

ARKANSAS CORPORATION INCOME TAX DECLARATION FOR ELECTRONIC FILING

For calend	lar year 2023, or	tax year beginning_	, 20,	ending	20	_		
Name						al Employer Identification Number		
Mailing Addre	SS (Number and Street,	P.O. Box or Rural Route)			Teleph	ione		
City						ck if address is outside U.S. Country		
PART I -	TAX RETURN INFO	RMATION (Whole Dollars	Only)					
1. Total	Income (Form AR1100	CT, Line 15)				1		00
	•	R1100CT, Line 30)						00
3. Total Tax Liability (Form AR1100CT, Line 33)								00
4. Overpayment (Form AR1100CT, Line 38)								00
5. Tax Due (Form AR1100CT, Line 42)								00
		OFFICER (Sign only after						•
corporation v corporation r Under penalt transmitter, a 2023 Arkans transmitter, a I also consen or not the cor I authorize the using a compertaining to	will remain liable for the eturn may also be rejected and/or internet service passincome tax return. The and/or ISP sending the fat to the State of Arkansa reporation's return is accorded State of Arkansas to buter system and software.	due return, I understand that tax liability and all applicable sted. that I am an officer of the aborovider (ISP) and the amour to the best of my knowledge corporation's return, this decreas sending my ERO, transmit epted, and, if rejected, the redisclose to my ERO, transmit re to prepare and transmit mand software and to the transmand software and to the transmit mand software and transmit mand software and to the transmit manufacturers.	ve corporation and the sin Part I above and belief, the corplaration, and accompleter, and/or ISP an accessor(s) for the rejective, and/or ISP the y return electronical	hat the information I I gree with the amount oration's return is tru panying schedules a cknowledgment of rec stion. If the processing reason(s) for the de y, I consent to the dis	nave giver s on the c e, correct nd statem ceipt of tra g of the co	eturn is reje n my electro correspondi a, and comp ents to the nsmission orporation's en the refu	onic return or ing lines of th plete. I conse State of Arka and an indica s return or ref	iginator (ERO) ee corporation's ent to my ERO ansas. ation of whethe und is delayed In addition, by
		F ELECTRONIC RETUR			DEBARE	· D		
If I am only a data on the re officer with a I have exami correct, and officer with a Brooks Erro's	a collector, I understand eturn. I have obtained to copy of all forms and in the above corporate complete. This declarate	ove corporation return and to that I am not responsible for the officer's signature on Form formation to be filed with the tion's return and accompany ion of Paid Preparer is base	r reviewing the corp n AR8453-C before State of Arkansas. ing schedules and s	oration's return; I dec submitting this return if I am also the Paid F tatements, and to the of which the prepare	lare that F to the Sta Preparer, L best of m has know	Form AR84 ate of Arkar under pena ny knowled	153-C accuratinsas, and havalties of perjur lge and beliet	tely reflects the ve provided the ry I declare tha
llco -	signature Firm's name (or yours		paid preparer self			f-employed		
Only	self-employed)				EIN			
a	address and ZIP code					Phone No. (
best of my kr	nowledge and belief, the Preparer's signature	re that I have examined the ey are true, correct, and com				of which I h	nave any kno	
Preparei		ours			•	EIN		
Use Only	if self-employed) address and ZIP c	ode				Phone N	lo. ()	