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2013 AR1000S

ARKANSAS INDIVIDUAL INCOME TAX RETURN

Full Year Resident/Short Form

Jan. 1 - Dec. 31, 2013 or fiscal year ending _____ , 20 ___ ●

S1

CHECK BOX IF AMENDED RETURN ●

Dept. Use Only ●

USE LABEL, PRINT OR TYPE

PRIMARY NAME ●	MI ●	LAST NAME ●	PRIMARY SOCIAL SECURITY NUMBER ●
SPOUSE NAME ●	MI ●	LAST NAME ●	SPOUSE'S SOCIAL SECURITY NUMBER ●
MAILING ADDRESS *(Number and Street, P.O. Box or Rural Route)* ●			
CITY, STATE AND ZIP CODE ●			☐ **Check this box if you have filed a state extension or an automatic federal extension**

FILING STATUS Check only 1 box

1. ● ☐ SINGLE *(Or widowed before 2013 or divorced at end of 2013)*
2. ● ☐ MARRIED FILING JOINT *(Even if only one had income)*
3. ● ☐ HEAD OF HOUSEHOLD *(See Instructions)* If the qualifying person is your child but not your dependent, enter child's name here: _____
4. ● ☐ MARRIED FILING SEPARATELY ON THE SAME RETURN
5. ***IF FILING STATUS 5, USE AR1000F/AR1000NR - LONG FORM***
6. ● ☐ QUALIFYING WIDOW(ER) with dependent child Year spouse died: *(See Instructions)*_____

PERSONAL TAX CREDITS

7A. ☐ YOURSELF ● ☐ 65 or OVER ● ☐ 65 SPECIAL ● ☐ BLIND ● ☐ DEAF ☐ HEAD OF HOUSEHOLD/ QUALIFYING WIDOW(ER) *(Filing Status 3 Only)* *(Filing Status 6 Only)*

☐ SPOUSE ● ☐ 65 or OVER ● ☐ 65 SPECIAL ● ☐ BLIND ● ☐ DEAF

7B. **Dependents** **(Do not list yourself or spouse)** Multiply number of boxes checked from 7A ☐ X $26= ____ 00

First Name	Last Name	Dependent's Social Security Number	Dependent's relationship to you
1.			
2.			
3.			

7B. Multiply number of dependents from 7B ● ☐ X $26 = ____ 00

7C. **TOTAL PERSONAL TAX CREDITS:** *(Add Lines 7A and 7B. Enter total here and on Line 16)* 7C ____ 00

INCOME

ROUND ALL AMOUNTS TO WHOLE DOLLARS

		(A) Your/Joint Income	(B) Spouse's Income Status 4 Only
8. Wages, salaries, tips, etc: (Attach W-2s)	8 ●	00	8 ● 00
9. Interest income/dividend income: *(If interest or dividends are over $1,500, attach page ARS2)*	9 ●	00	9 ● 00
10. Miscellaneous income: *(List type and amount. See instructions)*	10 ●	00	10 ● 00
11. **TOTAL INCOME:** *(Add Lines 8 through 10)*	11 ●	00	11 ● 00

DEDUCTIONS TAX COMPUTATION

12. Select tax table: ● ☐ **LOW INCOME** Table ☐ **REGULAR** Table ***NOTE:*** *If you qualify for the Low Income Table, enter zero (0) on Line 12*

Standard Deduction: *(See Instructions)*	12 ●	00	12 ● 00
13. Taxable Income: *(Subtract Line 12 from Line 11)*	13 ●	00	13 ● 00
14. Enter tax from table:	14	00	14 00
15. **TOTAL TAX:** *(Add Lines 14A and 14B)*			15 ● 00

TAX CREDITS

16. Personal Tax Credits: *(Enter total from Line 7C)*	16 ●	00
17. Child Care Credit: *(20% of federal credit allowed, attach federal Form 2441)*	17 ●	00
18. **TOTAL CREDITS:** *(Add Lines 16 and 17)*	18 ●	00
19. **NET TAX:** *(Subtract Line 18 from Line 15. If Line 18 is greater than Line 15, enter 0)*	19 ●	00

PAYMENTS

20. Arkansas Income Tax withheld: *[Attach state copies of W-2 Form(s)]*	20 ●	00
21. AMENDED RETURNS ONLY - Previous payments: (See instructions)	21 ●	00
22. Early Childhood Program: Cert. # (Attach form. See inst.) _____	22 ●	00
23. **TOTAL PAYMENTS:** *(Add Lines 20 through 22)*	23 ●	00
24. AMENDED RETURNS ONLY - Previous refund: (See instructions)	24 ●	00
25. Adjusted Total Payments (Subtract Line 24 from Line 23)	25 ●	00

REFUND OR TAX DUE

26. **AMOUNT OF OVERPAYMENT/REFUND:** *(If Line 25 is greater than Line 19, enter difference)*	26 ●	00
27. Amount of Check-off Contributions: *(Attach Schedule AR1000-CO)*	27 ●	00
28. **AMOUNT TO BE REFUNDED TO YOU:** *(Subtract Line 27 from Line 26)* **REFUND**	28 ●	00

DIRECT DEPOSIT? If you want your refund direct deposited you must check this box ● ☐ and **complete Form ARDD** and attach it to your return. (Direct deposit is not available for amended returns.)

29. **AMOUNT DUE:** *(If Line 25 is less than Line 19, enter difference; If over $1,000 see inst.)* **TAX DUE**	29 ●	00

Attach Form AR1000V to your check or money order payable in US Dollars to Dept. of Finance & Admin. Write SSN on payment. For credit card, see inst.

PLEASE SIGN HERE

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.**

Your Signature SIGN HERE	Occupation	Date	Phone Number:
Spouse's Signature	Occupation	Date	May the Arkansas Revenue Agency discuss this return with the preparer of the return? ☐ Yes ☐ No

PAID PREPARER

Paid Preparer's Signature	ID Number/Social Security Number ●	
Preparer's Name: Address:	City/State/Zip: Telephone Number:	**For Department Use Only** A ____ ●

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Part 1 INTEREST INCOME

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.

List below the names of the interest sources and designate ownership by writing Y (Yours), S (Spouse's) or J (Joint).

Y S J	NAME OF PAYER	AMOUNT	
			00
			00
			00
			00
			00
			00
			00
			00
Total Interest Income: *Enter here and on Line 9.....*			00

Part 2 DIVIDEND INCOME

Dividends and other distributions on stock are fully taxable. There is no dividend exclusion applicable to Arkansas.

List below the names of the dividend sources and designate ownership by writing Y (Yours), S (Spouse's) or J (Joint).

Y S J	NAME OF PAYER	AMOUNT	
			00
			00
			00
			00
			00
			00
			00
			00
Total Dividend Income: *Enter here and on Line 9....*			00

If you owe an amount due from Line 29, AR1000S, you have the option of paying by credit card.

OFFICIAL PAYMENTS CORP.

MasterCard

AMERICAN EXPRESS Cards

VISA

DISCOVER NOVUS

www.officialpayments.com
or call (800) 272-9829