Form	221 attached 534	MSA Penalty 53	5 AZLTHSA Pe	nalty			
93 54 95 55	Total of lines 41 through 50 and 52				54	00		
<u>Plac</u>		ount owed on line 56			55	00		
4	Direct Deposit of Refund: Check box 55A if your deposit will be ult ROUTING NUMBER ACCOUNT NUMBER	timately placed in a fo	reign account; s	ee instructions 55	5ALL			
	98			Savings	5			
56	AMOUNT OWED: Add lines 37 and 54. Make check payable to	Arizona Department	of Revenue; inclu			00		

	Your I	Name (as shown on page 1)					You	r Social Security N	0.		
		A1 List children and other dependents (not yourself or spouse). If more space is needed, attach a separate sheet.									-
nts	A1	· ` ` ` ` `		<u></u>	T [']	·-			7		
		FIRST AND LAST NAME	SOCIAL SECU	JRITY NO.	RELAT	TIONSHIP		OUR HOME IN 2013	-		
							No. of Month		-		
		Enterestated asserts as a financial state of the Addition		f		10	No. of Month		40		
Dependents		Enter total number of persons listed in A1 her							A2		
ebe	A3	a Enter the names of the dependents listed a	bove who do	not quality	as your	dependent (on your fee	derai return:	٦		
PART A:		b Enter the dependents listed above who wer	e not claimed	on your te	ederal ret	urn due to e	education	credits:	7		
PA									-		
	A4	List qualifying parents and grandparents. See instructions.					-				
		FIRST AND LAST NAME SOCIAL SECURITY NO. RELATIONSHIP LIVED IN YOUR HOME IN 2011						OUR HOME IN 2013	-		
		No. of Months:									
		5.5 Enter total number of persons listed in A4 here and on the front of this form, box 11							A5		_
	В6						1	13 FEDERAL		2013 ARIZONA	
•		List other state(s) of residency: Amount from Federal Retu						it irom Federal Return		Amount Only	_
Total Income		Wages, salaries, tips, etc.							00	0	
luc		Interest							00	0	
otal		Dividends							00	0	
ξ		O Arizona income tax refunds							00	0	
i,		Alimony received							00	0	_
Percent of		Business income (or loss) from federal Sched							00	0	
	B13	Gains (or losses) from federal Schedule D					B13		00	0	
Arizona	B14	Rents,royalties,partnerships,estates,trusts,small	business corpo	rations from	federal So	chedule E	B14		00	0	
Ari	B15	Other income reported on your federal return					B15		00	0	
ä		16 Total income: Add lines B7 through B15						00	0		
_		17 Federal adjustments. Attach your own schedule						00	0	0	
PA		18 Federal adjusted gross income: Subtract line B17 from line B16 in the FEDERAL column B18						00			
	B19	19 Arizona income: Subtract line B17 from line B16 in the ARIZONA column. Enter here and on the front of this form, line 15						rm, line 15	B19	0	
	B20	Arizona percentage: Divide line B19 by line B18, and enter the result (not over 100%)						B20	9/	6	
. su		1 Reserved						C21			
ddition	C22	22 Total depreciation included in Arizona gross income							C22	0	
Add	C23	23 Other additions to income: See instructions and attach your own schedule							C23	0	
	C24	4 Total: Add lines C21 through C23. Enter here and on the front of this form on line 16							C24	0	0
o.	D25	Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100					D25		00		
ncome		226 Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500							00		
=	D27	7 Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300					D27		00		
from	D28	8 Exemption: Qualifying parents and grandparents. Multiply the number in box 11, page 1, by \$10,000				D28		00			
ıs fr	D29	9 Total exemptions: Add lines D25 through D28						00		_	
tio	D30	Multiply line D29 by the percentage on line B20, and enter the result							D30	0	
trac	D31	Interest on U.S. obligations such as U.S. savings bonds and treasury bills included in the ARIZONA column						column	D31	0	
Subtractions	D32	2 Arizona state lottery winnings included on line B15 in the ARIZONA column (up to \$5,000 only)							D32	0	
ä	D33	U.S. Social Security or Railroad Retirement Act benefits included in your ARIZONA income						D33	0		
PART	D34	Adjustment for I.R.C. §179 expense not allowed						D34	0		
A	D35	5 Other subtractions from income: See instructions and attach your own schedule							D35_	0	0
ARIE: Gain Subtr	D36	6 Total: Add lines D30 through D35. Enter here and on the front of this form, line 18							D36	0	
	E37	7 Total net short-term capital gain or (loss) included on line B13, Arizona Column							E37	0	
	E38	Total net long-term capital gain or (loss). Enter the amount from your capital gain worksheet, line 12, column (c)						2, column (c)	E38	0	
F S	E39	 Net long-term capital gain from assets acquired after December 31, 2011 (from your capital gain worksheet, line 12, column (e)) Multiply line E39 by 10% (.10). Enter here and on page 1, line 19 						2, column (e))	E39	0	0
Cap	E40								E40	0	0
	띴	I have read this return and any attachments with i							ef, they	are true, correct and	
	HER.	complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge					nowicage.				
	I	YOUR SIGNATURE DATE OCCUPATION					PATION				
	SIGN						F10 0001 F1 F10				
	S	SPOUSE'S SIGNATURE	SPOUSE'S SIGNATURE DATE SPOUSE'S OCCU					SE'S OCCUPATION			
	ш	PAID PREPARER'S SIGNATURE	PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)					F-EMPLOYED)			
	ASI										
	=	PAID PREPARER'S STREET ADDRESS						PAID PREPAR	ER'S TIN		
	П	DAID DDEDADED'S CITY STATE 7ID CODE						()	IONE NO	

PAID PREPARER'S CITY STATE ZIP CODE PAID PREPARER'S PHONE NO.

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.

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