AR1000CO

ITCO241

2024

ARKANSAS INDIVIDUAL INCOME TAX
CHECK-OFF CONTRIBUTIONS

Primary's legal name		Primary's social security number
Mailing address		
City	State	ZIP

SEE INSTRUCTIONS ON REVERSE SIDE OF THIS FORM

1. ARKANSAS DISASTER RELIEF PROGRAM ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

2. ARKANSAS GAME AND FISH FOUNDATION ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

3. ARKANSAS SCHOOL FOR THE BLIND/SCHOOL FOR THE DEAF ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

4. BABY SHARON'S CHILDREN'S CATASTROPHIC ILLNESS PROGRAM ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

5. ORGAN DONOR AWARENESS EDUCATION PROGRAM ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

6. AREA AGENCIES ON AGING PROGRAM ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

7. MILITARY FAMILY RELIEF PROGRAM ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

8. NEWBORN UMBILICAL CORD BLOOD INITIATIVE ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

9. LAW ENFORCEMENT FAMILY RELIEF TRUST FUND ..... • $

☐ $1 ☐ $5 ☐ $10 ☐ $20 ☐ _____ Enter amount ☐ **Your Total Refund**

10. ARKANSAS BRIGHTER FUTURE FUND PLAN ACCOUNT (Formerly AR529 College Investing Plan)

Account Number: ☐☐☐☐☐☐☐☐☐ - ☐☐ ..... • $

☐ $25 ☐ $50 ☐ $100 ☐ _____ Enter amount ☐ **Your Total Refund**

Account Number: ☐☐☐☐☐☐☐☐☐ - ☐☐ ..... • $

☐ $25 ☐ $50 ☐ $100 ☐ _____ Enter amount ☐ **Your Total Refund**

11. TOTAL CHECK-OFF CONTRIBUTIONS ..... $