

140PY

## Part-Year Resident Personal Income Tax Return

FOR  
CALENDAR YEAR

2012

OR FISCAL YEAR BEGINNING MM/DD/YYYY AND ENDING MM/DD/YYYY.82F ☐ Check box 82F if filing under extension

|                                                                            |  |           |          |                                |                              |                                          |
|----------------------------------------------------------------------------|--|-----------|----------|--------------------------------|------------------------------|------------------------------------------|
| Your First Name and Middle Initial<br><b>1</b>                             |  | Last Name |          | Enter<br>your<br>SSN(s).       | Your Social Security No.     |                                          |
| Spouse's First Name and Middle Initial (if box 4 or 6 checked)<br><b>1</b> |  | Last Name |          |                                | Spouse's Social Security No. |                                          |
| Current Home Address - number and street, rural route<br><b>2</b>          |  |           | Apt. No. | Daytime Phone (with area code) |                              | Home Phone (with area code)<br><b>94</b> |
| City, Town or Post Office<br><b>3</b>                                      |  | State     | Zip Code |                                |                              |                                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                           |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------|--|
| <b>4</b> <input type="checkbox"/> Married filing joint return<br><b>5</b> <input type="checkbox"/> Head of household .....<br><b>6</b> <input type="checkbox"/> Married filing separate return. Enter spouse's name and Social Security No. above.<br><b>7</b> <input type="checkbox"/> Single<br><b>8</b> <input type="checkbox"/> Age 65 or over (you and/or spouse)<br><b>9</b> <input type="checkbox"/> Blind (you and/or spouse)<br><b>10</b> <input type="checkbox"/> Dependents. From page 2, line A2 - do not include self or spouse.<br><b>11</b> <input type="checkbox"/> Qualifying parents and grandparents from page 2, line A5. |  | NAME OF QUALIFYING CHILD OR DEPENDENT<br><b>88</b><br><b>81</b> <b>80</b> |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------|--|

|                                                                                                                                                                                                   |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| <b>12-13 Residency Status (check one):</b> <b>12</b> <input type="checkbox"/> Part-Year Resident Other than Active Military <b>13</b> <input type="checkbox"/> Part-Year Resident Active Military |  |  |  |
| <b>14</b> Federal adjusted gross income (from your federal return) ..... <b>14</b> <b>00</b>                                                                                                      |  |  |  |
| <b>15</b> Arizona income (from page 2, line B19) ..... <b>15</b> <b>00</b>                                                                                                                        |  |  |  |
| <b>16</b> Additions to income (from page 2, line C24) ..... <b>16</b> <b>00</b>                                                                                                                   |  |  |  |
| <b>17</b> Subtractions from income (from page 2, line D36) ..... <b>17</b> <b>00</b>                                                                                                              |  |  |  |
| <b>18 Arizona adjusted gross income:</b> Add lines 15 and 16 then subtract line 17 ..... <b>18</b> <b>00</b>                                                                                      |  |  |  |
| <b>19 Deductions. Check box and enter amount.</b> See instructions, page 16 ..... <b>19</b> <input type="checkbox"/> ITEMIZED <b>19S</b> <input type="checkbox"/> STANDARD                        |  |  |  |
| <b>20</b> Personal exemptions. See page 16 of the instructions ..... <b>20</b> <b>00</b>                                                                                                          |  |  |  |
| <b>21</b> Arizona taxable income: Subtract lines 19 and 20 from line 18. If less than zero, enter zero ..... <b>21</b> <b>00</b>                                                                  |  |  |  |
| <b>22</b> Compute the tax using Tax Table X or Y ..... <b>22</b> <b>00</b>                                                                                                                        |  |  |  |
| <b>23</b> Tax from recapture of credits from Arizona Form 301, Part II, line 35 ..... <b>23</b> <b>00</b>                                                                                         |  |  |  |
| <b>24</b> Subtotal of tax: Add lines 22 and 23 ..... <b>24</b> <b>00</b>                                                                                                                          |  |  |  |
| <b>25</b> Family income tax credit from worksheet on pages 17 and 18 of the instructions ..... <b>25</b> <b>00</b>                                                                                |  |  |  |
| <b>26</b> Credits from Arizona Form 301, Part II, line 68, or Forms 310, 321, 322 and 323, if Form 301 is not required ..... <b>26</b> <b>00</b>                                                  |  |  |  |
| <b>27</b> Credit type: Enter form number of each credit claimed ..... <b>27</b> <b>3</b> <b>3</b> <b>3</b> <b>3</b>                                                                               |  |  |  |
| <b>28</b> Clean Elections Fund Tax Credit for donations made prior to August 2, 2012 (from worksheet on page 20 of the instructions) ..... <b>28</b> <b>00</b>                                    |  |  |  |
| <b>29 Balance of tax:</b> Subtract lines 25, 26 and 28 from line 24. If the sum of lines 25, 26 and 28 is more than line 24, enter zero ..... <b>29</b> <b>00</b>                                 |  |  |  |
| <b>30</b> Arizona income tax withheld during 2012 ..... <b>30</b> <b>00</b>                                                                                                                       |  |  |  |
| <b>31</b> Arizona estimated tax payments for 2012 ..... <b>31</b> <b>00</b>                                                                                                                       |  |  |  |
| <b>32</b> 2012 Arizona extension payment (Form 204) ..... <b>32</b> <b>00</b>                                                                                                                     |  |  |  |
| <b>33</b> Increased Excise Tax Credit: From worksheet on page 20 of the instructions ..... <b>33</b> <b>00</b>                                                                                    |  |  |  |
| <b>34</b> Other refundable credits: Check the box(es) and enter the amount ..... <b>34</b> <b>00</b>                                                                                              |  |  |  |
| <b>35 Total payments/refundable credits:</b> Add lines 30 through 34 ..... <b>35</b> <b>00</b>                                                                                                    |  |  |  |
| <b>36 TAX DUE:</b> If line 29 is larger than line 35, subtract line 35 from line 29, and enter amount of tax due. Skip lines 37, 38 and 39 ..... <b>36</b> <b>00</b>                              |  |  |  |
| <b>37 OVERPAYMENT:</b> If line 35 is larger than line 29, subtract line 29 from line 35, and enter amount of overpayment ..... <b>37</b> <b>00</b>                                                |  |  |  |
| <b>38</b> Amount of line 37 to be applied to 2013 estimated tax ..... <b>38</b> <b>00</b>                                                                                                         |  |  |  |
| <b>39</b> Balance of overpayment: Subtract line 38 from line 37 ..... <b>39</b> <b>00</b>                                                                                                         |  |  |  |

