ARKANSAS DEPARTMENT OF FINANCE AND ADMINISTRATION CONTRACTOR TAX RATE CHANGE REBATE FORM ET-180A

Attach Supporting Documents including a copy of the Contract

■ Read Instructions	Sales Tax Permit #		
1) Company Name	2) FEIN		
3) Mailing Address	4) City	5) State	6) Zip

If you do not have an Arkansas Sales Tax Permit Number, complete the following section.

7) Owner's Name				
8) NAICS Code of Business	9) Type of Ownership			
10) Location Address	11) City	12) State	13) Zip	
14) Contact Name	15) Contact Phone Number			

Please complete the section below with information from the sales invoices on which you are claiming the local tax rebate. Please Note: Information provided on this form will be subject to Audit. Information found to be fraudulent will result in loss of your local tax rebate and assessment of penalties.

16) Contract ID 1		17) Contract Date		20) County Where Purchased or Delivered/Shipped			21) County Tax Code	
18) Invoice Number		19) Invoice Date		22) City Where Purchased or Delivered/Shipped		23) City Tax Code		
	24) Invoice Total Amount (Do Not Include Tax Paid)	25) Sales Tax Paid at 6.5%	26) Sales Tax at 6%	27) State Rebate Amount (Block 25 - Block 26)]			
State								
	28) Invoice Total Amount (Do Not Include Tax Paid)	29) Standard Cap Amount	30) Invoice Amount Eligible for Rebate (Block 28 - Block 29)	r 31) Current Local Tax Rate	32) Local Tax Rebate Amount	33) Previous Rate	34) Local Rate Change Rebate Amount (Block 31 - Block 33) X \$2,500	35) Total Local Rebate (Block 32 + Block 34)
County Tax Code		- \$2,500.00 =		X%=				
City Tax Code		- \$2,500.00 =		X =				
36) Rebate Claim Amount (From Invoice(s) Listed Above)								

36) Rebate Claim Amount (From Invoice(s) Listed Above)
37) Rebate Claim Amount (ContractorTax Rate Change Rebate Supplemental Sheet Total)
38) Total Rebate Claim Amount (Combine Line 36 and 37)

Under penalties of law, I declare that the amount of sales or use tax for which I am submitting this claim for refund has NOT been refunded or credited to me by the Department or the seller to whom the tax was previously paid. I will immediately send payment for any such duplicate refund to the Arkansas Department of Finance & Administration; PO Box 3566, Little Rock, AR 72203-3566.

39) Signature	40) Date /		
		/ ,	/
		/	
	/	/	

Mail To: SALES & USE TAX SECTION

Contact:

Phone: 501-682-7105 Fax: 501-682-7904

P O. BOX 3566

LITTLE ROCK, AR 72203-3566

Web site: www.dfa.arkansas.gov/salestax

INSTRUCTIONS FOR COMPLETING CONTRACTOR TAX RATE CHANGE REBATE FORM ET-180A

Blocks (1) - (6) Company Information

Enter the name, federal ID, and mailing address of the business that is requesting the rate change rebate.

Blocks (7) – (15) Complete this section if you do not have a current Arkansas Sales Tax or Use Tax Permit

Enter the owner's name and business NAICS code (NAICS codes are listed on our web page at www.dfa.arkansas.gov). Select the business type. Enter the business location address and a business contact name and telephone number.

Blocks (16) – (23) Contract and Invoice Information

Enter the contract ID, contract date, invoice number, the invoice date, county and city listed on the invoice along with their respective tax codes. A complete list of Arkansas city and county rates and codes are listed on our web page at www.dfa.arkansas.gov.

Blocks (24) – (27) State Rebate Calculations

Block 24: Invoice Total Amount: Enter the invoice total amount less tax paid. Block 25: Sales Tax Paid at 6.5%: Enter state sales tax paid at 6.5%. Block 26: Sales tax at 6%: Multiply block 24 times 6%. Block 27: State Rebate Amount: Subtract block 26 from block 25.

Blocks (28) – (38) Local Rebate Calculations

Block 28: Invoice Total Amount: Enter the invoice total amount less tax paid.
Block 29: Standard Cap Amount: \$2,500.00 per local per invoice.
Block 30: Invoice Amount Eligible for Rebate: Subtract block 29 from block 28.
Block 31: Current Local Tax Rate: Enter the local tax rate.
Block 32: Local Tax Rebate Amount: Multiply block 30 times block 31.
Block 33: Previous Rate: Enter the local tax rate that was in effect on the contact date.
Block 34: Local Rate Change Rebate Amount: Subtract block 33 from block 31 and then multiply by \$2,500.00.
Block 35: Total Local Rebate: Add block 32 and block 34.
Block 36: Rebate Claim Amount Listed Above: Enter totals from block 35.
Block 37: Rebate Claim Amount from Supplemental Sheet (if applicable): Enter totals from block 36 on supplemental sheet ET-180B.

Block 38: Total Rebate Claim Amount: Add block 36 and block 37.

Additional invoices may be listed on supplemental form ET-180B.

Photocopies of the entire contract and all invoices must be attached to the request before the request will be processed.