## **ARIZONA FORM**

## **Resident Personal Income Tax Return**

	_	OR FISCAL YEAR BEGINNING		AND I	ENDING		. 66	2010	
	82F	Check box 82F if filing under extension						89 X	
	Your 1	First Name and Initial	You <u>must</u>				ur Soc	ial Security No.	
,	Spou	use's First Name and Initial (if box 4 or 6 checked)  Last Name  SSN(s).					Spouse's Social Security No.		
	Curre	ent Home Address - number and street, rural route Apt. No.				de) Home Phone (with	(with area code)		
(	City,	Town or Post Office State Zip Code							
<u> </u>	T					REVENUE USE ONLY. D	о пот	MARK IN THIS AREA.	
Static	4	Married filing joint return  NAME OF QUALIFYING CH	ILD OR DEP	ENDENT	-				
Ċ.	5 5		:-1 0	N					
Filin	6 7		iai Securi	y 110. c	above.				
20	E	Age 65 or over (you and/or spouse)				88			
Exemptions	n cl	aimed. 9 Blind (you and/or spouse)							
Z A	Do	not put a 10 Dependents. From page 2, line A2 – do not include s						İ	
_	_	Qualifying parents and ancestors of your parents.				[81]	80		
return Include any navment federal and Arizona Schedules A	5	This box may be blank or may contain a printed barcode of data from your				d gross income	- 1		
4	3					ome (from page 2, line B12			
γ	2					d 13	14		
7	5					lo. from line C26a ► 151			
107	2					ne 14 <i>minus</i> line 15 D 17S STANDAR			
Δr	5					otions			
an'	5					Line 16 minus lines 17 &			
<u> </u>	2					se line 19 and proper tax ta			
fρΩ	2					ure of credits			
- Tuo						Add lines 20 and 21			
AVR.	5			23 - 24	. 231□ YOU	IRSELF 232□ SPOUS	E 24	4 00	
2	7			<b>25</b> Red	duced tax: S	ubtract line 24 from line 22	2	5 00	
٥	2			<b>26</b> Far	mily income t	ax credit from p 17 of inst	r 20	6 00	
=	27	Credits from Arizona Form 301, Part II, line 59, or Forms 310, 32	<u>1,</u> 322, an	d 323 i	f Form 301 is	s not required	27	7 00	
-	28	Credit type: Enter form number of each credit claimed							
1	29	Clean Elections Fund Tax Credit. From worksheet on page 19 of the					- 1		
а	, 30	Balance of tax: Subtract lines 26, 27 and 29 from line 25. If the sum o							
of th	31	Arizona income tax withheld during 2010							
ל פר	32	Arizona estimated tax payments for 2010							
משמפת	34	Increased Excise Tax Credit from worksheet on page 19 of the in-							
after	35	Property Tax Credit from Form 140PTC							
ner.;	36	Other refundable credits: Check the box(es) and enter the amount							
comer	37	Total payments/refundable credits: Add lines 31 through 36						1	
Pd:	38	TAX DUE: If line 30 is larger than line 37, subtract line 37 from line 30 at					- 1	3 00	
שטר	38 TAX DUE: If line 30 is larger than line 37, subtract line 37 from line 30 and enter amount of tax due. Skip lines 39, 40 and 41 39 OVERPAYMENT: If line 37 is larger than line 30, subtract line 30 from line 37 and enter amount of overpayment							9 00	
2	40	Amount of line 39 to be applied to 2011 estimated tax							
ntc.	41	Balance of overpayment: Subtract line 40 from line 39					4	1 00	
m	42	( , , , , , , , , , , , , , , , , , , ,	42	00	Arizona Wildlif	ence 43	00		
2	5	<del>                                      </del>	45	UU	Shelter	46	00		
rad	3	I Didn't Pay Enough Fund 47 00 National Guard Relief Fund			Neighbors	49	00		
Attach required documents in	5 52	Special Olympics					00		
, r	5 54	Estimated payment penalty and MSA withdrawal penalty						4 00	
\#3r	55	Check applicable boxes 551 Annualized/Other 552 Farmer						.	
			6 00						
10	<u>57</u>	Total of lines 42 through 52 and 54							
10413 (10)	98	Direct Deposit of Refund: Check box 57A if your deposit will be ult ROUTING NUMBER ACCOUNT NUMBER				unt; see instructions. 57A			
10,	ADC	98 ACCOUNT NOWBER				C C Checking or Savings			
$\sim$	<u>58</u>	AMOUNT OWED: Add lines 38 and 56. Make check payable to Arizon	na Departm	ent of R	evenue; <b>inclu</b>		58	00	
AL	Pre	Payment enclosed. Check the box and attach your payment	nt to the u	oper le	ft corner of th	nis page.			

