

# 2006 AR1000S ARKANSAS INDIVIDUAL INCOME TAX RETURN

Full Year Resident/Short Form

Dept. Use Only

S

Jan 1 - Dec 31, 2006 or fiscal year ending \_\_\_\_\_, 20\_\_

<b>USE LABEL, PRINT OR TYPE</b>	FIRST NAME(S) AND INITIAL(S) <i>(List both spouses if applicable)</i>	LAST NAME(S) <i>(See Instructions)</i>	YOUR SOCIAL SECURITY NUMBER
	MAILING ADDRESS <i>(Number and Street, P.O. Box or Rural Route)</i>		SPOUSE'S SOCIAL SECURITY NUMBER
	CITY, STATE AND ZIP CODE		<div style="border: 1px solid black; padding: 2px;"><b>IMPORTANT</b> ▲ You <b>MUST</b> enter your SSN(s) above ▲</div> HOME PHONE: WORK PHONE:

<b>FILING STATUS</b> <small>Check only one box</small>	1. <input type="checkbox"/> SINGLE <i>(Or widowed before 2006 or divorced at end of 2006)</i> 2. <input type="checkbox"/> MARRIED FILING JOINT <i>(Even if only one had income)</i> 3. <input type="checkbox"/> HEAD OF HOUSEHOLD <i>(See Instructions)</i> If the qualifying person is your child but not your dependent, enter child's name here: _____	4. <input type="checkbox"/> MARRIED FILING SEPARATELY ON THE SAME RETURN 5. <b>IF FILING STATUS 5, USE AR1000/AR1000NR - LONG FORM</b> 6. <input type="checkbox"/> QUALIFYING WIDOW(ER) with dependent child Year spouse died: <i>(See Instructions)</i> _____
	HAVE YOU FILED A FEDERAL EXTENSION? <input type="checkbox"/> Check this box if you have filed an automatic Federal Extension Form 4868	

<b>PERSONAL CREDITS</b>	7A. <input type="checkbox"/> YOURSELF • <input type="checkbox"/> 65 or OVER • <input type="checkbox"/> 65 SPECIAL • <input type="checkbox"/> BLIND • <input type="checkbox"/> DEAF <input type="checkbox"/> HEAD OF HOUSEHOLD/QUALIFYING WIDOW(ER) <input type="checkbox"/> SPOUSE • <input type="checkbox"/> 65 or OVER • <input type="checkbox"/> 65 SPECIAL • <input type="checkbox"/> BLIND • <input type="checkbox"/> DEAF Multiply number of boxes checked from Line 7A <input type="checkbox"/> X \$22=	00
	7B. First name(s) of dependent(s): <i>(Do not list yourself or spouse)</i> _____ Multiply number of dependent(s) from Line 7B <input type="checkbox"/> X \$22=	00
	7C. TOTAL PERSONAL CREDITS: <i>(Add Lines 7A and 7B. Enter total here and on Line 16)</i> ..... 7C	00

<b>INCOME</b>	<b>ROUND ALL AMOUNTS TO WHOLE DOLLARS</b>		<b>(A) Your/Joint Income</b>	<b>(B) Spouse's Income Status 4 Only</b>
	8. Wages, salaries, tips, etc:..... 8		00	8 00
	9. Interest income/dividend income: <i>(If interest or dividends are over \$1,500, attach page ARS2)</i> .... 9		00	9 00
	10. Miscellaneous income: <i>(List type and amount. See instructions)</i> ..... 10		00	10 00
	11. <b>TOTAL INCOME:</b> <i>(Add Lines 8 through 10)</i> ..... 11 ●		00	11 ● 00

<b>DEDUCTIONS TAX COMPUTATION</b>	12. Select tax table: <input type="checkbox"/> <b>LOW INCOME</b> Table 1 <input type="checkbox"/> <b>REGULAR</b> Table 2 <i>NOTE: If you qualify for the Low Income Table, enter zero (0) on Line 12</i> Standard Deduction: <i>(See Instructions)</i> ..... 12 ●		00	12 ● 00
	13. Taxable Income: <i>(Subtract Line 12 from Line 11)</i> ..... 13 ●		00	13 ● 00
	14. Enter tax from table: ..... 14		00	14 00
	15. <b>TOTAL TAX:</b> <i>(Add Lines 14A and 14B)</i> ..... 15 ●		00	15 ● 00

