

82F ☐ Check box 82F if filing under extension OR FISCAL YEAR BEGINNING MM/DD/2020 AND ENDING MM/DD/20YY ☐ 66F

Your First Name and Middle Initial **1** **YOUR NAME** Last Name **HERE** Enter your SSN(s). Your Social Security Number **111 22 3333**

Spouse's First Name and Middle Initial (if box 4 or 6 checked) **1** Last Name Spouse's Social Security No.

Current Home Address - number and street, rural route **2** **PO BOX 1** Apt. No. Daytime Phone (with area code) **94**

City, Town or Post Office State ZIP Code Last Names Used in Last Four Prior Year(s) (if different) **3** **CITY AZ ZIP** **97**

EXEMPTIONS FILING STATUS	4	<input type="checkbox"/> Married filing joint return	4a	<input type="checkbox"/> Injured Spouse Protection of Joint Overpayment	REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88
	5	<input type="checkbox"/> Head of household. Enter name of qualifying child or dependent on next line: _____			
	6	<input type="checkbox"/> Married filing separate return. Enter spouse's name and Social Security Number above.			
	7	<input checked="" type="checkbox"/> Single			
	↓ Enter the number claimed. Do not put a check mark.				
EXEMPTIONS	8	<input type="checkbox"/> Age 65 or over (you and/or spouse)	If completing lines 8, 9, and 11a, also complete lines 38, 39, and 41. For lines 10a and 10b, also complete line 49.		81 PM 80 RCVD
	9	<input type="checkbox"/> Blind (you and/or spouse)			
	10a	<input type="checkbox"/> Dependents: Under age of 17.	10b	<input type="checkbox"/> Dependents: Age 17 and over.	
	11a	<input type="checkbox"/> Qualifying parents and grandparents			

(Box 10a and 10b): Dependent Information. See instructions. For more space, check the box ☐ and complete page 4, Part 1.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2020	(e) Dependent Age included in: 1 (Box 10a) 2 (Box 10b)	(f) if you did not claim this person on your federal return due to educational credits
10c					<input type="checkbox"/>	<input type="checkbox"/>
10d					<input type="checkbox"/>	<input type="checkbox"/>
10e					<input type="checkbox"/>	<input type="checkbox"/>

(Box 11a): Qualifying parents and grandparents. See instructions. For more space, check the box ☐ and complete page 4, Part 2.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2020	(e) IF AGE 65 OR OVER	(f) IF DIED IN 2020
11b					<input type="checkbox"/>	<input type="checkbox"/>
11c					<input type="checkbox"/>	<input type="checkbox"/>

12	Federal adjusted gross income (from your federal return)	12	27,800	00
13	Non-Arizona municipal interest	13		00
14	Partnership Income adjustment: See instructions	14		00
15	Total federal depreciation	15		00
16	Net capital (loss) derived from the exchange of legal tender: See instructions	16		00
17	Other Additions to Income: Complete <i>Adjustments to Arizona Gross Income</i> schedule on page 5	17		00
18	Subtotal: Add lines 12 through 17 and enter the total	18	27,800	00
19	Total net capital gain or (loss): See instructions	19	00	
20	Total net short-term capital gain or (loss): See instructions	20	00	
21	Total net long-term capital gain or (loss): See instructions	21	00	
22	Net long-term capital gain from assets acquired <i>after</i> December 31, 2011. See instructions.	22	00	
23	Multiply line 22 by 25% (.25) and enter the result	23		00
24	Net capital gain derived from investment in qualified small business	24		00
25	Net capital gain derived from the exchange of legal tender: See instructions	25		00
26	Recalculated Arizona depreciation	26		00
27	Partnership Income adjustment: See instructions	27		00
28	Interest on U.S. obligations such as U.S. savings bonds and treasury bills	28		00
29a	Exclusions for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)	29a		00
29b	Benefits, annuities and pensions for retired/retainer pay of the uniformed services (up to \$3,500 per taxpayer)	29b		00
30	U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (taxable amount)	30		00
31	Certain wages of American Indians	31		00
32	Pay received for active service as a member of the reserves, national guard or the U.S. armed forces	32		00
33	Net operating loss adjustment: See instructions	33		00
34	Contributions to 529 College Savings Plans	34		00
35	Subtract lines 23 through 34 from line 18. Enter the difference	35	27,800	00

