

2013

OR FISCAL YEAR BEGINNING

AND ENDING

66

82F ☐ Check box 82F if filing under extension89 ☒ON  
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SSN(s)

Your Social Security No.

695-32-4116

Spouse's Social Security No.

Your First Name and Middle Initial

1 Ilayaraja

Last Name

Palani

Spouse's First Name and Initial (if box 4 or 6 checked)

1

Last Name

Current Home Address - number and street, rural route

2 4722 East Bell Road

Apt. No.

3182

Daytime Phone (with area code)

94 602-829-1464

City, Town or Post Office

3 Phoenix

State

AZ

ZIP Code

85032

Last Names Used in Prior Year(s)

Palani

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88

4 ☐ Married filing joint return5 ☐ Head of household - Enter name of qualifying child or dependent on next line:6 ☐ Married filing separate return. Enter spouse's name and Social Security No. above.7 ☒ Single

▼ Enter the number claimed. Do not put a check mark.

8 0 Age 65 or over (you and/or spouse)

9 0 Blind (you and/or spouse)

10 0 Dependents. From page 2, line A2 - do not include self or spouse.

11 0 Qualifying parents and grandparents. From page 2, line A5.

81 PM

80 RCVD

This box may be blank or may contain a printed barcode of data from your return.



12	Federal adjusted gross income . . . . .	12	60,08300
13	Additions to income (from page 2, line B12) . . . . .	13	00
14	Subtotal: Add lines 12 and 13, and enter the total . . . . .	14	60,08300
15	Subtractions (from page 2, line C17 or C30) . . . . .	15	00
16	Gain/Loss: 16A <input type="checkbox"/> 00 Subtr. . . . .	16	00
17	Arizona AGI: Lines 14 - (lines 15 + 16) . . . . .	17	60,08300
18	18I <input type="checkbox"/> ITEMIZED 18S <input checked="" type="checkbox"/> STANDARD . . . . .	18	4,94500
19	Personal exemptions . . . . .	19	2,10000
20	AZ taxable income: Line 17 - lines (18 + 19) . . . . .	20	53,03800
21	Compute tax: use line 20 & proper Tax Table. . . . .	21	1,66000
22	Tax from recapture of credits . . . . .	22	00
23	Subtotal of tax: Add lines 21 and 22 . . . . .	23	1,66000

24	Family income tax credit (from worksheet in the instructions) . . . . .	24	00
25	Credits from Arizona Form 301, Part II, line 69, or Form 310, 321, 322, and 323 if Form 301 is not required . . . . .	25	00
26	Credit type: Enter form number of each credit claimed . . . . . 26 3 3 3 3		
27	Balance of tax: Subtract lines 24 and 25 from line 23. If the sum of lines 24 and 25 is more than line 23, enter zero . . . . .	27	1,66000
28	Arizona income tax withheld during 2013 . . . . .	28	1,62200
29	Arizona estimated tax payments for 2013 . . . . .	29	00
30	2013 Arizona extension payment (Form 204). . . . .	30	00
31	Increased Excise Tax Credit (from Form 140PTC or worksheet - see instructions). . . . .	31	00
32	Property Tax Credit from Form 140PTC . . . . .	32	00
33	Other refundable credits: Check the box(es) and enter the amount 331 <input type="checkbox"/> 308-I 332 <input type="checkbox"/> 342 333 <input type="checkbox"/> 349 334 <input type="checkbox"/> 350 . . . . .	33	000
34	Total payments/refundable credits: Add lines 28 through 33 . . . . .	34	1,62200
35	TAX DUE: If line 27 is larger than line 34, subtract line 34 from line 27 and enter amount of tax due. Skip lines 36, 37 and 38 . . . . .	35	3800
36	OVERPAYMENT: If line 34 is larger than line 27, subtract line 27 from line 34 and enter amount of overpayment . . . . .	36	000
37	Amount of line 36 to be applied to 2014 estimated tax . . . . .	37	00
38	Balance of overpayment: Subtract line 37 from line 36 . . . . .	38	00

## 39 - 48 Voluntary Gifts to:

Child Abuse Prevention . . . . . 41	00	Solutions Teams Assigned to Schools . . . . . 39	00	Arizona Wildlife . . . . . 40	00
National Guard Relief Fund . . . . . 44	00	Domestic Violence Shelter . . . . . 42	00	Political Gift . . . . . 43	00
Veterans' Donations Fund . . . . . 47	00	Neighbors Helping Neighbors . . . . . 45	00	Special Olympics . . . . . 46	00
		I Didn't Pay Enough Fund . . . . . 48	00		

49 Voluntary Political Gift (check only one) 491 ☐ Americans Elect 492 ☐ Democratic 493 ☐ Green 494 ☐ Libertarian 495 ☐ Republican

50 Estimated payment penalty; MSA penalty; and AZ Long-Term Health Care Savings Account (AZLTHSA) penalty . . . . . 50 00

51 511 ☐ Annualized/Other 512 ☐ Farmer or Fisherman 513 ☐ Form 221 attached 514 ☐ MSA Penalty 515 ☐ AZLTHSA Penalty

52 Total of lines 39 through 48 and 50 . . . . . 52 00

53 REFUND: Subtract line 52 from line 38. If less than zero, enter amount owed on line 54 . . . . . 53 000

Direct Deposit of Refund: Check box 53A if your deposit will be ultimately placed in a foreign account; see instructions 53A ☐

ROUTING NUMBER ACCOUNT NUMBER

98 ☐ Checking or ☐ Savings

54 AMOUNT OWED: Add lines 35 and 52. Make check payable to Arizona Department of Revenue; include SSN on payment . . . . . 54 3800

Your Name (as shown on page 1) <b>Ilayaraja Palani</b>	Your Social Security No. <b>695-32-4116</b>
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**If completing Part A, also complete Part C, lines C15 and/or C16 and C17.**

**A1** List children and other dependents. Do not list yourself or spouse. If more space is needed, attach a separate sheet.

