2019 AR1002NR ARKANSAS FIDUCIARY



·2019

| | | esident INCOME TAX RETURN 9 or fiscal year beginning and ending | 2 | 0 | | | | Software | |
|---|-----------------------------------|---|-----------------|---|---------------|----------|----------------|--|--------|
| For 2019 or fiscal year beginning and ending Name of estate or trust | | | | 20 • Tederal identification number | | | Т | Toma of autitus | |
| • | | | | Tederal identification flumber | | | l _D | Type of entity: ecedent's estate | |
| Name and title of fiduciary or trustee | | | | Date trust created | | | | mple trust | \Box |
| • | | | | | | | | omplex trust | Ш |
| Mailing address | | | | State or federal | | | | SBT rantor trust | Н |
| • | | | extension filed | | | | | haritable trust | |
| City State or province ZIP | | | | Check if address is outside Foreign country | U.S. | | | ankruptcy estate | Ш |
| _ | _ | <u></u> | - | | \neg | | - | ooled income fund | 븼 |
| | <u> </u> | INITIAL RETURN • AMENDED RETURN • FINAL RETURN | _ | A. ALL INCOME | | | В. | ARKANSAS INCO | |
| | | Interest income: | 1 | | 00 | 1 | ⊢ | | 00 |
| | | Ordinary dividends: | - 1 | | 00 | 2 | \vdash | | 00 |
| Ф | | Net profit from trade or business: (Attach schedule) | | | 00 | 3 | ⊩ | | 00 |
| Income | | Capital gains: (See instructions) | - 1 | | 00 | 4 | ⊩ | | 00 |
| <u>=</u> | | Rents, royalties, partnerships, other estates and trusts, etc: (Attach schedule) | - 1 | | 00 | 5 | | | 00 |
| | l | Farm income: (Attach schedule) | - 1 | | 00 | 6 | \vdash | | 00 |
| | | Other income: | - 1 | | 00 | 7 | _ | | 00 |
| | | TOTAL INCOME: (Add lines 1 through 7) | | | 00 | _ | • | | 00 |
| | l | Taxes: | - 1 | | ~~ | 9 | - | | 00 |
| | 1 | Interest: | - 1 | | ~~ | 10 | - | | 00 |
| | | Charitable contributions: | - 1 | | ~~ | 11 | - | | 00 |
| US | | Fees: (Fiduciary/attorney/accountant/preparer) | - 1 | | ~~ | 12 | \vdash | | 00 |
| ctio | | Other deductions: | 1 | | | 13 14 | - | | 00 |
| Deductions | | Total deductions: (Add lines 9 through 13) | 1 | | ~~ | 15 | - | | 00 |
| ۵ | | Adjusted income before distributions: (Subtract line 14 from line 8) Amounts to be distributed to beneficiaries: | - 1 | | ~~ | 16 | - | | 00 |
| | l | Adjusted income after distributions: (Subtract line 16 from line 15) | 1 | | 00 | | - | | 00 |
| | _ | Standard deduction: | - | \$2,200 | $\overline{}$ | 17 | | | 100 |
| | | NET TAXABLE INCOME: (Subtract line 18 from line 17) | - 1 | | 00 | | | | |
| | _ | TOTAL TAX:: Enter tax from REGULAR TAX TABLE using the amount on line 1 | | | | 20 | | | 00 |
| | | Personal tax credit: | ٠. | \$26 | _ | | _ | | |
| | | Other tax credit: (Attach AR1002-TC) | - 1 | | 00 | | | | |
| | | TOTAL CREDITS: (Add lines 21 through 22) | | <u>_</u> | | 23 | • | | 00 |
| | | NON ESBT NET TAX: (Subtract line 23 from line 20) | | | | | - | | 00 |
| | 24A | A. Enter the amount from line 17, column B: | 24A | • | 00 | | | | |
| | | B. Enter the amount from line 17, column A: | - 1 | | 00 | | | | |
| | | C. Divide line 24A by line 24B and enter decimal here: | | <u> </u> | 2 | 4C | • | | % |
| | 240 | APPORTIONED NON ESBT NET TAX: (Multiply line 24 by line 24C) | | | 2 | 4D | • | | 00 |
| ıts | 24E | APPORTIONED ESBT NET TAX: (Attach schedule) | | | 2 | 4E | • | | 00 |
| Payments | 24F | TOTAL APPORTIONED NET TAX: (Add lines 24D and 24E) | | | 2 | 4F | • | | 00 |
| ⁵ ay | 25. | Arkansas income tax withheld: (Attach AR1099PT and/or 1099R) | 25 | • | 00 | | | | |
| and F | 26. | Estimated tax paid or credit brought forward from last year: | 26 | • | 00 | | | | |
| я × | 27. | Tax paid with extension: | 27 | • | 00 | | | | |
| Тах | | Payments made with or after the filing of original return: (See instructions) | | • | 00 | | | | |
| | ı | Total payments: (Add lines 25 through 28) | | | 00 | | | | |
| | | Overpayments received: (See instructions) | | | 00 | | _ | | |
| | | NET PAYMENTS: (Subtract line 30 from line 29) | | | | | - | | 00 |
| | | Amount of overpayment: (If line 31 is greater than line 24F, enter difference) | | | _ | 32 | • | | 00 |
| | | Amount to be applied to 2020 estimated tax: | | · | 00 | | _ | | laa |
| | | AMOUNT TO BE REFUNDED TO YOU: (Subtract line 33 from line 32) | | | | | - | | 00 |
| | l | AMOUNT DUE: (If line 31 is less than line 24F, enter difference) | | | _ | _ | | | 00 |
| | ა ნ. | | | ty 36B ● | 00 | _ | _ | | 100 |
| | | Pay Online: Please visit our secure site ATAP (Arkansas Taxpayer Access Point) at www.atal | | | | _ | _ | lavitha Aukan D | 00 |
| | | nalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, | the s | statements are true and com | plete | | | lay the Arkansas Revenue ency discuss this return w | |
| Fidu | iduciary/trustee's signature Date | | | | | 4 | _ | the preparer? | |
| Pre | pare | r's signature Date | | | | F | Ear | Yes No | N. |
| Name PTIN/ID Address City, state, and ZIP | | | umb | er <u>●</u> | | F | A | r Department Use On | y |
| ~u(| 11622 | s City, state, and ZIP | | | | . [| • | 1 1 | |



