



STATE OF ARKANSAS Nonresident Military Personnel Exemption Form

Military members whose state of residence or domicile for tax purposes is a state other than Arkansas should file this form. This will ensure that our records indicate that you are a military member and not required to file Arkansas returns. (You do not need to fill out this form each year; this is a permanent exemption.)

COMPLETE FORM AND SIGN

I,		
that I am not a resident of the State of Arkansas and am a resident, for tax purposes, of another state under		
the Servicemembers Civil Relief Act (50 App. U.S.C. § 571). My state of residence/domicile for tax purposes		
is	. This is reflected	on my Leave and Earnings Statement
and/or box 15 of my most recent Form W-2.	Attach documentation	on to support (i.e. LES or W-2).
Social security number:		
Current mailing address:		
		_
If in the future I establish residency in Arkans	sas or leave military servic	e and remain in the State of Arkansas,
I agree to timely file appropriate income tax returns as required by Arkansas law.		
Signature	Date	Daytime phone number
Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge		
and belief, the information is true, correct and complete.		

Mail completed form to:

ATTN: Military Exemption Form State of Arkansas PO Box 3628 Little Rock, AR 72203

Instead of mailing form, you may email or fax it to:

individual.income@dfa.arkansas.gov

(501) 682-7692