

Claim of Right - Individual

FOR CALENDAR YEAR 2023

	OR FISCAL YEAR BEG	NNING M.M.D	D 2 0 2 3	AND ENDING 🔟	$M_1D_1D_1Y_1Y_1$	ΔY.	66F			
			this form with	-						
Your Name as shown on Form 140, 140NR, 140PY, 140X, 140-SBI, 140NR-SBI, 140PY-SBI or 140X-SBI Your Soc						ocial S	cial Security Number			
Spouse's Name as shown on Form 140, 140NR, 140PY, 140X, 140-SBI, 140NR-SBI, 140PY-SBI or 140X-SBI (if filling joint) Spouse's					s's Soc	's Social Security Number				
explain t	gure your current year's tax und the amounts repaid. See instru ire, ITP 16-1. <i>Note: If you ar</i>	ctions for details.	For more informa	tion on Arizona's	claim of right prov	isions	s, see tl	he depar	rtment's	
Part 1	General Information									
1	Enter the <u>total</u> amount of <u>all is</u> income under a claim of right <i>If the amount on line 1 is \$3,0</i>					1			00	
	paid back under a claim of rig		,	, ,						
2	Was the total amount repaid in If you answered "Yes", you mu Right form for each prior taxal of Right form.	ıst complete and i	nclude with your	2023 tax return a	separate Claim o	of	Yes	No		
3	List each prior taxable year e	nd that included in	come that was in	cluded in line 1:						
	3a 3b	3c	3d	3e	3f					
	YYYY YYYY	YYYY	YYYY	YYYY	YYYY					
4	Did you take a deduction instead If you answered "Yes", you mu Form 140, line 18; or Form 14 on Form 140X, line 23. If you	ust include the am 0PY, line 31; or Fo	nount on line 1 as orm 140NR, line 3	an "Other Additio 32; or as an "Addi	ons to Income" on itions to Income"		Yes	No		
Part 2	Decrease in Prior Year's	з Тах								
5	5 Prior Taxable Year End						M M /	DD/Y	YYY	
6									00	
7	you repaid in 2023		•		-	1 1			00	
8	Subtract line 7 from 6. Enter	he difference				8			00	
	This is your claim of right cred Note: <i>If you are completing m</i> Form 140, line 54, box 54b; Form 140X, line 43, box 43b.	ore than one Clain	n of Right form, a	dd all amounts on	line 8 and enter th	he tota			turn.	
	If you are filing a Small Bus	iness Income Tax	return, see ins	tructions.						
Part 3	Explanation of your cla									

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Your Name (as shown on page 1)	Your Social Security Number

Part 3 - Continuation Sheet