00

90,000

	Your	Name (as shown on page 1) Your Social Security Nu	mber		
Exemptions	37	Enter the amount from page 1, line 36	37		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
mp	40	Dependents: Multiply the number in box 10 by \$2,300	40		00
Exe	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	90,000	00
	43	Deductions: Check box and enter amount. See instructions on page 14 43 ☐ ITEMIZED 43S ☒ STANDARD	-	9,000	00
	44	Personal exemptions: See instructions on page 15	44	4,200	00
ах	45	Arizona taxable income: Subtract lines 43 and 44 from line 42.	45	76,800	00
Balance of Tax	46	Compute the tax using amount on line 45 and Tax Table X, Y or Optional Tax Tables	. 46	2,667	00
Jce	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 38	47		00
alar	48	Subtotal of tax: Add lines 46 and 47 and enter the total	48	2,667	00
8	49	Family income tax credit (from your worksheet in the instructions on page 15)	49		00
	50	Credits from Arizona Form 301, Part 2, line 72	50		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	2,667	00
	52	Arizona income tax withheld during 2014	52	3,000	00
dits	53	Arizona estimated tax payments for 2014	53	-	00
Cre	54	2014 Arizona extension payment (Form 204)	54		00
able	55	Increased Excise Tax Credit (Form 140PTC or worksheet - see instructions on page 18)	55		00
Refundable Credits	56	Property Tax Credit from Form 140PTC	56_		00
Re	57	Other refundable credits: Check the box(es) and enter the total amount	57		00
	58	Total payments and refundable credits: Add lines 52 through 57 and enter the total	58	3,000	00
,	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_	333	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. Solutions Teams Assigned to 63 - 73 Voluntary Gifts to:	62		00
	74 75 76 77 78	National Guard Relief Fund. 68 Veterans' Donations Fund71 Political Party (if amount is entered on line 67 - check only one): 741 Americans Elect 742 Democratic 743 Libertarian 744 Estimated payment penalty and Arizona Long-Term Health Care Savings Account (AZLTHSA) penalty Add lines 63 through 73 and 75; enter the total REFUND: Subtract line 77 from line 62. If less than zero, enter amount owed on line 79 Direct Deposit of Refund: Check box 78A if your deposit will be ultimately placed in a foreign account; see instructions. 78A ROUTING NUMBER 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.	75 77 78	an 745 AZ Green	00 00 00
PLEASE SIGN HERE	→ ¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬	have read this return and any documents with it. Under penalties of perjury, I declare that to the best of my know are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which produce the pouse's signature. DATE DATE OCCUPATION SPOUSE'S OCCUPATION AID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) PAID PREPARE AID PREPARER PAID PREPARER PAID PREPARER	repar	er has any know	
	F	AID PREPARER'S CITY STATE ZIP CODE PAID PREPARE	R'S PH	ONE 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.

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90,000

	Your	Name (as shown on page 1)	r Social Security N	lumber				
Exemptions	37	Enter the amount from page 1, line 36		37		00		
	38	Age 65 or over: Multiply the number in box 8 by \$2,100				00		
	39	Blind: Multiply the number in box 9 by \$1,500				00		
	40	Dependents: Multiply the number in box 10 by \$2,300				00		
	41	Qualifying parents and grandparents: Multiply box 11 by \$10,000				00		
ш	42			- 1	90,000	00		
Balance of Tax	43	Deductions: Check box and enter amount. See instructions on page 14 43I ITEMIZED 43S			9,000	00		
	43	Personal exemptions: See instructions on page 15		200	4,200	00		
	45	Arizona taxable income: Subtract lines 43 and 44 from line 42.			76,800	00		
	46	Compute the tax using amount on line 45 and Tax Table X, Y or Optional Tax Tables			2,667	00		
	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 38				00		
	48	Subtotal of tax: Add lines 46 and 47 and enter the total			2,667	00		
	49	Family income tax credit (from your worksheet in the instructions on page 15)				00		
	50	Credits from Arizona Form 301, Part 2, line 72			2106	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			561	00		
	52				3,000	00		
Total Payments and Refundable Credits	53	Arizona estimated tax payments for 2014				00		
	54	2014 Arizona extension payment (Form 204)				00		
	55	Increased Excise Tax Credit (Form 140PTC or worksheet - see instructions on page 18)				00		
	56	Property Tax Credit from Form 140PTC		100		00		
Tota Refu	57					00		
	58				3,000	00		
	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 6			2000	00		
Tax Due or	60	OVERPAYMENT: If line 58 is larger than line 51, subtract line 51 from line 58 and enter amount of overpayme			2439	00		
X Di	61	Amount of line 60 to be applied to 2015 estimated tax				00		
Ë	62			62		00		
		Solutions Teams Assigned to 63 - 73 Voluntary Gifts to:	00	0				
	Sch	ools Child Abuse Prevention 63 65 000000000000000000000000000000000	67 00)				
		Notional Cuard Raliof Fund 68	70)				
		Veterans' Donations Fund 71 00 I Didn't Pay Enough Fund	e State Parks 00	0				
	574	Political Party (if amount is entered on line 67 - check only one): 741 Americans Elect 742 Democratic 743	Libertarian 744	Republic	can 745 AZ Green	n Party		
	E 75	Estimated payment penalty and Arizona Long-Term Health Care Savings Account (AZLTHSA) pena	lty	75		00		
	₽ 76	761 Annualized/Other 762 Farmer or Fisherman 763 Form 221 included 764 AZLTHSA Penalty			the free and			
	°77	Add lines 63 through 73 and 75; enter the total.		_ 77		00		
70	78	REFUND: Subtract line 77 from line 62. If less than zero, enter amount owed on line 79		78	2,439	00		
Refund or Amount Owed		Direct Deposit of Refund: Check box 78A if your deposit will be ultimately placed in a foreign account; see ins]				
und		ROUTING NUMBER ACCOUNT NUMBER C						
Ref	70		Savings					
A	79	AMOUNT OWED: Add lines 59 and 77. Make check payable to Arizona Department of Revenue; write your and include with your return				00		
				_				
		have read this return and any documents with it. Under penalties of perjury, I declare that to the	heet of my kno	wledge	and helief the	v		
		are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all inform						
ш								
2	-							
Ï	Y	OUR SIGNATURE DATE OCCUP	ATION					
Z								
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PLEASE SIGN HERE		LAIVIP LE # 2			-			
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4	F	PAID PREPARER'S STIMBURE	PAID PREPAR	RER'S TI	N			
						- 1		
			()				

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.

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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. AZ Form 140 (2014)

Page 2 of 3