## **ARIZONA FORM** 140EZ

## Resident Personal Income Tax Return (EZ Form) Do not use this form if you are claiming estimated payments.

2005

ii you are claiming estimated payments, use Arizona Form 140.								
YOUR FIRST NAME AND INITIAL  1			LAST NAME	YOUR SO			OCIAL SECURITY NO.	
IF A JOINT RETURN, SPOUSE'S FIRST NAME AND INITIAL			SPOUSE SPOUSE		SPOUSE'S	SE'S SOCIAL SECURITY NO.		
PRESENT HOME ADDRESS - NUMBER AND STREET, RURAL ROUTE APT. NO. DAYTIME PHONE WITH AREA CODE  2					↑ IMPORTANT ↑ You must enter your SSNs.			
HON 2	ЛЕ AD	DRESS CONTINUED	HOME PHONE WITH AREA CODE		_			
CITY, TOWN OR POST OFFICE STATE ZIP CODE 82 CHECK ONE if filing under an extension:								
3			4 month extension82D				82D 🔲	
	_	ING STATUS: Check one box.	6 month extension				82F	
		FOR DOR USE ONLY						
	4	4 Married filing joint return						
	5	☐ Single						
نے		5 -	-					
of the return		88						
9								
fth			81	80				
0	6	Federal adjusted gross income from your federal return				6		
ag		Standard deduction and personal exemption. If you check			you			
it b		checked filing status box 5, enter \$6,225						
<u>as</u>	8	8 Arizona taxable income. Subtract line 7 from line 6. If less than zero, enter zero						
o	9 Amount of tax from Optional Tax Rate Tables					9		
açk	<b>10</b> Clean Elections Fund Tax Reduction. See instructions page 4. ₁₀1☐ YOURSELF ₁₀2☐ SPOUSE					11		
þí	12 Reduced tax. Subtract line 11 from line 9					12		
2 tc	13 Family income tax credit from worksheet on page 5 of instructions					13 14		
>		14 Clean Elections Fund Tax Credit from worksheet on page 5 of the instructions						
Attach W-2 to back of last page	15	5 Balance of tax. Subtract lines 13 and 14 from line 12. If the sum of lines 13 and 14 is more than				4.5		
tta	16	line 12, enter zero				15		
•		Amount paid with 2005 Arizona extension request (Form 20				<u> </u>		
뀚		Increased Excise Tax Credit from worksheet on page 6 of t						
뽀		Total payments/credits. Add lines 16 through 18				19		
느		OVERPAYMENT. If line 19 is larger than line 15, subtract line 15 from line 19.				20		
MENT HERE.	21	1 VOLUNTARY CONTRIBUTION TO THE CITIZENS CLEAN ELECTIONS FUND:						
_		See page 6 of instructions. If making a contribution, check	this box: ₂₁ <b>A1</b> □ and					
РА		enter the amount		21				
АТТАСН РАҮ	22	2 REFUND. Subtract line 21 from line 20. If less than zero, enter amount owed on line 23				22		
ΤĀ		98 ROUTING NUMBER ACCOUNT NUMBER		c_Che	cking or			
AT	23	3 AMOUNT OWED. If line 15 is larger than line 19, subtract line 19 from line 15, and enter the						
	_	amount owed. Make check payable to Arizona Department of Revenue; include SSN on payment.						
		Payment enclosed. Check the box and attach paym				,	'	
	24	Last name(s) used in prior years if different from name(s) u	used in current year:					
							5.44	
I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my known true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which produces the second complete.						ge and belie has any kno	et, they are owledge.	
쁘								
		YOUR SIGNATURE	DATE					
SIGN HERE	<b>→</b>	SPOUSE'S SIGNATURE	DATE					
		OF OUDE O SIGNATURE	DATE					
LEASE		PAID PREPARER'S SIGNATURE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)						
P		PAID PREPARER'S TIN DATE PA	AID PREPARER'S ADDRESS					
16.		re conding a nayment with this return, mail to Arizona Department of Peven	PO D F0040 Pl 47 0	25070.0040				

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.