Your Name (as shown on page 1)

YOUR NAME HERE

Your Social Security Number

111-22-3333

Exemptions	36	Other Subtractions from Income. Complete <i>Adjustments to Arizona Gross Income</i> schedule on page 5.....	36		00																																										
	37	Subtract line 36 from line 35 and enter the difference.....	37	27,800	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																																										
	40	Other Exemptions. See instructions.....40E <input type="checkbox"/> Multiply the number in box 40E by \$2,300.....	40		00																																										
Balance of Tax	41	Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000.....	41		00																																										
	42	Arizona adjusted gross income: Subtract lines 38 through 41 from line 37. If less than zero, enter "0".....	42	27,800	00																																										
	43	Deductions: Check box and enter amount. See instructions..... 43I <input type="checkbox"/> ITEMIZED... 43S <input checked="" type="checkbox"/> STANDARD	43	12,400	00																																										
	44	If you checked box 43S and claim charitable deductions, check 44C <input type="checkbox"/> Complete page 3. See instructions.....	44		00																																										
	45	Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0".....	45	15,400	00																																										
	46	Compute the tax using amount on line 45 and Tax Table X, Y or Optional Tax Tables.....	46	400	00																																										
	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 31.....	47	0	00																																										
	48	Subtotal of tax: Add lines 46 and 47 and enter the total.....	48	400	00																																										
	49	Dependent Tax Credit. See instructions.....	49	0	00																																										
	50	Family income tax credit (from the worksheet - see instructions).....	50		00																																										
Total Payments and Refundable Credits	51	Nonrefundable Credits from Arizona Form 301, Part 2, line 61.....	51	400	00																																										
	52	Balance of tax: Subtract lines 49, 50 and 51 from line 48. If the sum of lines 49, 50 and 51 is greater than line 48, enter "0".....	52	0	00																																										
	53	2020 AZ income tax withheld.....	53	400	00																																										
	54	2020 AZ estimated tax payments.. 54a <input type="text"/> 00 Claim of Right 54b <input type="text"/> 00 Add 54a and 54b..	54c		00																																										
	55	2020 AZ extension payment (Form 204).....	55		00																																										
	56	Increased Excise Tax Credit (from the worksheet - see instructions).....	56		00																																										
	57	Property Tax Credit from Arizona Form 140PTC.....	57		00																																										
	58	Other refundable credits: Check the box(es) and enter the total amount..... 581 <input type="checkbox"/> 308-I 582 <input type="checkbox"/> 349	58		00																																										
	59	Total payments and refundable credits: Add lines 53 through 58 and enter the total.....	59	400	00																																										
	60	TAX DUE: If line 52 is larger than line 59, subtract line 59 from line 52 and enter amount of tax due. Skip lines 61, 62 and 63.....	60		00																																										
Tax Due or Overpayment	61	OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59 and enter amount of overpayment.....	61	400	00																																										
	62	Amount of line 61 to be applied to 2021 estimated tax.....	62		00																																										
	63	Balance of overpayment: Subtract line 62 from line 61 and enter the difference.....	63	400	00																																										
Voluntary Gifts	64 - 74 Voluntary Gifts to: <table border="1"> <tr> <td>Solutions Teams Assigned to Schools..... 64</td> <td></td> <td>00</td> <td>Arizona Wildlife..... 65</td> <td></td> <td>00</td> </tr> <tr> <td>Child Abuse Prevention..... 66</td> <td></td> <td>00</td> <td>Domestic Violence Services..... 67</td> <td></td> <td>00</td> </tr> <tr> <td>Neighbors Helping Neighbors.. 69</td> <td></td> <td>00</td> <td>Special Olympics..... 70</td> <td></td> <td>00</td> </tr> <tr> <td>I Didn't Pay Enough Fund..... 72</td> <td></td> <td>00</td> <td>Sustainable State Parks and Road Fund..... 73</td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Political Gift..... 68</td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Veterans' Donations Fund..... 71</td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Spay/Neuter of Animals.. 74</td> <td></td> <td>00</td> </tr> </table>					Solutions Teams Assigned to Schools..... 64		00	Arizona Wildlife..... 65		00	Child Abuse Prevention..... 66		00	Domestic Violence Services..... 67		00	Neighbors Helping Neighbors.. 69		00	Special Olympics..... 70		00	I Didn't Pay Enough Fund..... 72		00	Sustainable State Parks and Road Fund..... 73		00				Political Gift..... 68		00				Veterans' Donations Fund..... 71		00				Spay/Neuter of Animals.. 74		00
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				Veterans' Donations Fund..... 71		00																																									
				Spay/Neuter of Animals.. 74		00																																									
75	Political Party (if amount is entered on line 68 - check only one): 751 <input type="checkbox"/> Democratic 752 <input type="checkbox"/> Libertarian 753 <input type="checkbox"/> Republican																																														
76	Estimated payment penalty..... 76																																														
77	771 <input type="checkbox"/> Annualized/Other 772 <input type="checkbox"/> Farmer or Fisherman 773 <input type="checkbox"/> Form 221 included																																														
78	Add lines 64 through 74 and 76; enter the total..... 78																																														
79	REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80..... 79																																														
79A	Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a foreign account ; see instructions. 79A <input type="checkbox"/>																																														
80	AMOUNT OWED: Add lines 60 and 78. Make check payable to Arizona Department of Revenue; write your SSN on payment; and include with your return..... 80																																														