rour Name (as snown on page 1)			You	i Social Security No.						
PART A: Dependen	nts and Qualifying F	Parents - do no	ot list vourself	f or spouse						
=	complete Part C, lines C15		-	or opened						
	dependents. If more space i			NO. OF MONT	THE LIVED					
FIRST AND LAST NAME		AL SECURITY NO.	RELATIONSHIP	IN YOUR HON						
TINOTAND LAST NAME	3001/	AL SECONTT NO.	KELAHONGHII	IN TOOK TION	AL IIV 2010					
Δ2 Enter total number of n	ersons listed in A1 here and	on the front of this fo	orm hox 10: also co	mnlete Part C helow	TOTAL	A2				
	the dependents listed above				_	AZ				
A3 a Litter the hames of	the dependents listed above	willo do flot quality a	as your dependent o	il your lederal letur	····					
<b>b</b> Enter dependents lis	h. Enter dependents listed above who were not claimed an your federal return due to education credits:									
b <u>Linter dependents is</u>	Enter dependents listed above who were not claimed on your federal return due to education credits:									
A4 List qualifying parents	and anaastara of your paran	to If more energies	anded attach a sec	narata ahaat						
	List qualifying parents and ancestors of your parents. If more space is needed, attach a separate sheet.									
	You cannot list the same person here and also on line A1. For information on who is a									
<u> </u>	cestor of your parents, see p			NO. OF MONT						
FIRST AND LAST NAME	SOCI	AL SECURITY NO.	RELATIONSHIP	IN YOUR HON	//E IN 2010					
	ersons listed in A4 here and	on the front of this for	orm, box 11		TOTAL	A5				
PART B: Additions					Г		1			
<b>B6</b> Non-Arizona municipal	interest					В6	00			
B7 Ordinary income portion	n of lump-sum distributions e	excluded on your fed	eral return			B7	00			
B8 Total federal depreciation	on. Also see the instructions for	r line C22				B8	00			
B9 Medical savings accour	nt (MSA) distributions. See p	page 7 of the instruction	s			В9	00			
310 I.R.C. §179 expense in	excess of allowable amount	t. Also see the instruct	ions for line C29			B10	00			
311 Other additions to incor	me. See instructions and attach	n your own schedule				B11	00			
	igh B11. Enter here and on the					B12	00			
PART C: Subtraction						'				
	ver. Multiply the number in box 8	2 nage 1 by \$2 100		. C13	00					
	oly the number in box 9, page 1, b				00					
	S. Multiply the number in box 10,			. C15	00					
	parents and ancestors of your				00					
	box 11, page 1, by \$10,000									
·	lines C13 through C16. If y				-					
· •	8 through C30 and enter th			_	r	C17 C18	00			
_	Interest on U.S. obligations such as U.S. savings bonds and treasury bills									
C19 Exclusion for federal, A	rizona state or local governr	nent pensions (up to	\$2,500 per taxpaye	r)		C19	00			
C20 Arizona state lottery wir	nnings included as income o	n your federal return	(up to \$5,000 only)			C20	00			
C21 U.S. Social Security or	Railroad Retirement Act ber	nefits included as inc	ome on your federal	return (the taxable a	amount)	C21	00			
C22 Recalculated Arizona de	epreciation					C22	00			
C23 Certain wages of Ameri	ican Indians					C23	00			
224 Income tax refund from	other states. See instructions	S				C24	00			
	contributions into MSAs. So					C25	00			
	rgy efficient residence. See j					C26	00			
	service as a member of the					C27	00			
						C28	00			
	let operating loss adjustment. See instructions before you enter any amount here									
		,			Г	C29 C30	00			
	rough C29. Enter here and					C30				
•	(s) Used in Prior Ye	ars – it different fro	m name(s) used in d	current year						
D31										
П have read this retu	urn and any attachments wit	h it. Under penalties	of perjury, I declare	that to the best of	my knowled	lge and bel	ief, they are			
true, correct and co	emplete. Declaration of prep	arer (other than taxp	ayer) is based on al	I information of whi	ich preparer	has any kr	nowledge.			
true, correct and co										
YOUR SIGNATURE			DATE	OCCUPATION						
YOUR SIGNATURE  SPOUSE'S SIGNATURE										
	RE		DATE	SPOUSE'S OCCUPA	TION					
PAID PREPARER'S S										
PAID PREPARER'S S	IGNATURE	DATE	FIRM'S NAME	(PREPARER'S IF SE	LF-EMPLOY	ED)				
<b>4</b>			- · · · · · · · · · · · · · · · · · · ·	,		,				
PAID PREPARER'S T	IN PAID PREPARER'S	ADDRESS			PAID PREF	PARER'S PH	ONE NO.			

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode). If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).