

Arizona



consider it done

2014 Arizona ATS Test

Test: 400-00-750 7

Form: **140**

Description: MFJ, 6 Dependents, Rental Business plus Gambling, Standard Deductions

Forms used

Form 140, W-2 (2), 1099-R, W-2G

Other

<u>Income Information</u>	<u>Total</u>	<u>Arizona</u>
Business Income	3,500	3,500
IRA Distributions	12,200	12,200
Gambling Income	16,500	16,500
Federal AGI	32,200	

<u>Deductions and Adjustments</u>	<u>Total</u>	<u>Arizona</u>
AZ Standard Deductions	10010	

Preparer Information

Name = Teresa Taxpro

Firm = H&R Block

Address = 202 W. Main St., Dublin, OH 43017

Phone = 614-659-1505

Self Employed = No

SSN =

EIN = 43-1632899

Arizona Form

140

Resident Personal Income Tax Return

FOR CALENDAR YEAR

2014

82F ☐ Check box 82F
if filing under extension

OR FISCAL YEAR BEGINNING MM/DD/2014 AND ENDING MM/DD/20YY. 66

1 Your First Name and Middle Initial RENTAL		Last Name INVESTOR		Enter your SSN(s).	Your Social Security Number 400 00 7507	
1 Spouse's First Name and Middle Initial (if box 4 or 6 checked) LUCKY		Last Name GAMBLER			Spouse's Social Security No. 600 00 1007	
2 Current Home Address - number and street, rural route 511 CAROL BLVD				Apt. No.		Daytime Phone (with area code) 94 (520) 349-5959
3 City, Town or Post Office TUCSON			State AZ		ZIP Code 85701	
Last Names Used in Prior Year(s)						

FILING STATUS	4 <input checked="" type="checkbox"/> Married filing joint return	REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88		
	5 <input type="checkbox"/> Head of household: Enter name of qualifying child or dependent on next line: _____			
	6 <input type="checkbox"/> Married filing separate return: Enter spouse's name and Social Security Number above.			
	7 <input type="checkbox"/> Single			
	↓ Enter the number claimed. Do not put a check mark.			
EXEMPTIONS	8 <input type="checkbox"/> Age 65 or over (you and/or spouse)	If completing lines 8 through 11, also complete lines 38 through 41.	81 PM	80 RCVD
	9 <input type="checkbox"/> Blind (you and/or spouse)			
	10 6 Dependents: Do not include self or spouse.			
	11 <input type="checkbox"/> Qualifying parents and grandparents			

Dependent Information (Box 10): Children and other dependents. For more space, (check) ☒ and complete page 3.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2014	(e) ✓ if this person did not qualify as a dependent on your federal return	(f) ✓ if you did not claim this person on your federal return due to educational credits
10a	SLOT MACHINE	600-00-2007	DAUGHTER	12	<input type="checkbox"/>	<input type="checkbox"/>
10b	BLACK JACK	600-00-3007	SON	12	<input type="checkbox"/>	<input type="checkbox"/>
10c	POKER TABLE	600-00-4007	SON	12	<input type="checkbox"/>	<input type="checkbox"/>

Dependent Information (Box 11): Qualifying parents and grandparents. See instructions. For more space, (check) ☐ and complete page 3.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2014	(e) ✓ if age 65 or over	(f) ✓ if died in 2014
11a					<input type="checkbox"/>	<input type="checkbox"/>
11b					<input type="checkbox"/>	<input type="checkbox"/>