|                                                                                                                                                                                                                                                                                                  |                                                      |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--|--|
| <b>40 - 49 Voluntary Gifts to:</b>                                                                                                                                                                                                                                                               |                                                      |  |  |
| Aid to Education ..... <b>40</b> <b>00</b>                                                                                                                                                                                                                                                       | Arizona Wildlife ..... <b>41</b> <b>00</b>           |  |  |
| Child Abuse Prevention ..... <b>42</b> <b>00</b>                                                                                                                                                                                                                                                 | Domestic Violence Shelter ..... <b>43</b> <b>00</b>  |  |  |
| I Didn't Pay Enough Fund ..... <b>44</b> <b>00</b>                                                                                                                                                                                                                                               | National Guard Relief Fund ..... <b>45</b> <b>00</b> |  |  |
| Neighbors Helping Neighbors ..... <b>46</b> <b>00</b>                                                                                                                                                                                                                                            | Special Olympics ..... <b>47</b> <b>00</b>           |  |  |
| Veterans' Donations Fund ..... <b>48</b> <b>00</b>                                                                                                                                                                                                                                               | Political Gift ..... <b>49</b> <b>00</b>             |  |  |
| <b>50</b> Voluntary Political Gift (check only one): <b>501</b> <input type="checkbox"/> Americans Elect <b>502</b> <input type="checkbox"/> Democratic <b>503</b> <input type="checkbox"/> Green <b>504</b> <input type="checkbox"/> Libertarian <b>505</b> <input type="checkbox"/> Republican |                                                      |  |  |
| <b>51</b> Estimated payment penalty and MSA withdrawal penalty ..... <b>51</b> <b>00</b>                                                                                                                                                                                                         |                                                      |  |  |
| <b>52</b> Check applicable boxes: <b>521</b> <input type="checkbox"/> Annualized/Other <b>522</b> <input type="checkbox"/> Farmer or Fisherman <b>523</b> <input type="checkbox"/> Form 221 attached <b>524</b> <input type="checkbox"/> MSA Penalty                                             |                                                      |  |  |
| <b>53</b> Total of lines 40 through 49 and 51 ..... <b>53</b> <b>00</b>                                                                                                                                                                                                                          |                                                      |  |  |
| <b>54</b> REFUND: Subtract line 53 from line 39. If less than zero, enter amount owed on line 55 ..... <b>54</b> <b>00</b>                                                                                                                                                                       |                                                      |  |  |
| <b>Direct Deposit of Refund: Check box 54A</b> if your deposit will be ultimately placed in a foreign account; see instructions ..... <b>54A</b> <input type="checkbox"/>                                                                                                                        |                                                      |  |  |
| <b>ROUTING NUMBER</b> <b>98</b> <b>ACCOUNT NUMBER</b> <b>C</b> <input type="checkbox"/> Checking or <b>S</b> <input type="checkbox"/> Savings                                                                                                                                                    |                                                      |  |  |
| <b>55</b> AMOUNT OWED: Add lines 36 and 53. Make check payable to Arizona Department of Revenue; include SSN on payment ..... <b>55</b> <b>00</b>                                                                                                                                                |                                                      |  |  |

Your Name (as shown on page 1)

Your Social Security No.

