## ARIZONA FORM 140X

# Individual Amended Income Tax Return

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		For calendar year <u>YYYY</u> , or fiscal year beginning	<u>vi M /</u>	ווטט	<u>r y y</u>	<u>,</u> and ending	M				66	
	four first name and initial			Last name					Your Social Security Number			
	If a joint return, spouse's first name and initial			Last name				S	Spouse's Social Security Number			
Present home address - number and street, rural route, apt. no.			Daytime phone: () 94 Home phone: ()					▲ IMPORTANT ▲ You must enter your SSNs.			1	
	City, 3	town or post office State Zip Code			10. (	/		FOR DC	R USE ON			<u> </u>
	CI	heck box to indicate both filing and residency status:		Original Return	This Return							
Filing Status	4	Married filing joint return	4									
	5	Head of household: Name of qualifying child or dependent	5			_						
	6	Married filing separate return. Enter spouse's Social Security Number				88						
	1	above and full name here. ►										
		Single				81			80			
>		Resident										97
Residency	9	Nonresident							. ,			91
sid	10	Part-year resident				<b>1</b> Form 140						$\vdash$
Å	· I	Part-year resident active military				2Form 140A2 3Form 140EZ						$\vdash$
<i>.</i>	12	Nonresident active military Age 65 or over: Enter the number claimed	12 12			4Form 140EZ						$\vdash$
tion	11	Blind: Enter the number claimed	13 1/1									$\vdash$
am	15	Dependents: Enter the number claimed.	17			5Form 140PY If 140NR or 140PY, enter corrected per			centage of			
Exe	16	Qualifying parents or ancestors: Enter the number claimed	16			Arizona residency				8	6	1%
	IM	Age 65 or over: Enter the number claimed.     Blind: Enter the number claimed.     Dependents: Enter the number claimed.     Qualifying parents or ancestors: Enter the number claimed. <b>PORTANT:</b> You <u>must</u> enter an amount in columns (a), (b), and (c) for 18, lines 19 through 25, lines 27, 31, 32, 35, and lines 37     Federal adjusted gross income	r lines 1	1 1	C	RIGINAL AMOUN REPORTED	т	AMOUNT TO BE OR SUBTRAC	ADDED		CORRECTED	
		18, lines 19 through 25, lines 27, 31, 32, 35, and lines 37	7 throug			(a)		OR SUBTRAC	STED		AMOUNT (c)	
ts	17	Federal adjusted gross income					00		00	17		00
mer	18	Form 140NR and 140PY filers only: Enter Arizona gross income			🔔		00		00	18		00
not attach anv pavments	19	Additions to income				00		00	19		00	
N	20	Subtotal: Form 140, 140A, 140EZ filers: Add lines 17 and line 19. F										
ch a		140PY filers: Add lines 18 and 19				00		00			00	
atta	21	Subtractions from income				00		00			00	
ot	22	Arizona adjusted gross income. Subtract line 21 from line 20.			00		00			00		
8		Deductions (itemized or standard)			00		00			00		
but	24	Personal exemptions Arizona taxable income. Subtract lines 23 and 24 from line 22				00		00			00	
esc	26	6 Tax from tax rate table: Table X or Y (140, 140NR or 140PY) Optional Table (140, 140A or 140EZ)								26		00
Enclose	27	Tax from recapture of credits from Arizona Form 301, Part II			00		00			00		
		Subtotal of tax. Add lines 26 and 27, column (c).						28		00		
urn.	29	Clean Elections Fund Tax Reduction claimed on original return		🗌		00			29		00	
reti	30	Clean Elections Fund Tax Reduction claimed on original return Reduced tax. Subtract line 29 from line 28, column (c)			····· <u>····</u>					30		00
e.	21	Family income tax credit					00			310		
e of	32	32 Credits from Arizona Form 301 or Forms 310, 321, 322 or 323								32		00
Dag	33	2 Credits from Arizona Form 301 or Forms 310, 321, 322 or 323   00   00     3 Credit type: Enter form number of each credit claimed:   33   3										
ast	34	Subtract lines 31 and 32 from line 30					 			34		00
of	35	Clean Elections Fund Tax Credit. See instructions 00 Balance of tax. Subtract line 35 from line 34. If line 35 is more than line 34, enter zero								35 36		00
back	30	7 Payments (withholding, estimated, or extension)								37		00
5	20	Increased Excise Tax Credit					00		00			00
attach 1	39	Property Tax Credit					00		00			00
		Other refundable credits. Check box(es) and enter amount(s):										
-2s	Ĩ	40A1 313 40A2 326 40A3 327 40A4	329 4	• <b>A5</b> ]]33	30		00		00	40		00
attaching W-2s.	41	1 Payment with original return plus all payments after it was filed										00
shin	42	2 Total payments and refundable credits. Add lines 37 through 41, column (c).										00
ttac	43	13 Overpayment from original return or as later adjusted. See instructions										00
lf â	: 44	4 Balance of credits: Subtract line 43 from line 42										00
		45 REFUND/CREDIT DUE: If line 36 is less than line 44, subtract line 36 from line 44, and enter amount of refund/credi								45		00
		Amount of line 45 to be applied to 2003 estimated tax. If zero, enter						46		00		
		AMOUNT OWED: If line 36 is more than line 44, subtract line 44 from							47	DOR USE ONLY	00	
AD		<b>48</b> Is this amended return the result of a net operating loss? <i>If "yes", check the box:</i> <b>48</b> ☐ YES							82	99		

