# AR8453-S 2013

## ARKANSAS
## S-CORPORATION INCOME TAX
## DECLARATION FOR ELECTRONIC FILING

**For calendar year 2013, 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. Total Income (Form AR1100S, Line 12) | 1 | | 00 |
| 2. Total Tax (Form AR1100S, Line 30) | 2 | | 00 |
| 3. Estimate Tax Payments (Form AR1100S,Line 31) | 3 | | 00 |
| 4. Overpayment (Form AR1100S, Line 34) | 4 | | 00 |
| 5. Tax Due (Form AR1100S, Line 33) | 5 | | 00 |

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

If the corporation is filing a balance due return, I understand that if the State of Arkansas does not receive full and timely payment of its tax liability, the corporation will remain liable for the tax liability and all applicable interest and penalties. If the federal corporation return is rejected, I understand the state corporation return may also be rejected.

Under penalties of perjury, I declare that I am an officer of the above corporation and that the information I have given my electronic return originator (ERO), transmitter, and/or intermediate service provider (ISP) and the amounts in Part I above agree with the amounts on the corresponding lines of the corporation's 2013 Arkansas income tax return. To the best of my knowledge and belief, the corporation's return is true, correct, and complete. I consent to my ERO, transmitter, and/or ISP sending the corporation'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 corporation's return is accepted, and, if rejected, the reason(s) for the rejection. If the processing of the corporation's return or refund 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.

**Sign Here** ➤ Signature of officer _____ Date _____ ➤ Title _____

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

I declare that I have reviewed the above s-corporation return and that the entries on Form AR8453-S 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 corporation's return; I declare that Form AR8453-S accurately reflects the data on the return. I have obtained the officer's signature on Form AR8453-S before submitting this return to the State of Arkansas, and have provided the officer 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 corporations 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.

| **ERO'S Use Only** | ERO's signature | Date | Check if also paid preparer ☐ | Check if self-employed ☐ | ERO's SSN or PTIN |
|---|---|---|---|---|---|
| | Firm's name (or yours if self-employed) address and ZIP code | | | | EIN<br>Phone No. ( ) |

**Under penalties of perjury,** I declare that I have examined the above corporation'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 Preparer's Use Only** | Preparer's signature | Date | Check if self-employed ☐ | Preparer's SSN or PTIN |
|---|---|---|---|---|
| | Firm's name (or yours if self-employed) address and ZIP code | | | EIN<br>Phone No. ( ) |

# DO NOT MAIL THIS FORM

## SPECIAL INFORMATION

The State of Arkansas requires a completed and signed AR8453-S for the corporation return filed electronically. The AR8453-S 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 the Form AR8453-S. The document is an affidavit in which the officer attests to the truth of the information contained in the Declaration and attached return information. It has the same legal effect as if the officer has actually and physically signed the return.

## DUE DATE

The due date for calendar year filers is March 15th. The due date for fiscal year filers is 2 ½ months after the close of tax year.

All corporation due dates for filing paper corporation 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 original due date of the return.

## LINE INSTRUCTIONS

**Name, Address, and Federal Employer Identification Number (FEIN):** Print or type the information in the spaces provided and verify the FEIN is clear and correct. An incorrect or missing FEIN may delay processing of the return.

### Part I - DECLARATION OF TAXPAYER

The officer's 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-S has been signed by the officer but before it is transmitted, the ERO must have the taxpayer complete and sign a corrected Form AR8453-S.

### 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 AR8453-S 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, 2000, EROs are required to retain AR8453-S forms for 3 years from the original due date of the tax return.
- You should confirm the identity of the officer.
- Provide the officer with a signed copy of Form AR8453-S for his or her records upon request.
- Provide the officer with a corrected copy of Form AR8453-S 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

## 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.