Schedule A: Capital Gains (Attach Federal Schedule D)

In Arkansas only 50% of net long term capital gain is taxed. 100% of short term capital gains is taxed.

Per Act 1488 of 2013, the amount of net capital gain in excess of ten million dollars (\$10,000,000) from a gain realized on or after January 1, 2014, is exempt from state tax.

Complete this schedule if you have a **NET CAPITAL GAIN OR LOSS** reported on federal Schedule D, federal Form 1041. **The amount of capital loss that may be deducted after offsetting capital gains is limited to \$3,000**.

Adjust your gains and losses for any depreciation differences, if any, in the federal and Arkansas amounts using lines 2, 5 and 10.*

*(Arkansas did not adopt the federal "bonus depreciation" provision from previous years. Therefore, there may be a difference in federal and Arkansas amounts of depreciation allowed.)

| | | Federal Schedule D | (A) All Income | (B) Arkansas Only | |
|-----|---|-----------------------|-------------------|----------------------|--|
| 1. | Enter federal long-term capital gain or loss reported on line 15, federal Schedule D, Form 10411 | 00 | 00 | 00 | |
| 2. | Enter adjustment, if any, for depreciation differences in federal and state an | nounts2 | 00 | 00 | |
| 3. | Arkansas long-term capital gain or loss, add (or subtract) line 1 and line 2 | 3 | • 00 | • 00 | |
| 4. | Enter federal net short-term capital loss, if any , reported on line 7, federal Schedule D, Form 1041 | 00 | 00 | 00 | |
| 5. | Enter adjustment, if any, for depreciation differences in federal and state an | nounts5 | 00 | 00 | |
| 6. | Arkansas net short-term capital loss, add (or subtract) line 4 and line 5 | 6 | • 00 | • 00 | |
| 7a. | Arkansas net capital gain or loss (Combine lines 3 and 6) | 7а | • 00 | • 00 | |
| 7b. | If the amount on line 7a is over \$10,000,000, only enter \$10,000,000. If less enter the total amount | | 00 | 00 | |
| 8. | Arkansas taxable amount, if a gain multiply line 7b by 50 percent (.50), other | rwise enter loss 8 | 00 | 00 | |
| 9. | Enter federal short-term capital gain, if any , reported on line 7, federal Schedule D, Form 10419 | 00 | 00 | 00 | |
| 10. | Enter adjustment, if any , for depreciation differences in federal and state an | nounts10 | 00 | 00 | |
| 11. | Arkansas short-term capital gain, add (or subtract) line 9 and line 10 | 11 | • 00 | • 00 | |
| 12. | Total taxable Arkansas capital gain or loss, add lines 8 and 11. (Loss limite Enter here and on AR1002F / AR1002NR | | 00 | 00 | |

| Schedule B: Income Distribution (Attach Federal K-1s) | | | | | | | | | | |
|---|---|--|---|-------------|--------------|------------------------------------|----|--|--|--|
| Beneficiaries' share of income: | | | Number of beneficiaries who received distributions: | | | | | | | |
| FIRST AND LAST NAME OF NAME OF ESTATE OR TRUS | I CCNI/EEINI | | ADDRESS | ST | ZIP | AMOUNT | | | | |
| | | | | | | | 00 | | | |
| | | | | | | | 00 | | | |
| | | | | | | | 00 | | | |
| | | | | | | | 00 | | | |
| | | | | | | | 00 | | | |
| Refund: P.O. E | sas State Income Tax Box 1000 Rock, AR 72203-1000 | | Tax Due/No Tax | (: F | P.O. Box 214 | te Income Tax 4 R 72203-2144 | | | | |