12	Federal adjusted gross income (from your federal return)	12	32,200	00
13	Non-Arizona municipal interest	13	500	00
14	Ordinary income portion of lump-sum distributions excluded on your federal return	14		00
15	Total federal depreciation	15		00
16	Other additions to income: See instructions and include your own schedule	16	20,225	00
17	Subtotal: Add lines 12 through 16 and enter the total	17	52,925	00
18	Total net capital gain or (loss) include on line 12	18	00	
19	Total net short-term capital gain or (loss) included on line 12	19	00	
20	Total net long-term capital gain or (loss): Enter the amount from your worksheet, line 14, col. (b)	20	00	
21	Net long-term capital gain from assets acquired after December 31, 2011. Enter the amount from your worksheet, line 14, col. (d)	21	00	
22	Multiply line 21 by 20% (.20) and enter the result	22		00
23	Net capital gain derived from Investment in Qualified Small Business	23		00
24	Recalculated Arizona depreciation	24		00
25	2013 Arizona depreciation adjustment	25		00
26	Adjustment for I.R.C. §179 expense not allowed	26		00
27	Interest on U.S. obligations such as U.S. savings bonds and treasury bills	27		00
28	Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)	28		00
29	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)	29	5,000	00
30	U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (taxable amount)	30		00
31	Certain wages of American Indians	31		00
32	Pay received for active service as a member of the reserves, national guard or the U.S. armed forces	32		00
33	Net operating loss adjustment: See instructions before you make an entry here	33		00
34	Contributions to 529 College Savings Plans	34		00
35	Other Subtractions: See instructions	35	225	00
36	Subtract lines 22 through 35 from line 17. Enter the total	36	47,700	00

Your Name (as shown on page 1)		Your Social Security Number	
RENTAL INVESTOR		400-00-7507	

Exemptions	37 Enter the amount from page 1, line 36	37	47,700	00
	38 Age 65 or over: Multiply the number in box 8 by \$2,100	38		00
	39 Blind: Multiply the number in box 9 by \$1,500	39		00
	40 Dependents: Multiply the number in box 10 by \$2,300	40	13,800	00
	41 Qualifying parents and grandparents: Multiply box 11 by \$10,000	41		00
	42 Arizona adjusted gross income: Subtract lines 38 through 41 from line 37	42	33,900	00
Balance of Tax	43 Deductions: Check box and enter amount. See instructions 43 <input type="checkbox"/> ITEMIZED 43 <input checked="" type="checkbox"/> STANDARD	43	10,010	00
	44 Personal exemptions: See instructions	44	6,300	00
	45 Arizona taxable income: Subtract lines 43 and 44 from line 42.	45	17,590	00
	46 Compute the tax using amount on line 45 and Tax Table X, Y or Optional Tax Tables	46	455	00
	47 Tax from recapture of credits from Arizona Form 301, Part 2, line 38	47	455	00
	48 Subtotal of tax: Add lines 46 and 47 and enter the total	48	910	00
	49 Family income tax credit (from your worksheet in the instructions)	49		00
	50 Credits from Arizona Form 301, Part 2, line 72	50	1,209	00
	51 Balance of tax: Subtract lines 49 and 50 from line 48. If the sum of lines 49 and 50 is more than line 48, enter zero	51	0	00
Total Payments and Refundable Credits	52 Arizona income tax withheld during 2014	52	523	00
	53 Arizona estimated tax payments for 2014	53		00
	54 2014 Arizona extension payment (Form 204)	54		00
	55 Increased Excise Tax Credit (Form 140PTC or worksheet - see instructions)	55		00
	56 Property Tax Credit from Form 140PTC	56		00
	57 Other refundable credits: Check the box(es) and enter the total amount. 57 <input type="checkbox"/> 308-I 57 <input type="checkbox"/> 342 57 <input type="checkbox"/> 349	57		00
	58 Total payments and refundable credits: Add lines 52 through 57 and enter the total	58	523	00
Tax Due or Overpayment	59 TAX DUE: If line 51 is larger than line 58, subtract line 58 from line 51 and enter amount of tax due. Skip lines 60, 61 and 62	59		00
	60 OVERPAYMENT: If line 58 is larger than line 51, subtract line 51 from line 58 and enter amount of overpayment	60	523	00
	61 Amount of line 60 to be applied to 2015 estimated tax	61		00
	62 Balance of overpayment: Subtract line 61 from line 60	62	523	00
Voluntary Gifts	63 - 73 Voluntary Gifts to:			
	Solutions Teams Assigned to Schools 63 00 Arizona Wildlife 64 5 00			
	Child Abuse Prevention 65 7 00	Domestic Violence Shelter 66 8 00 Political Gift 67 40 00		
	National Guard Relief Fund 68 00	Neighbors Helping Neighbors 69 10 00 Special Olympics 70 20 00		
	Veterans' Donations Fund ... 71 76 00	I Didn't Pay Enough Fund 72 00 Sustainable State Parks and Road Fund 73 00		
	74 Voluntary Political Gift (check only one): 74 <input type="checkbox"/> Americans Elect 74 <input type="checkbox"/> Democratic 74 <input type="checkbox"/> Green 74 <input checked="" type="checkbox"/> Libertarian 74 <input type="checkbox"/> Republican			
	75 Estimated payment penalty and Arizona Long-Term Health Care Savings Account (AZLTHSA) penalty 75 00			
	76 76 <input type="checkbox"/> Annualized/Other 76 <input type="checkbox"/> Farmer or Fisherman 76 <input type="checkbox"/> Form 221 included 76 <input type="checkbox"/> AZLTHSA Penalty			
	77 Add lines 63 through 73 and 75; enter the total 77 166 00			
	78 REFUND: Subtract line 77 from line 62. If less than zero, enter amount owed on line 79 78 357 00			
Refund or Amount Owed	Direct Deposit of Refund: Check box 78A if your deposit will be ultimately placed in a foreign account ; see instructions. 78A <input type="checkbox"/> ROUTING NUMBER ACCOUNT NUMBER C <input checked="" type="checkbox"/> Checking or 98 1 2 2 1 0 0 0 1 7 1 2 3 1 2 3 1 2 3 1 S <input type="checkbox"/> Savings			
	79 AMOUNT OWED: Add lines 59 and 77. Make check payable to Arizona Department of Revenue; write your SSN on payment, and include with your return 79 00			

