THE RETURN.			Arizona Form <b>140PY</b> Part-Year	Reside	nt Persona	l Incom	e٦	Fax Retur	'n	OR CALENDAR YEAR
ERI	82F	2F□Check box 82F 2F□if filing under extension OR FISCAL YEAR BEGINNING (M,M,D,D,2,0,1,8) AND ENDING (M						[M.MID	. D   2 , 0 , Y , Y ,	
_	1	Your First Name and Middle Initial Spouse's First Name and Middle Initial (if box 4 or 6 checked) Current Home Address - number and street, rural route								Social Security Numbe
NS.	; 1				Last Name Apt. No.		your Spouse's Social Security No. SSN(s).			
<u> </u>	2									
PLE/	3	City, ⊺	Town or Post Office State		ZIP Code		L	ast Names Used	l in Last Fou	r Prior Year(s) (if different 97
DO NOT STAPLE	S FILING STATUS	4 5 6 7	Head of household: Enter name of qualifying child or dependent on next line:						OT MARK IN THIS AREA.	
	EXEMPTIONS	8 9 10	Age 65 or over (you and/or spouse) Blind (you and/or spouse) Dependents: <i>Do not include self or spouse.</i>	lf ti	f completing line hrough 11, also c ines 49 through {	complete	8	<sub>IP</sub> PM		80R RCVD
	Щ	<u>11</u> 12-1	Qualifying parents and grandparents <b>Residency Status</b> ( <i>check one</i> ): <b>12</b> Part-	 Year Reside	ent Other than Act	ive Military	13	Part-Year	Resident A	ctive Military
		40	(Box 10): Dependent Information: Children an (a) FIRST AND LAST NAME (Do not list yourself or spouse.)		endents. <b>For mo</b> (b) IAL SECURITY NO.	re space, (c (c) RELATIONS		k) and cor (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2018	mplete pag ✓ (e) if this pe did not qualifi dependent or federal ret	rson y as a n your federal return due to
	lent	10а 10ь								
ents after Form 140PY.	Dependents		(Box 11): Qualifying parents and grandparents (a) FIRST AND LAST NAME (Do not list yourself or spouse.)		(b) IAL SECURITY NO.	space, (che (c) RELATIONS		(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2018	ete page 3. (e) ✓ if age 65 or c	(f) ✓ if died in 2018
er Foi		11а 11ь								
ts aft		14	Dates of Arizona residency: From $[M, M, D, D, Y]$ . List other state(s) of residency:			Y,Y,Y	An	2018 FEDEI		2018 ARIZONA Amount Only
		15	Wages, salaries, tips, etc.				15		00	00
or other docum		16	Interest				16		00	00
ор		17 18	Dividends Arizona income tax refunds				17 18		00	00
ner	e	19	Business income (or loss) from federal Schedule				19		00	00
ot	ncome	20	Gains (or losses) from federal Schedule D. See in	nstructions for	ARIZONA column.		20		00	00
	nal	21	Rents, royalties, partnerships, estates, trusts, small bus	iness corpora	tions from federal S	chedule E	21		00	00
schedules	Vrizo	22	Other income reported on your federal return: Inc						00	00
edu	4	23	Total income: Add lines 15 through 22						00	00
ch		24	Other federal adjustments: Include your own sched						00	00
AZ S		25 26	Federal adjusted gross income: Subtract line 24 fr Arizona gross income: Subtract line 24 from line 23						00 	00
d A		26 27	Arizona income ratio: Divide line 26 by line 25, an							
and		28	Total depreciation included in Arizona gross inco							00
ral	ions	29	Net capital loss derived from exchange of legal to							00
federal	dditior	30	Other Additions to Income: See instructions and inc							00
lfe	•	31	Subtotal: Add lines 26, 28, 29 and 30							00
rec	je 2	32	Total Arizona sourced net capital gain or (loss). S	See instruction	าร		32		00	
required	nt. on pag	33	Total net short-term capital gain or (loss) include	d on line 20,	mber 31, 2011. See instructions		33		00	
		34	Total net long-term capital gain or (loss): See inst						00	
any	0 L	35	Net long-term capital gain from assets acquired a						00	
ie s	suo	36	Multiply line 35 by 25% (.25) and enter the result							00
Place	racti	37	Net capital gain derived from investment in quali-							00
Δ_	Subt	38 39	Net capital gain derived from exchange of legal t Subtract lines 36, 37, and 38 from line 31. Enter							00
			10149 (18)		AZ Form 140PY (			<u></u>		Page 1 of

