

## ARKANSAS PARTNERSHIP RETURN DECLARATION FOR ELECTRONIC FILING

For calendar year 2015, or tax year beginning \_\_\_\_\_, 20\_\_\_\_, ending \_\_\_\_\_, 20\_\_\_\_

|                           |  |
|---------------------------|--|
| Name of Company           | Federal Employer Identification Number |
| Mailing Address           | Telephone Number                       |
| City, State, and Zip Code |  |

**PART 1 TAX RETURN INFORMATION (Whole Dollars Only)**

|   |   |  |    |
|---|---|--|----|
| 1. Gross Receipts or Sales (Form AR1050, Line 1, Arkansas Column) ..... | 1 |  | 00 |
| 2. Cost of Goods Sold (Form AR1050, Line 2, Arkansas Column) .....      | 2 |  | 00 |
| 3. Total Income (Form AR1050, Line 11, Arkansas Column) .....           | 3 |  | 00 |
| 4. Total Deductions (Form AR1050, Line 23, Arkansas Column) .....       | 4 |  | 00 |
| 5. Net Income or Loss (Form AR1050, Line 24, Arkansas Column) .....     | 5 |  | 00 |

**PART 2 DECLARATION OF OFFICER (Sign only after Part I is completed)**

If my federal partnership return is rejected, I understand my state partnership return may also be rejected.

Under penalties of perjury, I declare that I am a general partner or limited liability company member manager of the above partnership and that the information I have given my electronic return originator (ERO), transmitter, and/or internet service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the partnership's 2015 Arkansas income tax return. To the best of my knowledge and belief, the partnership's return is true, correct, and complete. I consent to my ERO, transmitter, and/or ISP sending the partnership's return, this declaration, and accompanying schedules and statements to the State of Arkansas. I also consent to the State of Arkansas sending my ERO, transmitter, and/or ISP an acknowledgment of receipt of transmission and an indication of whether or not the partnership's return is accepted, and, if rejected, the reason(s) for the rejection. If the processing of the partnership's return is delayed, I authorize the State of Arkansas to disclose to my ERO, transmitter, and/or ISP 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.

|                  |   |   |  |
|------------------|---|---|--|
| <b>Sign Here</b> | <div style="display: flex; justify-content: space-between;"> <span>Signature of General Partner or Limited Liability Company Member Manager</span> <span>Date</span> </div> | ➤ | <div style="display: flex; justify-content: space-between;"> <span>Title</span> </div> |
|------------------|---|---|--|

**PART 3 DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER**

I declare that I have reviewed the above Partnership return and that the entries on Form AR8453-PE are complete and correct to the best of my knowledge. If I am only a collector, I understand that I am not responsible for reviewing the partnership's return; I declare that Form AR8453-PE accurately reflects the data on the return. I have obtained the general partner or limited liability company member manager signature on Form AR8453-PE before submitting this return to the State of Arkansas, and have provided the general partner or limited liability company member manager with a copy of all forms and information to be filed with the State of Arkansas. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above partnership's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This declaration of Paid Preparer is based on all information of which the preparer has knowledge.

|                       |  |      |  |   |                   |
|-----------------------|--|------|--|---|-------------------|
| <b>ERO'S Use Only</b> | ERO's signature  | Date | Check if also <input type="checkbox"/> paid preparer | Check if <input type="checkbox"/> self-employed | ERO's SSN or PTIN |
|                       | Firm's name (or yours if self-employed) address and ZIP code |      |  |   | EIN               |
|                       |  |      |  |   | Phone No. ( )     |

**Under penalties of perjury, I declare that I have examined the above partnership'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.**

|                                 |  |      |   |                        |               |
|---------------------------------|--|------|---|------------------------|---------------|
| <b>Paid Preparer's Use Only</b> | Preparer's signature   | Date | Check if <input type="checkbox"/> self-employed | Preparer's SSN or PTIN |               |
|                                 | Firm's name (or yours if self-employed) address and ZIP code |      |   |                        | EIN           |
|                                 |  |      |   |                        | Phone No. ( ) |

**DO NOT MAIL THIS FORM**

## SPECIAL INFORMATION

The State of Arkansas requires a completed and signed AR8453-PE for the partnership return filed electronically. The AR8453-PE must be signed by an authorized officer of the corporation, the general partner or limited liability company member manager of the partnership, the ERO and the paid preparer.

The "Declaration for Electronic Filing" document used for e-filing is Form AR 8453-PE. The document is an affidavit in which the general partner or limited liability company member manager attests to the truth of the information contained in the Declaration and attached return information. It has the same legal effect as if the general partner or limited liability company member manager has actually and physically signed the return.

## DUE DATE

Fiscal year corporation returns must be filed on or before the fifteenth (15th) day of the third (3rd) month following the close of the fiscal year. (Calendar year corporation returns are filed on or before March 15.) All other fiscal year returns must be filed on or before the fifteenth (15th) day of the fourth (4th) month following the close of the fiscal year. (All other calendar year returns are filed on or before April 18, 2016)

All partnership due dates for filing paper partnership returns apply to electronic returns. All providers must ensure that returns are promptly processed. The return or application for extension must be transmitted on or before the due date of the return.

## LINE INSTRUCTIONS

**Name, Address, and Federal Employer Identification Number:** Print or type the information in the spaces provided. Please verify that the Federal Employer Identification Number (FEIN) is clear and correct.

### Part I - DECLARATION OF TAX-PAYER

The general partner or limited liability company member manager signature allows the State of Arkansas to disclose to the ERO and/or the transmitter the reason(s) for delays in the processing of the return.

If the ERO makes changes to the electronic return after Form AR8453-PE has been signed by the general partner or limited liability company member manager but before it is transmitted, the ERO must have the general partner or limited liability company member manager complete and sign a corrected Form AR8453-PE if the total income on line 1 differs from the amount on the electronic return by more than \$25.

### Part II - DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

The State of Arkansas requires the ERO's Signature.

A paid preparer must sign Form AR 8453-PE in the space for Paid Preparer's Use Only. Only handwritten paid preparer signatures are acceptable. If the paid preparer is also the ERO, he/she should not complete the paid preparer's section. Instead, the box labeled "Check if also paid preparer" should be checked.

## IMPORTANT NOTES FOR EROs

- Effective January 1, 2014 and for future years, Electronic Filers, Transmitters, and Electronic Return Originators must retain all signed AR8453-PE forms with all required schedules, attachments and information for three years from the due date of the return or the Arkansas received date, whichever is later.
- You should confirm the identity of the officer.
- Provide the general partner or limited liability company member manager with a signed copy of Form AR8453-PE for his or her records upon request.
- Provide the officer with a corrected copy of Form AR8453-PE if changes are made to the return.
- EROs can sign the form using a rubber stamp, mechanical device (such as a signature pen), or computer software program.
- For more information, see Publication AR4163. Also go to [www.arkansas.gov/efile](http://www.arkansas.gov/efile)

## WHEN AND WHERE TO FILE

For addresses and complete instructions, refer to Federal Publication 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns, and the Arkansas Publication (AR4163) for Authorized Arkansas e-file Providers for Business Returns.