PLEASE SIGN HERE

I have read this return and any documents 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 _____ DATE _____

202 W MAIN ST

DUBLIN OH 43017

PAID PREPARER'S CITY STATE ZIP CODE

RENTAL BUSINESS

GAMBLER

H&R BLOCK

FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)

P22222222

PAID PREPARER'S TIN

(614) 659-1505

PAID PREPARER'S PHONE NUMBER

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-2016.
Include the payment with Form 140.

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.

DRAFT #11, June-11-14

Your Name (as shown on page 1) <div style="text-align: center; font-weight: bold; font-size: 1.2em;">RENTAL INVESTOR</div>	Your Social Security Number <div style="text-align: center; font-weight: bold; font-size: 1.2em;">400-00-7507</div>
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Dependent Information - Continuation Sheet

from Page 1 Dependents

Include with your return **only** if listing additional dependents.

Complete this form **only** if you need additional space from page 1 to list your dependents.
 If you do not list **all** dependents claimed on page 1 of your income tax return, you may lose the exemptions.

Children and other dependents, continued from page 1.

	(a) FIRST AND LAST NAME <small>(Do not list yourself or spouse.)</small>	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2014	(e) ✓ if this person did not qualify as a dependent on your federal return	(f) ✓ if you did not claim this person on your federal return due to educational credits
10d	JUST	ONEMORE	600-00-5007	SON	12	<input type="checkbox"/>
10e	NOT	AGAIN	600 -00-5008	DAUGHTER	S	<input type="checkbox"/>
10f	OH	PLEASE	600-00-2007	SON	12	<input type="checkbox"/>
10g					<input type="checkbox"/>	<input type="checkbox"/>
10h					<input type="checkbox"/>	<input type="checkbox"/>
10i					<input type="checkbox"/>	<input type="checkbox"/>
10j					<input type="checkbox"/>	<input type="checkbox"/>
10k					<input type="checkbox"/>	<input type="checkbox"/>
10l					<input type="checkbox"/>	<input type="checkbox"/>
10m					<input type="checkbox"/>	<input type="checkbox"/>
10n					<input type="checkbox"/>	<input type="checkbox"/>
10o					<input type="checkbox"/>	<input type="checkbox"/>
10p					<input type="checkbox"/>	<input type="checkbox"/>
10q					<input type="checkbox"/>	<input type="checkbox"/>
10r					<input type="checkbox"/>	<input type="checkbox"/>
10s					<input type="checkbox"/>	<input type="checkbox"/>
10t					<input type="checkbox"/>	<input type="checkbox"/>
10u					<input type="checkbox"/>	<input type="checkbox"/>

Qualifying parents and grandparents, continued from page 1.