**PART A**

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2013
			0
			0
			0

**A2** Enter total number of persons listed in A1 here and on page 1 of this form, box 10; **also complete Part C below** . . . . . **A2** 0

**A3 a** Enter the names of the dependents listed above who do not qualify as your dependent on your federal return:

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**b** Enter dependents listed above who were not claimed on your federal return due to education credits:

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**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 instructions.

FIRST AND LAST NAME	SOCIAL SECURITY NO.	RELATIONSHIP	NO. OF MONTHS LIVED IN YOUR HOME IN 2013
			0

**A5** Enter total number of persons listed in A4 here and on page 1 of this form, box 11 . . . . . **A5** 0

**PART B**

<b>B6</b> Non-Arizona municipal interest . . . . .	<b>B6</b>	00
<b>B7</b> Ordinary income portion of lump-sum distributions excluded on your federal return . . . . .	<b>B7</b>	00
<b>B8</b> Total federal depreciation. Also see the instructions for line C22 . . . . .	<b>B8</b>	00
<b>B9</b> Medical savings account (MSA) distributions. See instructions. . . . .	<b>B9</b>	00
<b>B10</b> Reserved . . . . .	<b>B10</b>	
<b>B11</b> Other additions to income. See instructions and attach your own schedule . . . . .	<b>B11</b>	00
<b>B12</b> <b>Total:</b> Add lines B6 through B11. Enter here and on page 1 of this form, line 13. . . . .	<b>B12</b>	000

**PART C**

<b>C13</b> Exemption: Age 65 or over. Multiply the number in box 8, page 1, by \$2,100 . . . . .	<b>C13</b>	00	
<b>C14</b> Exemption: Blind. Multiply the number in box 9, page 1, by \$1,500 . . . . .	<b>C14</b>	00	
<b>C15</b> Exemption: Dependents. Multiply the number in box 10, page 1, by \$2,300 . . . . .	<b>C15</b>	00	
<b>C16</b> Exemption: Qualifying parents and grandparents. Multiply box 11, page 1, by \$10,000 . . . . .	<b>C16</b>	00	
<b>C17</b> <b>Total exemptions:</b> Add lines C13 through C16. <b>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 15</b> . . . . .	<b>C17</b>	00	
<b>C18</b> Interest on U.S. obligations such as U.S. savings bonds and treasury bills. . . . .	<b>C18</b>	00	
<b>C19</b> Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer) . . . . .	<b>C19</b>	00	
<b>C20</b> Arizona state lottery winnings included as income on your federal return (up to \$5,000 only). . . . .	<b>C20</b>	00	
<b>C21</b> U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (taxable amount)	<b>C21</b>	00	
<b>C22</b> Recalculated Arizona depreciation . . . . .	<b>C22</b>	00	
<b>C23</b> Certain wages of American Indians . . . . .	<b>C23</b>	00	
<b>C24</b> Income tax refund from other states. See instructions . . . . .	<b>C24</b>	00	
<b>C25</b> Deposits and employer contributions into MSAs. See instructions. . . . .	<b>C25</b>	00	
<b>C26</b> Adjustment for I.R.C. §179 expense not allowed . . . . .	<b>C26</b>	00	
<b>C27</b> Pay received for active service as a member of the reserves, national guard or the U.S. armed forces . . . . .	<b>C27</b>	00	
<b>C28</b> Net operating loss adjustment. See instructions before you enter any amount here . . . . .	<b>C28</b>	00	
<b>C29</b> Other subtractions from income. See instructions and attach your own schedule . . . . .	<b>C29</b>	00	
<b>C30</b> <b>Total:</b> Add lines C17 through C29. <b>Enter here and on the front of this form, line 15</b> . . . . .	<b>C30</b>	000	

**PART D**

<b>D31</b> Enter the total net short-term capital gain or (loss) included on page 1, line 12 . . . . .	<b>D31</b>	00
<b>D32</b> Enter the total net long-term capital gain or (loss). Enter the amount from your worksheet, line 12, column (b) . . . . .	<b>D32</b>	00
<b>D33</b> Enter the total net long-term capital gain from assets acquired after December 31, 2011 (from your worksheet, line 12 column (d)) . . . . .	<b>D33</b>	00
<b>D34</b> Multiply line D33 by 10% (10.). Enter here and on page 1, line 16 . . . . .	<b>D34</b>	00

<b>PLEASE SIGN HERE</b>	I have read this return and any attachments with it. Under penalties of perjury, I declare that 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	Programmer Analyst 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 NO.

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode).  
If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).