

Property Tax Refund (Credit) Claim

You must file this form, or Form 204, by April 18, 2011.

FOR CALENDAR YEAR **2010**

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_	7
•	
-	•

	Check box 02 if in										
95		nenaec	i for year 2010								
	our First Name and Initial	Last Name	You <u>must</u>						ur Social Security No.		
	a joint claim, Spouse's First Name a	Last Name	Э				enter your Spous	Spouse's Social Security No.			
	urrent Home Address - number and	street, ru	ral route Apt. No	. Daytime F	hone	(with	h area co	ode)	Home Phone (with a	area code))
_	ty, Town or Post Office	State	Zip Code	Your Date	of Birt	th		REV	ENUE USE ONLY. DO N	OT MARK	IN THIS AREA
	3	Otato	2.6 0000	79 M M			V V V				
				/ IVI IVI				┨			
Ou	alifications for Credit (Check t	the hove	s that annly):								
	On December 31, 2010, were			?	D	ont	Own				
•	If you own a mobile home but	-			⊿ Ï	Ï	ĬÏ.	88			
5	Were you an Arizona resident				7 L		No				
·	You do not qualify				5 Ï	es	\Box				
6	Did you pay property taxes on						_	81		80	
	combination of both in 2010?										
	If "No", STOP. You do not qua		-		6						
7	Is this the only Property Tax R	-			_						
	household? If "No", STOP. You		-		7						
8	Were you age 65 or older in 20	010? <i>Ei</i>	nter your birth date	in							
	box 79 above				8						
9	Did you receive Title 16, SSI p	ayments	s in 2010? If "Yes"	,							
	attach proof. If you answered	d "No" to	both 8 and 9, STC	P.	_	_					
	You do not qualify				9	╛					
	<u>ome</u>										
10	TOTAL HOUSEHOLD INCOM	E: Ente	<i>r the amount</i> from բ	page 2, Par	t I, lin	ıe J,	column	4		10	00
Cre											
11	a If you lived alone, enter the								_		
	check the box							1	1a ⊔ Schedule I		
	b If you lived with your spous		•								
	credit from page 2, Part I, S									11	00
12	If you owned your property, en			•			-			4.0	
40	property taxes paid during 2										00
	If you rented, enter property to	-									00
	Total property taxes paid in 20 Amount of Property Tax Cree									14 15	00
	If you have been claimed as a									15	00
10	Name Of Taxpayer Who Claimed	-	ent on anyone else	Social Sec		-	te ine n	OIIOVVI	ng.		
	Name Of Taxpayer Willo Claimed	Tou		Social Sec	unity iv	NO.					
	Address:										
	If you are not claimed as a dep	pendent	on anyone else's ta	ax return. <i>ti</i>	ırn the	e fo	rm over	and i	 complete Part II.		
	If someone else claims you as		•								
17	Credit for increased excise tax		•			-				17	00
18			· •	•							
19	Total Credit: Add lines 15 and										
	Arizona Form 140 or Form 140)A								19	00
	Direct Deposit of Refund: Check bo ROUTING NUMBER	x 19A if yo	our deposit will be ultimate ACCOUNT NUMBER	tely placed in a	foreig	gn ac	count; se				
	98								C Checking or S Savings		
If ti	nis is your first claim for 2010	, STOP	HERE AND GO TO	THE SIGN	UTA	RE	BOX O	N PA	GE 2. If this is		
an	amended claim, complete line	es 20 th	rough 22, and <i>ch</i> e	ck the box	at th	ne to	p of th	e for	m.		
	ENDED										
	Enter the amount from line 5 o										00
	Additional refund: If line 19 is	-								21	00
22	Amount to pay: If line 19 is les							-	-		
	Arizona Department of Revenu	ue; <i>inclu</i>	ide SSN on paymo	ent; attach	paym	ent	to uppe	r left	corner of page	22	00

