Resident Personal Income Tax Return
FOR
CALENDAR YEAR
OR FISCAL YEAR BEGINNING $M, M, D, D 1 Y, Y, Y, Y$ I $A N D ~ E N D I N ~$ $\qquad$ 66
2012
82F $\square$ Check box 82F if filing under extension


47 Voluntary Gifts to:


48 Voluntary Political Gift (check only one): 481 $\square$ Americans Elect $482 \square$ Democratic $483 \square$ Green $484 \square$ Libertarian $485 \square$ Republican
49 Estimated payment penalty and MSA withdrawal penalty
$\square$ Farmer or Fisherman $503 \square$ Form 221 attached $504 \square$ MSA Penalty
50 Check applicable boxes.... $501 \square$ Annualized/Other $502 \square$ Farmer or Fisherman $503 \square$ Form 221 attached $504 \square$ MSA Penalty
51 Total of lines 38 through 47 and 49


| Your Name (as shown on page 1) | Your Social Security No. |
| :--- | :--- |
| PART A: Dependents, Qualifying Parents and Grandparents - do not list yourself or spouse |  |

## If completing Part A, also complete Part C, lines C15 and/or C16 and C17.

A1 List children and other dependents. If more space is needed, attach a separate sheet.

| NO. OF MONTHS LIVED |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  | SOCIAL SECURITY NO. | RELATIONSHIP | IN YOUR HOME IN 2012 |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

A2 Enter total number of persons listed in A1 here and on the front of this form, box 10; also complete Part C below... TOTAL
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 6 of the instructions.

| NO. OF MONTHS LIVED <br> FIRST AND LAST NAME | SOCIAL SECURITY NO. | RELATIONSHIP | IN YOUR HOME IN 2012 |
| :--- | :--- | :--- | :--- | :--- | :--- |

A5 Enter total number of persons listed in A 4 here and on the front of this form, box 11 .............................................TOTAL
PART B: Additions to Income

| B6 | Non-Arizona municipal interest. | B6 | 00 |
| :---: | :---: | :---: | :---: |
| B7 | Ordinary income portion of lump-sum distributions excluded on your federal return.. | B7 | 00 |
| B8 | Total federal depreciation. Also see the instructions for line C22 | B8 | 00 |
| B9 | Medical savings account (MSA) distributions. See page 7 of the instructions. | B9 | 00 |
| B10 | I.R.C. §179 expense in excess of allowable amount. Also see the instructions for line C26.. | B10 | 00 |
| B11 | Other additions to income. See instructions and attach your own schedule. | B11 | 00 |
| B12 | Total: Add lines B6 through B11. Enter here and on the front of this form, line 13 | B12 | 00 |

## PART C: Subtractions From Income

| C13 | Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100 | C13 | 00 |
| :---: | :---: | :---: | :---: |
| C14 | Exemption: Blind. Multiply the number in box 9, page 1, by $\$ 1,500$ | C14 | 00 |
| C15 | Exemption: Dependents. Multiply the number in box 10, page 1, by $\$ 2,300$ | C15 | 00 |
| C16 | Exemption: Qualifying parents and grandparents. Multiply the number in box 11, page 1, by $\$ 10,000$ $\qquad$ | C16 | 00 |

C17 Total exemptions: Add lines C13 through C16. If you have no other subtractions from income, skip lines C18 through C30 and enter the amount on line C17 on Form 140, Page 1, line 14

| C17 | 00 |
| :--- | :--- |
| C18 | 00 |

C18 Interest on U.S. obligations such as U.S. savings bonds and treasury bills ...................................................................00
C19 Exclusion for federal, Arizona state or local government pensions (up to $\$ 2,500$ per taxpayer) ..... C19 ..... 00
C20 Arizona state lottery winnings included as income on your federal return (up to $\$ 5,000$ only) ..... C20 ..... 00
C21 U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (the taxable amount).

| C21 | 00 |
| :--- | :--- |
| C22 | 00 |

C23 Certain wages of American Indians

C23 00
C24 Income tax refund from other states. See instructions. ..... 00
C25 Deposits and employer contributions into MSAs. See page 11 of the instructions ..... 00
C26 Adjustment for I.R.C. §179 expense not allowed. ..... 00
C27 Pay received for active service as a member of the reserves, national guard or the U.S. armed forces ..... 00
C28 Net operating loss adjustment. See instructions before you enter any amount here ..... 00
C29 Other subtractions from income. See instructions and attach your own schedule ..... 00
C30 Total: Add lines C17 through C29. Enter here and on the front of this form, line 14. ..... 00
Part D: Last Name(s) Used in Prior Years - if different from name(s) used in current year


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[^0]:    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, $85072-2138$.