**A1** List children and other dependents. Do not list yourself or spouse. If more space is needed, attach a separate sheet.

FIRST AND LAST NAME

SOCIAL SECURITY NO.

RELATIONSHIP

NO. OF MONTHS LIVED  
IN YOUR HOME IN 2012

**A2** Enter total number of persons listed in A1 here and on the front of this form, box 10..... TOTAL

**A2**

**A3 a** Enter the names of the dependents listed above who do not qualify as your dependent on your federal return:

**b** Enter dependents listed above who were not claimed on your federal return due to education credits:

**A4** List qualifying parents and grandparents. 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 qualifying parent or grandparent, see page 5 of the instructions.

FIRST AND LAST NAME

SOCIAL SECURITY NO.

RELATIONSHIP

NO. OF MONTHS LIVED  
IN YOUR HOME IN 2012

**A5** Enter total number of persons listed in A4 here and on the front of this form, box 11..... TOTAL

**A5**

**B6** Dates of Arizona residency: From MM/DD/YYYY to MM/DD/YYYY  
List other state(s) of residency: \_\_\_\_\_

2012 FEDERAL  
Amount from Federal Return2012 ARIZONA  
Amount Only

**B7** Wages, salaries, tips, etc. ....

**B7**

00

00

**B8** Interest.....

**B8**

00

00

**B9** Dividends.....

**B9**

00

00

**B10** Arizona income tax refunds.....

**B10**

00

00

**B11** Alimony received.....

**B11**

00

00

**B12** Business income (or loss) from federal Schedule C.....

**B12**

00

00

**B13** Gains (or losses) from federal Schedule D.....

**B13**

00

00

**B14** Rents, royalties, partnerships, estates, trusts, small business corporations from federal Schedule E.....

**B14**

00

00

**B15** Other income reported on your federal return.....

**B15**

00

00

**B16** Total income: Add lines B7 through B15.....

**B16**

00

00

**B17** Federal adjustments. Attach your own schedule.....

**B17**

00

00

**B18** Federal adjusted gross income: Subtract line B17 from line B16 in the FEDERAL column.....

**B18**

00

**B19** Arizona income: Subtract line B17 from line B16 in the ARIZONA column. Enter here and on the front of this form, line 15.....

**B19**

00

00

**B20** Arizona percentage: Divide line B19 by line B18, and enter the result (not over 100%).....

**B20**

%

**C21** I.R.C. §179 expense in excess of allowable amount. Also see the instructions for line D34.....

**C21**

00

00

**C22** Total depreciation included in Arizona gross income.....

**C22**

00

00

**C23** Other additions to income: See instructions and attach your own schedule.....

**C23**

00

00

**C24** Total: Add lines C21 through C23. Enter here and on the front of this form on line 16.....

**C24**

00

00

**D25** Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100.....

**D25**

00

**D26** Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500.....

**D26**

00

**D27** Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300.....

**D27**

00

**D28** Exemption: Qualifying parents and grandparents. Multiply the number in box 11, page 1, by \$10,000.....

**D28**

00

**D29** Total exemptions: Add lines D25 through D28.....

**D29**

00

**D30** Multiply line D29 by the percentage on line B20, and enter the result.....

**D30**

00

00

**D31** Interest on U.S. obligations such as U.S. savings bonds and treasury bills included in the ARIZONA column.....

**D31**

00

00

**D32** Arizona state lottery winnings included on line B15 in the ARIZONA column (up to \$5,000 only).....

**D32**

00

00

**D33** U.S. Social Security or Railroad Retirement Act benefits included in your ARIZONA income.....

**D33**

00

00

**D34** Adjustment for I.R.C. §179 expense not allowed.....

**D34**

00

00

**D35** Other subtractions from income: See instructions and attach your own schedule.....

**D35**

00

00

**D36** Total: Add lines D30 through D35. Enter here and on the front of this form, line 17.....

**D36**

00

00

**E37** Last name(s) used in prior years – if different from name(s) used in current year: \_\_\_\_\_

PLEASE SIGN HERE

I have read this return and any attachments 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

OCCUPATION

SPOUSE'S SIGNATURE

DATE

SPOUSE'S OCCUPATION

PAID PREPARER'S SIGNATURE

DATE

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

PAID PREPARER'S TIN

PAID PREPARER'S ADDRESS

PAID PREPARER'S PHONE NO.

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

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.