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

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.

Include with your return.

For the calendar year 2020 or fiscal year beginning MM/DD/2020 and ending MM/DD/YYYY.

Your Name as shown on Form 140, 140PY, 140NR or 140X

YOUR NAME HERE

Your Social Security Number

111-22-3333

Spouse's Name as shown on Form 140, 140PY, 140NR or 140X (if a joint return)

Spouse's Social Security Number

Part 1 Nonrefundable Individual Tax Credits Available: Enter total available tax credits.

		(a) Current Year Credit	(b) Available Carryover	(c) Total Available Credit (a) + (b)	
1	Military Reuse Zone Credit..... Form 306 ▶	1			00
2	Credit for Increased Research Activities – Individuals..... Form 308-I ▶	2			00
3	Credit for Taxes Paid to Another State or Country..... Form 309 ▶	3			00
4	Credit for Solar Energy Devices..... Form 310 ▶	4			00
5	Agricultural Water Conservation System Credit..... Form 312 ▶	5			00
6	Pollution Control Credit..... Form 315 ▶	6			00
7	Credit for Solar Hot Water Heater Plumbing Stub Outs and Electric Vehicle Recharge Outlets..... Form 319 ▶	7			00
8	Credit for Employment of TANF Recipients..... Form 320 ▶	8			00
9	Credit for Contributions to Qualifying Charitable Organizations.. Form 321 ▶	9	400	400	00
10	Credit for Contributions Made or Fees Paid to Public Schools.... Form 322 ▶	10			00
11	Credit for Contributions to Private School Tuition Organizations Form 323 ▶	11			00
12	Agricultural Pollution Control Equipment Credit..... Form 325 ▶	12			00
13	Credit for Donation of School Site..... Form 331 ▶	13			00
14	Credit for Employment by Healthy Forest Enterprises..... Form 332 ▶	14			00
15	Credit for Employing National Guard Members..... Form 333 ▶	15			00
16	Credit for Business Contributions by an S Corporation to School Tuition Organization - Individual..... Form 335-I ▶	16			00
17	Credit for Solar Energy Devices – Commercial and Industrial Applications..... Form 336 ▶	17			00
18	Credit for Investment in Qualified Small Businesses..... Form 338 ▶	18			00
19	Credit for Donations to the Military Family Relief Fund..... Form 340 ▶	19			00
20	Credit for Business Contributions by an S Corporation to School Tuition Organizations for Displaced Students or Students with Disabilities - Individual..... Form 341-I ▶	20			00
21	Renewable Energy Production Tax Credit..... Form 343 ▶	21			00
22	Credit for New Employment..... Form 345 ▶	22			00
23	Additional Credit for Increased Research Activities for Basic Research Payments..... Form 346 ▶	23			00
24	Credit for Contributions to Certified School Tuition Organization (for contributions that exceed the allowable credit on Arizona Form 323). Form 348 ▶	24			00
25	Credit for Contributions to Qualifying Foster Care Charitable Organizations..... Form 352 ▶	25			00
26	Reserved for future use.....	26			
27	Total available nonrefundable tax credits: Add lines 1 through 25.....	27		400	00

