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

Subtractions – cont. from page 1

42	Enter the amount from page 1, line 41	42	00
43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills	43	00
44	Arizona state lottery winnings included as income on your federal return (up to $5,000 only)	44	00
45	Agricultural crops contributed to Arizona charitable organizations	45	00
46	Other subtractions: See instructions and include your own schedule	46	00

Exemptions

47	Age 65 or over: Multiply the number in box 8 by $2,100	47	00	
48	Blind: Multiply the number in box 9 by $1,500	48	00	
49	Dependents: Multiply the number in box 10 by $2,300	49	00	
50	Add lines 47, 48, and 49 and enter the total	50	00	
51	Multiply line 50 by the Arizona ratio on line 27	51		00
52	**Arizona adjusted gross income:** Subtract lines 43 through 46 and 51 from line 42	52		00

Balance of Tax

53	**Deductions:** ***Check box and enter amount.*** See instructions 53I ☐ **ITEMIZED** 53S ☐ **STANDARD**	53	00
54	Personal exemptions: See instructions	54	00
55	Arizona taxable income: Subtract lines 53 and 54 from line 52	55	00
56	Compute the tax using amount from line 55 and Tax Table X or Y	56	00
57	Tax from recapture of credits from Arizona Form 301, Part 2, line 40	57	00
58	Subtotal of tax: Add lines 56 and 57 and enter the total	58	00
59	Credits from Arizona Form 301, Part 2, line 76	59	00
60	**Balance of tax:** Subtract line 59 from line 58. If line 59 is more than line 58, enter zero	60	00

Total Payments and Refundable Credits

61	Arizona income tax withheld during 2015	61	00
62	Arizona estimated tax payments for 2015	62	00
63	2015 Arizona extension payment (Form 204)	63	00
64	Other refundable credits: Check the box(es) and enter the total amount 641 ☐ 308-I 642 ☐ 342 643 ☐ 349	64	00
65	**Total payments and refundable credits:** Add lines 61 through 64 and enter the total	65	00

Tax Due or Overpayment

66	**TAX DUE:** If line 60 is larger than line 65, subtract line 65 from line 60, and enter amount of tax due. Skip lines 67, 68 and 69	66	00
67	**OVERPAYMENT:** If line 65 is larger than line 60, subtract line 60 from line 65, and enter amount of overpayment	67	00
68	Amount of line 67 to be applied to 2016 estimated tax	68	00
69	Balance of overpayment: Subtract line 68 from line 67	69	00

Voluntary Gifts

70 - 79 Voluntary Gifts to:

Solutions Teams Assigned to Schools	70		00	Arizona Wildlife	71		00
Child Abuse Prevention	72		00	Domestic Violence Shelter	73		00	Political Gift	74		00
Neighbors Helping Neighbors	75		00	Special Olympics	76		00	Veterans' Donations Fund	77		00
I Didn't Pay Enough Fund	78		00	Sustainable State Parks and Road Fund	79		00				

80 Political Party (if amount is entered on line 74 - check only one): 801 ☐ Americans Elect 802 ☐ AZ Green Party 803 ☐ Democratic 804 ☐ Libertarian 805 ☐ Republican

Penalty

81	Estimated payment penalty and Arizona Long-Term Health Care Saving Account (AZLTHSA) penalty	81	00
82	821 ☐ Annualized/Other 822 ☐ Farmer or Fisherman 823 ☐ Form 221 included 824 ☐ AZLTHSA Penalty		
83	Add lines 70 through 79 and 81; enter the total	83	00

Refund or Amount Owed

84	**REFUND:** Subtract line 83 from line 69. If less than zero, enter amount owed on line 85	84	00
	Direct Deposit of Refund: ***Check box 84A*** if your deposit will be ultimately placed in a **foreign account**; see instructions. 84A ☐		
	98 ROUTING NUMBER ____ ACCOUNT NUMBER ____ C ☐ Checking or S ☐ Savings		
85	**AMOUNT OWED:** Add lines 66 and 83. Make check payable to Arizona Department of Revenue; write your SSN on payment	85	00

PLEASE SIGN HERE

Under penalties of perjury, I declare that I have read this return and any documents with it, and 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 STREET ADDRESS ____ PAID PREPARER'S TIN ____

PAID PREPARER'S CITY ____ STATE ____ ZIP CODE ____ ( ) PAID PREPARER'S PHONE 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 140NR.

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.