

**ARKANSAS
INDIVIDUAL INCOME TAX
DECLARATION FOR ELECTRONIC FILING**

DO NOT MAIL THIS FORM - Unless you claim the Developmentally Disabled Credit (AR1000RC5) or the Other State Tax Credit. See the "Special Instructions" on page 2 for additional information.

Taxpayer Name and Middle Initial ●	Last Name ●	Your Social Security Number ●
Spouse's Name and Middle Initial	Last Name	Spouse's Social Security Number ●
Mailing Address		Telephone Number ●
City, State, and Zip Code		

PART I - TAX RETURN INFORMATION (Whole Dollars Only)			
1. Total Income (Form AR1 or NR1, Line 21)	1		00
2. Net Tax (Form AR2 or NR2, Line 36)	2		00
3. State Income Tax Withheld (Form AR2 or NR2, Line 37)	3	●	00
4. Refund (Form AR2 or NR2, Line 45)	4		00
5. Tax Due (Form AR2 or NR2, Line 49)	5		00

PART II - DECLARATION OF TAXPAYER

- 6a. I consent that my refund be direct deposited as designated in the electronic portion of my 2015 Arkansas income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- 6b. I do not want direct deposit of my refund or I am not receiving a refund.

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 2015 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

_____	_____	_____	_____
Your Signature	Date	Spouse's Signature	Date

SPECIAL INFORMATION

AR8453-OL

If you choose to file your State of Arkansas tax return by using one of the online web providers, you are required to complete the AR8453-OL. You must keep the completed and signed AR8453-OL along with your tax return and any W-2's and/or 1099's. If you have claimed the Individuals with Developmental Disabilities Credit or Other State Tax Credit, see the instructions below:

Individuals with Developmental Disabilities Credit

If the taxpayer is claiming the Individuals with Developmental Disabilities credit, the AR1000RC5 or recertification letter must be sent to the E-File Group by one of the methods below:

- **Binary Attachment:**

Description Name: AR1000RC5.pdf.

- **E-mail To:** AR8453@dfa.arkansas.gov

Subject: Taxpayer name and RC5

Attachment: AR8453-OL along with the AR1000RC5 or Recertification Letter must be attached to the e-mail.

Note: Attachments must be in one of the following formats: .tif, .pdf, .bmp, .jpg, or .jpeg

- **Fax To: 501-682-7393 - AR8453-OL along with the AR1000RC5 or Recertification Letter must be included in the fax transmission.**

- **Mail To:** Arkansas Electronic Filing Group
P. O. Box 8094
Little Rock, AR 72203-8094

Other State Tax Credit

If the taxpayer is claiming the Other State Tax Credit, the Other State Tax return(s) must be sent to the E-File Group by one of the methods below:

- **Binary Attachment:**

Description Name: OtherStateReturns.pdf.

- **E-mail To:** AR8453@dfa.arkansas.gov

Subject: Taxpayer name and Other State Tax Return

Attachment: AR8453-OL along with the Other State Tax returns must be attached to the e-mail.

Note: Attachments must be in one of the following formats: .tif, .pdf, .bmp, .jpg, or .jpeg

- **Fax To: 501-682-7393 - AR8453-OL along with the Other State Tax return(s) must be included in the fax transmission.**

- **Mail To:** Arkansas Electronic Filing Group
P. O. Box 8094
Little Rock, AR 72203-8094

LINE INSTRUCTIONS

Name, Address, and Social Security Number

Verify the Name(s), Address and Social Security Number(s) are correct. An incorrect or missing social security number may delay any refund. If filing a joint return, be sure the names and social security numbers are listed in the same order.

Note: The address must match the address shown on the electronically filed Form AR1000F.

All W-2(s) and 1099(s) must be attached to the AR8453-OL.

Part I - Tax Return Information

Line 3. Enter the total State of Arkansas withholding from Form(s) W-2 and/or 1099.

Part II - Declaration of Taxpayer

If Line 6a is marked, you've chosen to have your state refund direct deposited into the account shown on the form ARDD.

If Line 6b is marked, you've chosen to have your state refund mailed to the address shown above.

You must sign the AR8453-OL. If filing a joint return, your spouse must also sign the AR8453-OL.

TAX DUE

Mail your payment with the payment voucher (Form AR1000-V) on or before April 18, 2016 to:

State Income Tax - E-File Payment
P.O. Box 8149
Little Rock, AR 72203-8149

If you do not have Form AR1000-V, you may obtain it from your on-line service provider and/or electronic filing transmitter. You can also download the form from the State of Arkansas' web site. Go to www.arkansas.gov/efile and click the link on the left that says "Payment Vouchers".

The mailing should only contain the payment and the payment voucher (AR1000-V).

Do not mail in the form AR8453-OL, AR1000F, or AR1000NR with your payment.

REFUND INFORMATION

After the State of Arkansas has accepted your electronically filed return, the refund should be issued within 7 to 10 business days.

You can check on the status of your refund if it has been at least 72 hours since State of Arkansas acknowledged receipt of your e-filed return. To check the status of your refund, do one of the following.

- Check ATAP website below for 24 hour availability.
- Call 501-682-1100 or 1-800-882-9275. (Monday through Friday from 8:00 a.m. to 4:30 p.m. central standard time).

DIRECT DEPOSITS

Direct Deposit is offered on electronically filed Arkansas Individual Income Tax returns with United States address only, including Hawaii and Alaska. You must use the same account that is being used for the direct deposit of your federal refund. If the federal return is a tax due, your State refund can be direct deposited, if supported by your software.

Direct deposits are not offered to those filing with either a foreign address or an account outside the United States. This includes the following countries: Guam, Virgin Islands, and Puerto Rico.

ATAP

ATAP (Arkansas Taxpayer Access Point) allows taxpayers or their representatives to log on to a secure site and manage their account online. You can access ATAP at www.atap.arkansas.gov Some features are listed below:

- Make name and address changes
- View account letters
- Make payments
- Check refund status

(Registration is not required to make payments or to check refund status.)