	(a) FIRST AND LAST NAME <small>(Do not list yourself or spouse.)</small>	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2014	(e) ✓ if age 65 or over	(f) ✓ if died in 2014
11c					<input type="checkbox"/>	<input type="checkbox"/>
11d					<input type="checkbox"/>	<input type="checkbox"/>
11e					<input type="checkbox"/>	<input type="checkbox"/>
11f					<input type="checkbox"/>	<input type="checkbox"/>
11g					<input type="checkbox"/>	<input type="checkbox"/>
11h					<input type="checkbox"/>	<input type="checkbox"/>
11i					<input type="checkbox"/>	<input type="checkbox"/>
11j					<input type="checkbox"/>	<input type="checkbox"/>

Include with your return.

For the calendar year 2014 or fiscal year beginning MM, DD, 2014 and ending MM, DD, 20YY.

Your Name as shown on Form 140, 140PY, 140NR or 140X

RENTAL INVESTOR

Your Social Security Number

400 | 00 | 7507

Spouse's Name as shown on Form 140, 140PY, 140NR or 140X (if a joint return)

Spouse's Social Security Number

Part 1

Nonrefundable Individual Tax Credits Available

Enter total available tax credits.

	(a) Current Year Credit	(b) Available Carryover	(c) Total Available Credit (a) + (b)
1 Enterprise Zone Credit Form 304 ▶ 1			00
2 Environmental Technology Facility Credit..... Form 305 ▶ 2			00
3 Military Reuse Zone Credit..... Form 306 ▶ 3			00
4 Recycling Equipment Credit Form 307 ▶ 4			00
5 Credit for Increased Research Activities – Individuals..... Form 308-I ▶ 5			00
6 Credit for Taxes Paid to Another State or Country..... Form 309 ▶ 6			459 00
7 Credit for Solar Energy Devices Form 310 ▶ 7			00
8 Agricultural Water Conservation System Credit Form 312 ▶ 8			00
9 Pollution Control Credit..... Form 315 ▶ 9			00
10 Credit for Solar Hot Water Heater Plumbing Stub Outs and Electric Vehicle Recharge Outlets Form 319 ▶ 10			00
11 Credit for Employment of TANF Recipients..... Form 320 ▶ 11			00
12 Credit for Contributions to Qualifying Charitable Organizations... Form 321 ▶ 12			00
13 Credit for Contributions Made or Fees Paid to Public Schools..... Form 322 ▶ 13			00
14 Credit for Contributions to Private School Tuition Organizations.. Form 323 ▶ 14			750 00
15 Agricultural Pollution Control Equipment Credit Form 325 ▶ 15			00
16 Credit for Donation of School Site Form 331 ▶ 16			00
17 Credits for Healthy Forest Enterprises Form 332 ▶ 17			00
18 Credit for Employing National Guard Members..... Form 333 ▶ 18			00
19 Motion Picture Credits Form 334 ▶ 19			00
20 Credit for Solar Energy Devices – Commercial and Industrial Applications..... Form 336 ▶ 20			00
21 Credit for Investment in Qualified Small Businesses..... Form 338 ▶ 21			00
22 Credit for Water Conservation Systems Form 339 ▶ 22			00
23 Credit for Donations to the Military Family Relief Fund Form 340 ▶ 23			00
24 Renewable Energy Production Tax Credit..... Form 343 ▶ 24			00
25 Solar Liquid Fuel Credit..... Form 344 ▶ 25			00
26 Credit for New Employment..... Form 345 ▶ 26			00
27 Additional Credit for Increased Research Activities for Basic Research Payments Form 346 ▶ 27			00
28 Credit for Qualified Health Insurance Plans Form 347 ▶ 28			00
29 Credit for Contributions to Certified School Tuition Organization (for contributions that exceed the allowable credit on Arizona Form 323).. Form 348 ▶ 29			00
30 Credit for Renewable Energy Investment and Production for Self-Consumption by Manufacturers Form 351 ▶ 30			00
31 Total available nonrefundable tax credits: Add lines 1 through 30..... 31			1,209 00

Continued on page 2 →



You must include Form 301 and the corresponding credit forms on which you computed your credit(s) with your individual income tax return.

Your Name (as shown on page 1)	Your Social Security Number
RENTAL INVESTOR	400-00-7507

Part 2 Application of Tax Credits and Recapture
Enter tax, recapture tax, and tax credits used this taxable year.