#### Form 140X (2002) Page 2

## PART I: Dependent Exemptions - do not list yourself or spouse as dependents

List children and other dependents. If more space is needed, attach a separate sheet. NO. OF MONTHS LIVED IN YO								
FIRST AND LAST NAME	SOCIAL	SECUR	RITY NO.	RELATIONSHIP	HOME DURING THE TAXABLE YEAR			

Enter the names of any dependents age 65 or over listed above that you cannot claim as a dependent on your federal return:

### PART II: Qualifying Parents and Ancestors of Your Parents Exemptions 1999, 2000, 2001 or 2002 (Arizona residents only)

List below qualifying parents and ancestors of your parents for which you are claiming an exemption. If more space is needed, attach a separate sheet. Do not list the same person here that you listed in Part I, above, as a dependent. For information on who is a qualifying parent or ancestor of your parents, see the instructions for the original return that you filed.

					NO. OF MONTHS LIVED IN YOUR
FIRST AND LAST NAME	SOCIAL	SECUR	RITY NO.	RELATIONSHIP	HOME DURING THE TAXABLE YEAR

## PART III: Income, Deductions, and Credits

List the line reference from page 1 for which you are reporting a change then give the reason for each change. Attach any supporting documents required. If the change(s) pertain(s) to an IRS audit, please attach a copy of the agent's report. If you filed an amended federal return with the IRS (Form 1040X), please attach a copy and all supporting schedules.

#### Part IV: Name and Address on Original Return

If your name and address is the same on this amended return as it was on your original return, write "same" on the line below.

	Name		Number and Street, etc.	City, State Zip					
HERE	I have read this return and any a complete. Declaration of prepar	attachments with it. Und rer (other than taxpayer)	der penalties of perjury, I declare th ) is based on all information of whic	nat to the best of my knowledge and belief, they are true, correct and ch preparer has any knowledge.					
SIGN HE	YOUR SIGNATURE		DATE	OCCUPATION					
SE SIG	SPOUSE'S SIGNATURE		DATE	SPOUSE'S OCCUPATION					
PLEASE	PAID PREPARER'S SIGNATURE		FIRM'S NAME (	FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)					
	PAID PREPARER'S TIN	DATE	PAID PREPARER'S AD	DDRESS					
-	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.								