Arizona Form **203**	**Request for Injured Spouse Protection from Application of Joint Overpayment Against Spouse's Delinquencies or Debts**	FOR CALENDAR YEAR **2018**

OR FISCAL YEAR BEGINNING 2018 AND ENDING M M D D Y Y Y Y. 66F

☐ Original Tax Return
☐ Amended Tax Return

IMPORTANT: To apply for protection of your share of any 2018 income tax overpayment, you **must** file an Arizona joint income tax return with your spouse for taxable year 2018 **and** include Form 203 with the income tax return, when filed.

Enter the following information exactly as it is shown on the 2018 income tax return for which you are filing this form. The name and social security number shown first on the tax return must also be shown first below.

Taxpayer Name 1	**If the Taxpayer is the *injured* spouse, check here ➔** ☐	Taxpayer's Social Security Number
Spouse Name 1	**If the Spouse is the *injured* spouse, check here ➔** ☐	Spouse's Social Security Number
Current Home Address - number and street, rural route 2	Apartment Number	Daytime Phone No. (optional)
City, Town or Post Office 3	State	ZIP Code

Part 1 Answer the questions on lines 4 through 7 to determine if you qualify as an injured spouse.

4 Are you and your spouse filing an Arizona joint income tax return for 2018?
☐ Yes. Go to line 5.
☐ No. **Stop**. Do not file this form. You must file a joint return to apply for protection of any overpayment of taxes.

5 Does your spouse owe past due state tax, child support, spousal maintenance or other obligations that are ordered by a court or owed to an agency of this state?
☐ Yes. Go to line 6.
☐ No. **Stop**. Do not file this form. You are not an injured spouse.

6 Are you legally obligated to pay this past-due amount?
☐ Yes. **Stop.** Do not file this form. You are not an injured spouse.
☐ No. Go to line 7.

7 Are you and your spouse reporting any payments, such as Arizona income tax withholding from Forms W-2 and 1099 or any Arizona estimated tax payments, on your 2018 joint tax return?
☐ Yes. Go to Part 2 and complete the rest of this form.
☐ No. **Stop**. Do not file this form. See instructions.

Part 2 Allocation of Arizona Income Tax Withholding and Estimated Tax Payments - See instructions for amount to enter.

Allocated Items [Column (a) must equal column (b) + (c)]	(a) Amount shown on Arizona joint return	(b) Allocated to Taxpayer	(c) Allocated to Spouse
8 Arizona income tax withheld **8**	$	$	$
9 Arizona estimated income tax payment(s) made **9**	$	$	$
10 Total: Add lines 8 and 9 for each column and enter the total **10**	$	$	$
11 Divide line 10, column (b) by line 10 column (a) and enter the result..... **11**		.	
12 Divide line 10, column (c) by line 10 column (a) and enter the result..... **12**			.

PLEASE SIGN HERE

Under penalties of perjury, I declare that I have examined this form and any accompanying schedules and statements, and 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.

➔ INJURED SPOUSE SIGNATURE ____ DATE ____

PAID PREPARER'S SIGNATURE ____ DATE ____ FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED) ____

PAID PREPARER'S TIN ____ PAID PREPARER'S ADDRESS ____ PAID PREPARER'S PHONE NUMBER ____