32	Tax from Form 140, line 46; or Form 140PY, line 59; or Form 140NR, line 56; or Form 140X, line 31	32	455	00
33	Tax from recapture of Environmental Technology Facility Credit from Form 305, Part 5, line 23	33	00	
34	Tax from recapture of Credits for Healthy Forest Enterprises from Form 332, Part 11, line 53, and Part 12, line 59	34	00	
35	Tax from recapture of Credit for Renewable Energy Industry from Form 342, Part 5, line 17	35	00	
36	Tax from recapture of Credit for Qualified Facilities from Form 349, Part 5, line 17	36	00	
37	Tax from recapture of Credit for Renewable Energy Investment and Production for Self-Consumption by Manufacturers from Form 351, Part 5, line 25	37	00	
38	Recapture Total: Add lines 33, 34, 35, 36, and 37. Enter here and on Form 140, line 47; or Form 140PY, line 60; or Form 140NR, line 57; or Form 140X, line 32	38		00
39	Subtotal: Add lines 32 and 37	39	455	00
40	Family Income Tax Credit from Form 140, line 49; or Form 140PY, line 62; or Form 140X, line 34	40		00
41	Subtract line 40 from line 39. Enter the difference. If less than zero, enter "zero"	41	455	00

Nonrefundable Tax Credits Used This Taxable Year

Enter amount of credits actually used from Part 1.

42	Enterprise Zone Credit	Form 304 ▶ 42	00
43	Environmental Technology Facility Credit (not to exceed 75% of line 39)	Form 305 ▶ 43	00
44	Military Reuse Zone Credit	Form 306 ▶ 44	00
45	Recycling Equipment Credit (not to exceed the lesser of 25% of line 39 or \$5,000)	Form 307 ▶ 45	00
46	Credit for Increased Research Activities – Individuals	Form 308-I ▶ 46	00
47	Credit for Taxes Paid to Another State or Country	Form 309 ▶ 47	459 00
48	Credit for Solar Energy Devices	Form 310 ▶ 48	00
49	Agricultural Water Conservation System Credit	Form 312 ▶ 49	00
50	Pollution Control Credit	Form 315 ▶ 50	00
51	Credit for Solar Hot Water Heater Plumbing Stub Outs and Electric Vehicle Recharge Outlets	Form 319 ▶ 51	00
52	Credit for Employment of TANF Recipients	Form 320 ▶ 52	00
53	Credit for Contributions to Qualifying Charitable Organizations	Form 321 ▶ 53	00
54	Credit for Contributions Made or Fees Paid to Public Schools	Form 322 ▶ 54	00
55	Credit for Contributions to Private School Tuition Organizations	Form 323 ▶ 55	750 00
56	Agricultural Pollution Control Equipment Credit	Form 325 ▶ 56	00
57	Credit for Donation of School Site	Form 331 ▶ 57	00
58	Credits for Healthy Forest Enterprises	Form 332 ▶ 58	00
59	Credit for Employing National Guard Members	Form 333 ▶ 59	00
60	Motion Picture Credits	Form 334 ▶ 60	00
61	Credit for Solar Energy Devices – Commercial and Industrial Applications	Form 336 ▶ 61	00
62	Credit for Investment in Qualified Small Businesses	Form 338 ▶ 62	00
63	Credit for Water Conservation Systems	Form 339 ▶ 63	00
64	Credit for Donations to the Military Family Relief Fund: Enter the smaller of Part 1, line 23 or Part 2, line 39	Form 340 ▶ 64	00
65	Renewable Energy Production Tax Credit	Form 343 ▶ 65	00
66	Solar Liquid Fuel Credit	Form 344 ▶ 66	00
67	Credit for New Employment	Form 345 ▶ 67	00
68	Additional Credit for Increased Research Activities for Basic Research Payments	Form 346 ▶ 68	00
69	Credit for Qualified Health Insurance Plans	Form 347 ▶ 69	00
70	Credit for Contributions to Certified School Tuition Organization (for contributions that exceed the maximum allowable credit on Arizona Form 323).	Form 348 ▶ 70	00
71	Credit for Renewable Energy Investment and Production for Self-Consumption by Manufacturers	Form 351 ▶ 71	00

72	Total Tax Credits Used: Add lines 42 through 71. Total cannot be more than line 41. Enter this amount on Form 140, line 50; or Form 140PY, line 63; or Form 140NR, line 59; or Form 140X, line 35	72	1,209	00
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Include with your return. A separate form must be filed for each state or country for which a credit is claimed.