<b>TAX CREDITS</b>	16. Personal Tax Credits: <i>(Enter total from Line 7C)</i> ..... 16 ●		00	
	17. Child Care Credit: <i>(20% of Federal Credit Allowed, Attach Federal Form 2441 or 1040A, Sch. 2)</i> ... 17 ●		00	
	18. <b>TOTAL CREDITS:</b> <i>(Add Lines 16 and 17)</i> ..... 18 ●		00	18 ● 00
	19. <b>NET TAX:</b> <i>(Subtract Line 18 from Line 15. If Line 18 is greater than Line 15, enter 0)</i> ..... 19 ●		00	19 ● 00

<b>PAYMENTS</b>	20. Arkansas Income Tax withheld: <i>[Attach State copies of W-2 Form(s)]</i> ..... 20 ●		00	
	21. Early Childhood Program: Certification Number _____ <i>(20% of Fed. credit allowed, Attach Fed. Form 2441 or 1040A, Sch. 2 and Cert. Form AR1000EC)</i> .. 21 ●		00	
	22. <b>TOTAL PAYMENTS:</b> <i>(Add Lines 20 and 21)</i> ..... 22 ●		00	22 ● 00

<b>REFUND OR TAX DUE</b>	23. <b>AMOUNT OF OVERPAYMENT/REFUND:</b> <i>(If Line 22 is greater than Line 19, enter difference)</i> ..... 23 ●		00	
	24. Amount of Check-Off Contributions: <i>(Attach Schedule AR1000-CO)</i> ..... 24 ●		00	
	25. <b>AMOUNT TO BE REFUNDED TO YOU:</b> <i>(Subtract Line 24 from Line 23)</i> ..... <b>REFUND</b> 25 ●		00	25 ● 00
	26. <b>AMOUNT DUE:</b> <i>(If Line 22 is less than Line 19, enter the difference; If over \$1,000 see instructions)</i> ..... <b>TAX DUE</b> 26 ●		00	26 ● 00

**PLEASE SIGN HERE: Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.**

<b>PLEASE SIGN HERE</b>	Your Signature	Occupation	Date	May the Arkansas Revenue Agency discuss this return with the preparer of the return? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Spouse's Signature	Occupation	Date	

<b>PAID PREPARER</b>	Paid Preparer's Signature	ID Number/Social Security Number	<b>For Department Use Only</b>	
	Preparer's Name:	City/State/Zip:	A	●
	Address:	Telephone Number:	B ●	
			C ●	

**Mailing Information** Mail **REFUND** returns to: DFA State Income Tax, P. O. Box 1000, Little Rock, AR 72203-1000  
 Mail **TAX DUE** returns to: DFA State Income Tax, P. O. Box 2144, Little Rock, AR 72203-2144  
 Mail **NO TAX DUE** returns to: DFA State Income Tax, P. O. Box 8026, Little Rock, AR 72203-8026

Part 1 INTEREST INCOME			Part 2 DIVIDEND INCOME		
<p>Interest on bank deposits, notes, mortgages, from individuals, corporation bonds, savings and loan deposits, and credit union deposits are taxable. Interest on obligations of other states and subdivisions is fully taxable.</p> <p>List below the names of the interest sources and designate ownership by writing Y (Yours), S (Spouse's) or J (Joint).</p>			<p>Dividends and other distributions on stock are fully taxable. There is no dividend exclusion applicable to Arkansas.</p> <p>List below the names of the dividend sources and designate ownership by writing Y (Yours), S (Spouse's) or J (Joint).</p>		

Y S J	NAME OF PAYER	AMOUNT	Y S J	NAME OF PAYER	AMOUNT
		00			00
		00			00
		00			00
		00			00
		00			00
		00			00
		00			00
		00			00
		00			00
<b>Total Interest Income:</b> <i>Enter here and on Line 9.....</i>		00	<b>Total Dividend Income:</b> <i>Enter here and on Line 9.....</i>		00

**CHECKLIST FOR AR1000S FILERS**

This checklist is to help you make sure that your form is filled out correctly. Errors may delay your refund.

- 1. Is your name and address correct on the preprinted label? If not, did you enter the name(s) and address for you and your spouse in the space provided?
- 2. Did you enter the Social Security Number(s) for you and your spouse in the space(s) provided?
- 3. Did you use the correct filing status column and taxable income to find your tax in the tax table?
- 4. Did you attach all your W-2(s)?
- 5. Did you add and subtract correctly when figuring your refund or amount owed?
- 6. Did you sign and date your return?
- 7. Did you keep a copy of your return for your records?

**Please note the due date: APRIL 15, 2007.**