

ARKANSAS INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

Primary's Legal First Name and Middle Initial •			Last Name			Primary's Social Security Number ●			
Spouse's Legal First Name and Middle Initial Last Nan				st Name		Spouse's Social Security Number			
Mailing Address (Number and Street, P.O. Box or Rural Route)						Telephone			
City		State or Provir	nce	ZIP		Check if add		U.S.	
PAF	RT I - TAX RETURN IN	IFORMATION (Who	le Dollars Only)						
1.	Total Income (Form AR1	000F or AR1000NR,	Line 23)				. 1	00	
2.	Net Tax (Form AR1000F	or AR1000NR, Line	38)				. 2	00	
3.	State Income Tax Withhe	eld (Form AR1000F or	AR1000NR, Lir	ne 39)			. 3 •	00	
4.	Refund (Form AR1000F	or AR1000NR, Line	47)		.,		. 4	00	
5.	Tax Due (Form AR1000)	or AR1000NR, Line	51)				. 5	00	
PAF	RT II - DECLARATION	OF TAXPAYER							
for the state r	the bank account(s I do not want direct I authorize the State form (AR TAX PMT I authorize the Sta Payment form (AR //e filed a balance due retue tax liability and all applicate turn will be rejected also). te of Arkansas Incom EST PMT) or Arkansa: rn, I understand that if ble interest and penal	the Form AR100 or I am not receive Tax Section to in e Tax Section to s Extension Payor the State of Arka ties. If I have file	oF/AR1000NR. ving a refund. itilate debit entries initilate debit er ment form (AR E ansas does not re ed a joint federal	s to my account a atries to my acco XT PMT). eceive full and time and state return a	as indicated on ount as indicate nely payment of and my federal	the Arkansas ed on the Ar my tax liabil return is reje	s Income Tax Payment kansas Estimated Tax lity, I will remain liable cted, I understand my	
consection of Arka and if and/or return transm	penalties of perjury, I declar of the electronic portion of the to my ERO sending my cansas sending my ERO ar rejected, the reason(s) for transmitter the reason(s) electronically, I consent to hission of my tax return elec-	my 2020 Arkansas inc return, this declaration d/or transmitter an acl the rejection. If the pr for the delay, or when to the disclosure to the	ome tax return. , and accompany knowledgement occessing of my refund was se	To the best of my ying schedules a of receipt of trans return or refund is ent. In addition, by	y knowledge and nd statements to smission and an is delayed, I author using a compute	belief, my return the State of Ark ndication of who in the State of the State of the system and set the system are system and set the system and set the system are system and set the system are system as the system are system and set the system are system as the system are system are system as the system are s	rn is true, contains as I als ether or not of Arkansas to oftware to pro	rrect, and complete. I to consent to the State my return is accepted, to disclose to my ERO epare and transmit my	
Sigr Her									
	1 milary 3 Olginatur		Date	CINIATOD (ED	Spouse's Signa			Date	
I declar am or the re- with a exami	are that I have reviewed the holy a collector, I understand turn. I have obtained the tacopy of all forms and infounded the above taxpayer's complete. This declaration of	e above taxpayer's red that I am not respons xpayer's signature on mation to be filed with return and accompan	turn and that the sible for reviewin Form AR8453 be the State of Arka ying schedules a	entries on Form g the taxpayer's efore submitting t ansas. If I am also and statements, a	AR8453 are com return; I declare his return to the S o the Paid Prepal and to the best o	plete and corre that Form AR84 State of Arkansa rer, under pena f my knowledge	153 accurate is, and have Ities of perjui	ely reflects the data on provided the taxpayer ry I declare that I have	
ERC)'S			if paid	if self-				
Use	ERO'S Signature		Date	preparer	employed		Your SSN o	or PTIN	
Only	y ————————————————————————————————————	ddress					FEIN		
	r penalties of perjury, I declowledge and belief, they a			eclaration is base Check					
Prep	parer's Preparer's Sign	nature	Date	if self- employed		Prepare	er's SSN or F	'TIN	
036	Firm's name ar	nd address					FEIN	Ī	