For the calendar year 2014 or fiscal year beginning MM/DD/2014 and ending MM/DD/20YY.

Your Name as shown on Form 140, 140NR, 140PY or 140X RENTAL INVESTOR	Your Social Security Number 400 00 7507
Spouse's Name as shown on Form 140, 140NR, 140PY or 140X (if joint return)	Spouse's Social Security Number

Part 1 Computation of Income Subject to Tax by Both Arizona and the Other State or Country During 2014

Other State: If claiming a credit for taxes paid to another state, enter the two-letter abbreviation for that state.

See last page of the instructions for a list of state abbreviations CO

Other Country: If claiming a credit for taxes paid to another country, enter the name of that other country

	(a)	(b)	(c)
1 Description of income item(s). List each income item separately.	WAGES		
2 Amount of income from item listed on line 1 reportable to both Arizona and the other state or country	\$ 77,700 00	\$ 00	\$ 00
3 Portion of income on line 2 included in Arizona adjusted gross income	\$ 77,700 00	\$ 00	\$ 00
4 Portion of income on line 2 included in the other state's or country's equivalent of Arizona adjusted gross income.....	\$ 77,700 00	\$ 00	\$ 00
5 Income subject to tax by both Arizona and the other state or country. Enter the smaller of the amount entered on line 3 or line 4.....	\$ 77,700 00	\$ 00	\$ 00
6 Total income subject to tax in both Arizona and the other state or country. Add line 5, columns (a), (b), and (c)	\$ 77,700 00		\$ 77,700 00

Part 2 Computation of Other State or Country Tax Credit

(Read specific line instructions for Part 2 before completing this part.)

7 Arizona tax liability less any credits (except other state tax credit)	7	459 00
8 Amount from Part 1, line 6.....	8	77,700 00
9 Entire income upon which Arizona tax is imposed. See instructions.....	9	47,700 00
10 Divide the amount on line 8 by the amount on line 9 (cannot be greater than one).....	10	1. 01010
11 Multiply the amount on line 7 by the decimal on line 10.....	11	459 00
12 Income tax paid to: Name of other state or country. See Instructions.....	12	3,295 00
13 Amount from Part 1, line 6.....	13	77,700 00
14 Entire income upon which other state's or country's income tax is imposed. See instructions.....	14	67,700 00
15 Divide the amount on line 13 by the amount on line 14 (cannot be greater than one).....	15	1. 01010
16 Multiply the amount on line 12 by the decimal on line 15.....	16	3,295 00
17 Allowable credit for taxes paid to the above named other state or country: Enter the smaller of line 11 or line 16. See instructions.....	17	459 00

Schedule of Income Allocation

Complete this schedule only if you are an Arizona resident who is also considered to be a resident of another state under the laws of that other state (dual resident); otherwise skip this schedule. See pages 2 and 8 of the instructions.

	(a) Amount reported on your 2014 federal return	(b) Amount entered in column (a) reported on your 2014 Form 140	(c) Amount entered in column (a) reported on your 2014 return filed to your statutory state of residence	(d) Amount entered in column (c) that would be sourced to your statutory state of residence as income of a nonresident of that state
1 Wages, salaries, tips, etc.....	\$ 00	\$ 00	\$ 00	\$ 00
2 Interest.....	\$ 00	\$ 00	\$ 00	\$ 00
3 Dividends.....	\$ 00	\$ 00	\$ 00	\$ 00
4 Business income or (loss) from federal Schedule C.....	\$ 00	\$ 00	\$ 00	\$ 00
5 Gains or (losses) from federal Schedule D.....	\$ 00	\$ 00	\$ 00	\$ 00
6 Rents, royalties, partnerships, estates, trusts, small business corporations from federal Schedule E	\$ 00	\$ 00	\$ 00	\$ 00
7 Other income reported on your federal return	\$ 00	\$ 00	\$ 00	\$ 00
8 Total Income: Add lines 1 through 7 .	\$ 00	\$ 00	\$ 00	\$ 00
9 Other federal adjustments: List on lines 9a through 9c:				
9a	\$ 00	\$ 00	\$ 00	\$ 00
9b	\$ 00	\$ 00	\$ 00	\$ 00
9c	\$ 00	\$ 00	\$ 00	\$ 00
9d Total adjustments: Add lines 9a through 9c for each column.....	\$ 00	\$ 00	\$ 00	\$ 00
10 Adjusted Gross Income: Subtract line 9d from line 8 for each column....	\$ 00	\$ 00	\$ 00	\$ 00

Include with your return.