[	Your I	Name (as shown on page 1)	Your Social Security Nu	mber	
_	40	Enter the amount from page 1, line 39	40	00	
from	41	Recalculated Arizona depreciation			00
Subtractions – cont. from page 1	42	Contributions to 529 College Savings Plans			00
ч С	43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills			00
ons pag	44	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)		00	
racti	45	U.S. Social Security or Railroad Retirement Act benefits included in your Arizona income		00	
ubti	46	Other Subtractions from Income: See instructions and include your own schedule		46	00
S	47	Subtract lines 41 through 46 from line 40	·····	47	00
	48	Age 65 or over: Multiply the number in box 8 by \$2,100	48	00	
	49	Blind: Multiply the number in box 9 by \$1,500	49	00	
ions	50	Dependents: Multiply the number in box 10 by \$2,300	50	00	
Exemptions	51	Qualifying parents and grandparents: Multiply the number in box 11 by \$10,000	51	00	
Exe	52	Add lines 48 through 51	52	00	
	53	Multiply line 52 by the Arizona income ratio on line 27		53	00
	54	Arizona adjusted gross income: Subtract line 53 from line 47		54	00
	55	Deductions: Check box and enter amount. See instructions	55S STANDARD	55	00
	56	Personal exemptions: See instructions			00
aX	57	Arizona taxable income: Subtract lines 55 and 56 from line 54. If less than zero, enter "0"		57	00
of	58	Compute the tax using amount from line 57 and Tax Table X or Y			00
Balance of Tax	59	Tax from recapture of credits from Arizona Form 301, Part 2, line 36		59	00
Bala	60	Subtotal of tax: Add lines 58 and 59 and enter the total			00
	61	Family income tax credit (from the worksheet - see instructions)			00
	62	Nonrefundable credits from Arizona Form 301, Part 2, line 69			00
-	63	Balance of tax: Subtract lines 61 and 62 from line 60. If the sum of lines 61 and 62 is more than line 60, en			00
Payments and Indable Credits	64	2018 AZ income tax withheld.			00
nts a Cred	65	2018 AZ estimated tax payments65a 00 Claim of Right 65b	00 Add 65a and 65b.		00
yme	66	2018 AZ extension payment (Form 204)			00
al Pa unda	67	Increased Excise Tax Credit (from the worksheet - see instructions)			00
Total   Refur	68	Other refundable credits: Check the box(es) and enter the total amount		00	
	<u>69</u>	Total payments and refundable credits: Add lines 64 through 68 and enter the total			00
e or	70	TAX DUE: If line 63 is larger than line 69, subtract line 69 from line 63, and enter amount of tax due. Skip lin		00	
<ul><li>Du</li><li>rpay</li></ul>	71	<b>OVERPAYMENT:</b> If line 69 is larger than line 63, subtract line 63 from line 69, and enter amount of overpay			00
Tax Due or Overpaymeni		Amount of line 71 to be applied to 2019 estimated tax			00
		Balance of overpayment:   Subtract line 72 from line 71     84 Voluntary Gifts to:   Solutions Teams Assigned to Schools			100
Voluntary Gifts	/4	84 Voluntary Gifts to: Solutions leams Assigned to Schools			
ary		Object   Object<			
unt		I Didn't Pay Enough Fund			
2	85	Political Party (if amount is entered on line 78 - check only one): <b>851</b> Democratic <b>852</b> Green Party <b>85</b>		l Republican	
~	86	Estimated payment penalty		86	00
Penalty		871 Annualized/Other 872 Farmer or Fisherman 873 Form 221 included			100
Ъ		Add lines 74 through 84 and 86; enter the total		88	00
_	89	<b>REFUND:</b> Subtract line 88 from line 73. If less than zero, enter amount owed on line 90			00
Refund or Amount Owed		Direct Deposit of Refund: Check box 89A if your deposit will be ultimately placed in a foreign account; see			100
und unt C					
/mot		98 S□ Savings			
		AMOUNT OWED: Add lines 70 and 88. Make check payable to Arizona Department of Revenue; write ye			00
HERE	l t	Inder penalties of perjury, I declare that I have read this return and any documents with it, and to rue, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which pre	the best of my knowled	owledge and belief, they	are
Ш	€			uge.	
L T	_ ¥	OUR SIGNATURE DATE OC	CUPATION		_
5	→_	POUSE'S SIGNATURE DATE SP	OUSE'S OCCUPATION		
SIGN	c	POUSES SIGNATURE DATE SP	OUSE S OCCUPATION		
	F	AID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF	SELF-EMPLOYED)		-
AS	_			<b>T</b> 151	
PLEASE	F	AID PREPARER'S STREET ADDRESS	PAID PREPARER'S	IIN	
٩	F	AID PREPARER'S CITY STATE ZIP CODE	() PAID PREPARÉR'S I	PHONE NUMBER	
		are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ at are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department o		138 Dhooniy A7 95070 04	120

## 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 (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2018	(e) if this person did not qualify as a dependent on your federal return	(f) f you did not claim this person on your federal return due to educational credits
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## Qualifying parents and grandparents, continued from page 1.

		1				
	(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 2018	(e) ✓ if age 65 or over	(f) ✓ if died in 2018
11c						
<b>11</b> d						
<b>11</b> e						
<b>11</b> f						
11g						
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<b>11</b> i						
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