



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 Name	Spouse's Social Security Number
Mailing Address (Number and Street, P.O. Box	or Rural Route)		● Telephone
0			•
City	State or Province	ZIP	Check if address is outside U.S. Foreign Country
PART I - TAX RETURN INFORMATION (Whole Dollars Only)			
1. Total Income (Form AR1000F or AR1000NR, Line 23)			
2. Net Tax (Form AR1000F or AR1000NR, Line 38) 2 00 3. State Income Tax Withheld (Form AR1000F or AR1000NR, Line 39) 3 ● 00			
 State income fax withheid (Form AR1000F or AR1000R, Line 39)			
5. Tax Due (Form AR1000F or AR1000NR, Line 51)			
PART II - DECLARATION OF TAXPAYER			
 a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. The refund will be direct deposited to the bank account shown on the AR1000F/AR1000NR, line 50. 6b. I do not want direct deposit of my refund or I am not receiving a refund. 6c. I authorize the State of Arkansas Income Tax Section to initiate debit entries to my account as indicated on the Arkansas Income Tax Payment form (AR TAX PMT). 6d. I authorize the State of Arkansas Income Tax Section to initiate debit entries to my account as indicated on the Arkansas Estimated Tax Payment form (AR EST PMT) or Arkansas Extension Payment form (AR EXT PMT). If I have filed a balance due return, I understand that if the State of Arkansas does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties. If I have filed a joint federal and state return and my federal return is rejected, I understand my state return will be rejected also. Under penalties of perjury, I declare that the information I have given my ERO and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my 2019 Arkansas income tax return. To the best of my knowledge and belief, my return is true, correct, and complete. I consent to my ERO sending my return, this declaration, and accompanying schedules and statements to the State of Arkansas. I also consent to the State 			
of Arkansas sending my ERO and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not my return is accepted, and if rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize the State of Arkansas to disclose to my ERO and/or transmitter the reason(s) for the delay, or when the refund was sent. In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure to the State of Arkansas of all information pertaining to my use of the system and software and to the transmission of my tax return electronically. Sign			
Here Primary's Signature	Dat	e Spouse's Sig	nature Date
PART III - DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER			
am only a collector, I understand that I the return. I have obtained the taxpaye with a copy of all forms and information examined the above taxpayer's return and complete. This declaration of Paid ERO'S Use ERO'S Signature	am not responsible for rev r's signature on Form AR84 n to be filed with the State of and accompanying schedu	viewing the taxpayer's return; I declar 453 before submitting this return to the of Arkansas. If I am also the Paid Prep ules and statements, and to the best nformation of which the preparer has Check Check if paid if self-	
Only Firm's name and address			FEIN
Under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This declaration is based on all information of which I have any knowledge. Paid Paid Declare the true is the true			
Preparer's ^{Preparer's Signature}	Dat	e employed	Preparer's SSN or PTIN
Firm's name and add AR8453 (R 5/31/2019)	ress		FEIN