- Do not use this form for contributions or fees paid to a public school.
- See Form 322 for contributions or fees paid to public schools.

For the calendar year 2014 or fiscal year beginning MM, DD, 2014 and ending MM, DD, 20YY.

Your Name as shown on Form 140, 140NR, 140PY or 140X RENTAL INVESTOR	Your Social Security Number 400 00 7507
Spouse's Name as shown on Form 140, 140NR, 140PY or 140X (if joint return)	Spouse's Social Security Number

Part 1 Current Year's Credit – Qualifying Contributions1 Name of private school tuition organization: PHOENIX PREPARATORY SCHOOLAddress: 7650 W JEFFERSON ST
PHOENIX AZ 85009

Amount of contributions made in 2014 to the private school tuition organization named on line 1

1a 750 00

Amount of contributions made from January 1, 2015 to April 15, 2015 to the private school tuition organization named on line 1 for which you are claiming a credit on your 2014 return

1b 00Total amount of contributions made to the private school tuition organization named on line 1 1c 00

2 Name of private school tuition organization: _____

Address: _____

Amount of contributions made in 2014 to the private school tuition organization named on line 2

2a 00

Amount of contributions made from January 1, 2015 to April 15, 2015 to the private school tuition organization named on line 2 for which you are claiming a credit on your 2014 return

2b 00Total amount of contributions made to the private school tuition organization named on line 2 2c 00**NOTE:** If you made contributions to more than two school tuition organizations, include a separate schedule.

3 Total contributions made to school tuition organizations to be claimed as a credit in 2014: Add lines 1c, 2c, and any amounts from additional schedules

3 750 00

4 Single taxpayers or heads of household, enter \$528. Married taxpayers filing joint enter \$1056

4 1,056 00

5 Current year's credit: Enter the smaller of line 3 or line 4 on line 5. In most cases, if you are married filing a separate return, enter one-half of the smaller of line 3 or line 4. See instructions

5 750 00

You **may** be able to claim an additional credit for contributions made to school tuition organizations.
See **Arizona Form 348** for more information.

Part 2 Available Credit Carryover

	(a) Taxable Year from which you are carrying the credit	(b) Original Credit Amount	(c) Amount Previously Used	(d) Available Carryover: Subtract column (c) from column (b).
6	2009	00	00	00
7	2010	00	00	00
8	2011	00	00	00
9	2012	00	00	00
10	2013	00	00	00
11	TOTAL AVAILABLE CARRYOVER: Add lines 6 through 10, column (d)			00

Part 3 Total Available Credit12 Current year's credit: Enter the amount from Part 1, line 5 12 750 00

Enter this amount on Arizona Form 301, line 14, column (a).

13 Available credit carryover from Part 2, line 11, column (d) 13 00

Enter this amount on Arizona Form 301, line 14 column (b).

14 Total Available Credit: Add line 12 and line 13. Enter the total here and on Arizona Form 301, line 14, column (c) .. 14 750 00

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code BARNHART & DALEY CIRCUS 123 BLUEBIRD CIRCLE BETHLEHEM PA 40007		1 Gross distribution 15,000.00 \$		OMB No. 1545-0119 2014 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. Copy 1 For State, City, or Local Tax Department		
		2a Taxable amount 10,000.00 \$				2b Taxable amount not determined <input type="checkbox"/> Total distribution <input type="checkbox"/>	
		3 Capital gain (included in box 2a) \$				4 Federal income tax withheld \$	
PAYER'S federal identification number 61-2987342		RECIPIENT'S identification number 400-00-7507					
RECIPIENT'S name RENTAL INVESTOR Street address (including apt. no.) 511 CAROL BLVD City or town, state or province, country, and ZIP or foreign postal code TUCSON AZ 85701		5 Employee contributions /Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$			
		7 Distribution code(s) 1		8 Other \$ %			
		9a Your percentage of total distribution %		9b Total employee contributions \$			
10 Amount allocable to IRR within 5 years \$		11 1st year of desig. Roth contrib.		12 State tax withheld \$ 500.00 \$			
				13 State/Payer's state no. AZ/61-2987342			
				14 State distribution \$ 10,000.00 \$			
Account number (see instructions)		15 Local tax withheld \$		16 Name of locality \$			
				17 Local distribution \$			