Continued on page 2 ➔



You must include Form 301 and the corresponding credit form(s) for which you computed your credit(s) with your individual income tax return.

Your Name (as shown on page 1) YOUR NAME HERE	Your Social Security Number 111-22-3333
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Part 2 Application of Tax Credits and Recapture: Enter tax, recapture tax, and tax credits used this taxable year.

28 Tax from Form 140, line 46; or Form 140PY, line 56; or Form 140NR, line 56; or Form 140X, line 35	28	400	00
29 Tax from recapture of Credits for Healthy Forest Enterprises from Form 332, Part 9, line 39, and Part 10, line 45.....	29		00
30 Tax from recapture of Credit for Qualified Facilities from Form 349, Part 7, line 19.....	30		00
31 Recapture Total: Add lines 29 and 30. Enter here and on Form 140, line 47; or Form 140PY, line 57; or Form 140NR, line 57; or Form 140X, line 36.....	31		00
32 Subtotal: Add lines 28 and 31.....	32	400	00
33 Family Income Tax Credit from Form 140, line 50; or Form 140PY, line 60; or Form 140X, line 38a; <i>plus</i> Dependent Tax Credit from Form 140, line 49; or Form 140PY, line 59; or Form 140NR, line 59; or Form 140X, box 38b	33		00
34 Subtract line 33 from line 32. Enter the difference. If less than zero, enter "0"	34	400	00

Nonrefundable Tax Credits Used This Taxable Year: Enter amounts actually used from Part 1.

35 Military Reuse Zone Credit.....Form 306 ▶	35		00
36 Credit for Increased Research Activities – Individuals.....Form 308-I ▶	36		00
37 Credit for Taxes Paid to Another State or Country.....Form 309 ▶	37		00
38 Credit for Solar Energy DevicesForm 310 ▶	38		00
39 Agricultural Water Conservation System CreditForm 312 ▶	39		00
40 Pollution Control CreditForm 315 ▶	40		00
41 Credit for Solar Hot Water Heater Plumbing Stub Outs and Electric Vehicle Recharge OutletsForm 319 ▶	41		00
42 Credit for Employment of TANF Recipients.....Form 320 ▶	42		00
43 Credit for Contributions to Qualifying Charitable Organizations.....Form 321 ▶	43	400	00
44 Credit for Contributions Made or Fees Paid to Public Schools.....Form 322 ▶	44		00
45 Credit for Contributions to Private School Tuition Organizations.....Form 323 ▶	45		00
46 Agricultural Pollution Control Equipment CreditForm 325 ▶	46		00
47 Credit for Donation of School SiteForm 331 ▶	47		00
48 Credit for Employment by Healthy Forest EnterprisesForm 332 ▶	48		00
49 Credit for Employing National Guard Members.....Form 333 ▶	49		00
50 Credit for Business Contribution by an S Corporation to School Tuition Organization - IndividualForm 335-I ▶	50		00
51 Credit for Solar Energy Devices – Commercial and Industrial ApplicationsForm 336 ▶	51		00
52 Credit for Investment in Qualified Small Businesses.....Form 338 ▶	52		00
53 Credit for Donations to the Military Family Relief Fund: Enter the smaller of Form 301, Part 1, line 19 or Part 2, line 32.....Form 340 ▶	53		00
54 Credit for Business Contributions by an S Corporation to School Tuition Organizations for Displaced Students or Students with Disabilities - Individual..Form 341-I ▶	54		00
55 Renewable Energy Production Tax Credit.....Form 343 ▶	55		00
56 Credit for New Employment.....Form 345 ▶	56		00
57 Additional Credit for Increased Research Activities for Basic Research Payments..Form 346 ▶	57		00
58 Credit for Contributions to Certified School Tuition Organization (for contributions that exceed the maximum allowable credit on Arizona Form 323) ..Form 348 ▶	58		00
59 Credit for Contributions to Qualifying Foster Care Charitable Organizations.....Form 352 ▶	59		00
60 Reserved for future use.....	60		
61 Total Tax Credits Used: Add lines 35 through 59. Total cannot be more than line 34. Enter this amount on Form 140, line 51; or Form 140PY, line 61; or Form 140NR, line 60; or Form 140X, line 39.....	61	400	00