Part	I Schedule	of Hous	ehold Inc	ome			(1) YOU	YOUI	(2) R SPOUSE	(3) OTHER PERS	ONS	(TOTAL	(4) . (1+2+3)	
	alaries, wages, tip					Α								
	vidend and intere					В								
	usiness and farm	С												
D Ga	ain or loss from s	ale or excl	hange of pro	D										
	ension and annui													
retirement benefits, civil service, and military retirement. Do not include social security or railroad retirement benefits E														
	ent and royalty in	-			F									
				G										
G Partnership, estate, and trust income														
	her Income: Sp		ï											
	-	-	-											
J Total household income: Add lines A through I in column 4. Enter here and on the front of this form, line 10														
<u></u>											. J 			
			hedule I	ute	te your credit from the proper schedule below. 2010 Schedule II									
			use this Sched	dule.			If you live with your spouse or another person, use this Schedule.							
			House		Tax	+	•					3 30/10		
'	Household Income	Tax Credit	Inco		Credit		Household Income		Tax Credit	Housel Incon			Tax Credit	
	HICOHIE		IIICO	IIIC		+				ITICOTI	ic .			
\$	0 - 1,750	\$502	\$ 2,751 -		\$256		\$ 0 - 2,500		\$502	\$ 4,001 -			\$256	
	,751 - 1,850	479	2,851 -		234		2,501 - 2,65		479	4,151 -			234	
	,851 - 1,950	457	2,951 -		212		2,651 - 2,800		457	4,301 - 4,45			212	
	,951 - 2,050	435	3,051 -		189		2,801 - 2,95		435	4,451 -			189	
2	,051 - 2,150	412	3,151 -	3,250	167		2,951 - 3,10)()	412	4,601 -	4,750		167	
١ ۾	454 0.050	200	2.254	2.250	4.45		2.404 2.00	-0	200	4 754	4 000		4.45	
	,151 - 2,250 ,251 - 2,350	390 368	3,251 - 3,351 -		145 123		3,101 - 3,250 3,251 - 3,400		390 368	4,751 - 4,9 4,901 - 5,0			145 123	
	,351 - 2,450	345	3,451 -		100		3,401 - 3,550		345	5,051 - 5,20			100	
	,451 - 2,550	323	3,551 -		78		3,551 - 3,70		323	5,201 -			78	
	,551 - 2,650	301	3,651 -		56		3,701 - 3,85		301	5,351 -			56	
	,651 - 2,750	279	3,751 a		0		3,851 - 4,000		279	5,501 an			0	
	,	Fn			credit o	n tl	ne front of the		rm. line					
Dowt	II One dit to a				Or Care C	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10 11 0111 01 11	110 10	1111, 11110	•••				
	II Credit for								. 5					
	t complete Part I	•	•		e 1 of Forn	า 14(PTC. Do not d	comple	te Part II if	you were se	entenc	ea tor	at least	
	ys of 2010 to a co													
1 L	ist dependents. S	see page 5	of the instruc	ctions.										
									NO. OF MO	ONTHS LIVED				
FIRST AND LAST NAME SOCIAL S					SECURITY I	١٥.	RELATIONS	SHIP	IN YOUR H	HOME IN 2010				
18														
	b													
10														
	nter total number										2			
	you are married f										3			
4 A	dd the amount or	line 2 and	line 3, and e	nter the tot	al						4			
5 M	<i>lultiply</i> the amoun	t on line 4 l	by \$25, and 6	enter the re	sult						5		00	
6 E	nter the smaller o	f line 5 or \$	3100. <i>Also, e</i>	nter this an	<i>nount</i> on F	orm	I40PTC, page 1	, line 1	7		6		00	
	I have read this	return and	any attachme	nts with it I	Inder nenal	ties c	f perjury, I declar	e that to	the hest of	f my knowledd	ne and l	helief t	they are	
꿆														
true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled											•			
Thave read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my know true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) and true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) and true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) and true, correct and complete.														
5			<u>-</u>	2000										
	SPOUSE'S SIGN	<u></u>	ATE	SPOLI	OUSE'S OCCUPATION									
S. SSSE S SISINITIONE							\	51.00		TITON				
-EASE	PAID PREPARER	'S SIGNATUI	RE		DATE		FIRM'S NAM	E (PREF	ARER'S IF S	ELF-EMPLOYE	D)			

Your Social Security No.

PAID PREPARER'S TIN

Your Name (as shown on page 1)

PAID PREPARER'S ADDRESS

PAID PREPARER'S PHONE NO.