Form **1099-R**

www.irs.gov/form1099r

Department of the Treasury - Internal Revenue Service

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code TEST 1600 W MONROE PHOENIX AZ 85007		1 Gross distribution 12,200.00 \$		OMB No. 1545-0119 2014 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
		2a Taxable amount 12,200.00 \$			
		2b Taxable amount not determined <input type="checkbox"/> Total distribution <input type="checkbox"/>			
PAYER'S federal identification number 111222332	RECIPIENT'S identification number 400-00-7507	3 Capital gain (included in box 2a) \$	4 Federal income tax withheld \$		Copy 1 For State, City, or Local Tax Department
RECIPIENT'S name RENTAL INVESTOR Street address (including apt. no.) 1111 STORM CLOUD LN #9 City or town, state or province, country, and ZIP or foreign postal code TUSCON AZ 85701		5 Employee contributions /Designated Roth contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$		
		7 Distribution code(s) IRA/SEP/SIMPLE <input checked="" type="checkbox"/>	8 Other \$ %		
		9a Your percentage of total distribution %	9b Total employee contributions \$		
10 Amount allocable to IRR within 5 years \$	11 1st year of desig. Roth contrib.	12 State tax withheld \$	13 State/Payer's state no.	14 State distribution \$	
Account number (see instructions)		15 Local tax withheld \$	16 Name of locality	17 Local distribution \$	

☐ VOID ☐ CORRECTED

OMB No. 1545-0238

2014

Form W-2G

**Certain
Gambling
Winnings**

**Copy 1
For State, City,
or Local Tax
Department**

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code WILD HORSEPASS CASINO 5040 WILDHORSE PASS BLVD CHANDLER AZ 82048		1 Gross winnings \$ 16,500	2 Date won 2014-02-14
		3 Type of wager	4 Federal income tax withheld \$
		5 Transaction	6 Race
		7 Winnings from identical wagers \$	8 Cashier
PAYER'S federal identification number	PAYER'S telephone number 520-796-7777	9 Winner's taxpayer identification no. 400-00-7507	10 Window 5
WINNER'S name RENTAL INVESTOR		11 First I.D.	12 Second I.D.
Street address (including apt. no.) 511 CAROL BLVD		13 State/Payer's state identification no.	14 State winnings \$
City or town, province or state, country, and ZIP or foreign postal code TUCSON AZ 85701		15 State income tax withheld \$	16 Local winnings \$ 16,500
		17 Local income tax withheld \$	18 Name of locality

Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

Signature ►

Date ►

22222		a Employee's social security number 400-00-7507		OMB No. 1545-0008	
b Employer identification number (EIN) 61-2987342			1 Wages, tips, other compensation 3,200.00		2 Federal income tax withheld 78.00
c Employer's name, address, and ZIP code BARNHART & DALEY CIRCLE 123 BLUEBIRD CIRCLE BETHLEHEM PA 40007			3 Social security wages 3,200.00		4 Social security tax withheld 134.00
			5 Medicare wages and tips 3,200.00		6 Medicare tax withheld 46.00
			7 Social security tips		8 Allocated tips
d Control number			9		10 Dependent care benefits
e Employee's first name and initial Last name Suff. RENTAL INVESTOR 511 CAROL BLVD TUCSON AZ 85701			11 Nonqualified plans		12a C o d e L 100.00
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b C o d e
			14 Other		12c C o d e
					12d C o d e
f Employee's address and ZIP code					
15 State AZ	Employer's state ID number 61-2987342	16 State wages, tips, etc. 3,200.00	17 State income tax 23.00	18 Local wages, tips, etc.	19 Local income tax
					20 Locality name

Form **W-2** Wage and Tax Statement
Copy 1—For State, City, or Local Tax Department

2014

Department of the Treasury—Internal Revenue Service