Include with your return.

For the calendar year 2020 or fiscal year beginning MM, DD, 2020 and ending MM, DD, YYYY.

Your Name as shown on Form 140, 140NR, 140PY or 140X

YOUR NAME HERE

Your Social Security Number

111-22-3333

Spouse's Name as shown on Form 140, 140NR, 140PY or 140X (if joint return)

Spouse's Social Security Number

Part 1 Current Year's Credit**A. Cash contributions made January 1, 2020, through December 31, 2020.**

- The charitable organization must be certified by the department **for 2020** to claim the contributions listed in Section A.

For more information, see page 1 of the instructions.

- If you are married and filing separate returns, be sure to include **all** cash contributions made by you and your spouse.
- Do **not** include those cash contributions for which you or your spouse claimed a credit on the 2019 tax return.
- If you made cash contributions to more than three qualifying charitable organizations, complete the Continuation Sheet on page 3 and include it with the credit form.

	(a) Qualifying Charity Code	(b) Name of Qualifying Charity (Contributions to qualifying foster care charitable organizations are claimed on AZ Form 352)	(c) Cash Contribution	
1	<u>21041</u>	HOPE FOR ADDICTION, INC	400	00
2	<u> </u>			00
3	<u> </u>			00
4	If you made contributions to more than three qualifying charitable organizations, enter the amount from line 4h of the Continuation Sheet, otherwise enter "0"		4	00
5	Total contributions made to qualifying charitable organizations during 2020: Add lines 1 through 4, column (c).....		5	400 00

B. Cash contributions made January 1, 2021, through April 15, 2021, for which you or your spouse are claiming a credit on the 2020 tax return.

- The charitable organization must be certified by the department **for 2021** to claim the contributions listed in Section B.

For more information, see page 1 of the instructions.

- If you are married and filing separate returns, be sure to include **all** cash contributions made by you and your spouse.
- If you made cash contributions to more than three qualifying charitable organizations, complete the Continuation Sheet on page 3 and include it with the credit form.

	(a) Qualifying Charity Code	(b) Name of Qualifying Charity (Contributions to qualifying foster care charitable organization are claimed on AZ Form 352)	(c) Cash Contribution	
6	<u> </u>			00
7	<u> </u>			00
8	<u> </u>			00
9	If you made contributions to more than three qualifying charitable organizations, enter the amount from line 9h of the Continuation Sheet, otherwise enter "0"		9	00
10	Total contributions made to qualifying charitable organizations January 1, 2021, through April 15, 2021, for which you are claiming a credit on the 2020 tax return: Add lines 6 through 9, column (c) . .		10	00
11	Add lines 5 and 10. Enter the total.		11	400 00
12	Single taxpayers or heads of household, enter \$400. Married taxpayers, enter \$800.		12	400 00
13	Total current year's credit: Enter the smaller of line 11 or line 12. In most cases, if you are married filing a separate return, enter one-half of the smaller of line 11 or line 12. See instructions.		13	400 00

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