## Application for Electronic Filing of Extension Request For Calendar Year 2016 Individual Income Tax Returns Only

2016

Your First Name and Middle Initial	Last Name		Y	ίουr S	Social Security Number			
1	Last Name			Enter				
Spouse's First Name and Middle Initial (if filing joint)	Last Name			your s	pous	e's Social Security No.		
1				SSN(s).		· · · · · · · · · · · · · · · · · · ·		
Current Home Address - number and street, rural route		Apt. I	No.	Daytime Pho	ne (י	with area code)		
2				94		,		
City, Town or Post Office State	ZIP Code							
3								
Resident Personal Income Tax Forms – Check only one bo	<b>x</b> :							
□ Part-Year Resident Personal Income Tax, Form 140PY	1021							
Nonresident Personal Income Tax, Form 140NR								
Nonresident Composite Tax, Form 140NR								
All extension requests must be submitted on or before the original due of	lata An Arizon		nsion cannot	bo grapted for m	oro t	han six months howond		
of the return, unless the original due date falls on a Saturday, Sunday						han six months beyond accept a valid federal		
legal holiday. In that case, your request must be submitted on or before						tension. This includes		
business day following that Saturday, Sunday, or legal holiday. Your requ	lest the autom		x month feder					
for a 2016 filing extension must be submitted on or before April 18, 201	7.							
CHECK ONE BOX:			Fiscal Tax	Year Ending	F	Return Due Date		
Individual Calendar Year Filers:								
(filing Forms 140, 140A, 140EZ, 140NR, 140PY, 140PTC or								
This is a request for an automatic 6-month filing extension					Oct	ober 16, 2017		
Individual Fiscal Year Filers: (automatic 6-month extension)								
Enter taxable year-end date and 6-month extended due dat					M	ΜΙΟΙΟΙΥΙΥΙΥΙΥ		
A federal extension will be used to file this tax return. This f	orm is being us	sed to	transmit the	Arizona extens	sion	payment.		
1 Tax liability for 2016. You may estimate this amount					1	00		
2 Arizona income tax withheld during 2016					00			
3 Arizona estimated tax payments for 2016				Î	00			
4 Credits you will claim on your 2016 return. See Form 301				Î	00			
5 Add lines 2 through 4					5	00		
6 Balance of Tax: Subtract line 5 from line 1					6	00		
7 Enter the amount of payment					7	00		
You will be liable for the extension underpayment penalty if at least 90 p					not b	peen paid by the original		
due date of the return. You will be liable for the late payment penalty if	you do not pay 1	00 per	cent of the tax					
due date. Interest accrues on any additional tax due from the original d	lue date of the re	turn u	ntil paid.					
Making Your Payment: Individuals may make extension payments by	y direct debit, ele	ctronic	c check, or cre	dit card.				
Direct Debit of Payment: I authorize the Arizona Department of R					nitiate	e an ACH electronic		
funds withdrawal (direct debit) entry to the financial institution acco			-	-				
owed on this return. I also authorize the financial institutions involve						•		
information necessary to answer inquiries and resolve issues related to the payment.								
Foreign Account: Check this box if your direct debit of paymer			from a foreign	account. If you	ı che	ck this box. do not		
enter your routing or account numbers. If this box is checked, we	-		-	-				
Department of Revenue, PO Box 52016, Phoenix, AZ, 85072-201	-	• •	, ,					
Account information must be present when requesting direct debit		vmen	t Amount shou	ld equal amount	on li	ne 7		
TYPE OF ACCOUNT ROUTING NUMBER	ACCOUNT N	-		la oqual amount	011 111			
DIRECT DEBIT REQUEST DATE DIRECT DEBIT PAYMENT AMOUNT								
	\$		.0	0				
	$\Psi$			0				
Electronic Payment From Your Checking or Savings Account								
your checking or savings account. There is no fee to use this me								
the "Make a Payment" link. The "E-Check" option in the "Paymer account that you specify. You will receive a confirmation number.								
Credit Card Payment: You can make a 2016 extension payment	-			-				
or American Express credit card. Go to www.AZTaxes.gov, click								
vendor site. The provider will charge you a convenience fee base	d on the amount	of you	ir tax payment			,		
Do not mail this form to the Arizona Department of Rever	nue <b>Retain wit</b>	hvour	tax records f	for a minimum of	four	(4) years		
Your estimated tax paym					loui	( i) yours.		

Arizo	na Fo	orm
AZ-	14	<b>0V</b>

## Arizona Individual Income Tax Payment Voucher for Electronic Filing

Your First Name and Middle Initial	Last Name		Your Social	Security Number
1			Enter	
Spouse's First Name and Middle Initial	Last Name		your Spouse's So	ocial Security No.
1			SSN(s).	
Current Home Address - number and street, rura	al route	Apt. No.	Daytime Phone (with a	area code)
2			94	
	tate ZIP Code		UE USE ONLY. DO NOT MA	ARK IN THIS AREA.
3		88		
		81 PM	80	RCVD
		L		
Enter the amount of payment enclos	ed		\$	00

### To ensure proper application of this payment, be sure that you:

- ✓ Do **not** send cash.
- $\checkmark$  Make your check or money order payable to Arizona Department of Revenue.
- ✓ Write your SSN and "2016 Tax" on your payment.
- $\checkmark$  Include your payment with this form.
- ✓ **Mail to** Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.

You can make this 140V payment by eCheck or credit card! American Express ♦ Visa ♦ Discover Card ♦ MasterCard

# www.AZTaxes.gov

Click on "Make a Payment" and select "140V" as the Payment Type.

**NOTE:** To avoid interest and penalties you must pay the full amount of your tax by April 18, 2017. You will not receive an additional notice from the Arizona Department of Revenue unless an error exists with your return.