

# AR1100NOL

## Arkansas Corporation Income Tax Section Schedule of Net Operating Loss

This form should be used to calculate Net Operating Loss (NOL) amounts to enter on Line 31 or Schedule A, Line C3 of the Arkansas Form AR1100CT.

**Name of Corporation:** \_\_\_\_\_

**FEIN:** \_\_\_\_\_

|                  |  |
|------------------|--|
| <b>Tax Year:</b> |  |
| Tax Year 1:      |  |
| Tax Year 2:      |  |
| Tax Year 3:      |  |
| Tax Year 4:      |  |
| Tax Year 5:      |  |

|                 |  |
|-----------------|--|
| <b>NOL Amt:</b> |  |
| Claim Amt 1:    |  |
| Claim Amt 2:    |  |
| Claim Amt 3:    |  |
| Claim Amt 4:    |  |
| Claim Amt 5:    |  |
| Amt Expired:    |  |

|                    |  |
|--------------------|--|
| <b>Yr Expires:</b> |  |
| Balance 1:         |  |
| Balance 2:         |  |
| Balance 3:         |  |
| Balance 4:         |  |
| Balance 5:         |  |

|                  |  |
|------------------|--|
| <b>Tax Year:</b> |  |
| Tax Year 1:      |  |
| Tax Year 2:      |  |
| Tax Year 3:      |  |
| Tax Year 4:      |  |
| Tax Year 5:      |  |

|                 |  |
|-----------------|--|
| <b>NOL Amt:</b> |  |
| Claim Amt 1:    |  |
| Claim Amt 2:    |  |
| Claim Amt 3:    |  |
| Claim Amt 4:    |  |
| Claim Amt 5:    |  |
| Amt Expired:    |  |

|                    |  |
|--------------------|--|
| <b>Yr Expires:</b> |  |
| Balance 1:         |  |
| Balance 2:         |  |
| Balance 3:         |  |
| Balance 4:         |  |
| Balance 5:         |  |

|                  |  |
|------------------|--|
| <b>Tax Year:</b> |  |
| Tax Year 1:      |  |
| Tax Year 2:      |  |
| Tax Year 3:      |  |
| Tax Year 4:      |  |
| Tax Year 5:      |  |

|                 |  |
|-----------------|--|
| <b>NOL Amt:</b> |  |
| Claim Amt 1:    |  |
| Claim Amt 2:    |  |
| Claim Amt 3:    |  |
| Claim Amt 4:    |  |
| Claim Amt 5:    |  |
| Amt Expired:    |  |

|                    |  |
|--------------------|--|
| <b>Yr Expires:</b> |  |
| Balance 1:         |  |
| Balance 2:         |  |
| Balance 3:         |  |
| Balance 4:         |  |
| Balance 5:         |  |

|                  |  |
|------------------|--|
| <b>Tax Year:</b> |  |
| Tax Year 1:      |  |
| Tax Year 2:      |  |
| Tax Year 3:      |  |
| Tax Year 4:      |  |
| Tax Year 5:      |  |

|                 |  |
|-----------------|--|
| <b>NOL Amt:</b> |  |
| Claim Amt 1:    |  |
| Claim Amt 2:    |  |
| Claim Amt 3:    |  |
| Claim Amt 4:    |  |
| Claim Amt 5:    |  |
| Amt Expired:    |  |

|                    |  |
|--------------------|--|
| <b>Yr Expires:</b> |  |
| Balance 1:         |  |
| Balance 2:         |  |
| Balance 3:         |  |
| Balance 4:         |  |
| Balance 5:         |  |

|                  |  |
|------------------|--|
| <b>Tax Year:</b> |  |
| Tax Year 1:      |  |
| Tax Year 2:      |  |
| Tax Year 3:      |  |
| Tax Year 4:      |  |
| Tax Year 5:      |  |

|                 |  |
|-----------------|--|
| <b>NOL Amt:</b> |  |
| Claim Amt 1:    |  |
| Claim Amt 2:    |  |
| Claim Amt 3:    |  |
| Claim Amt 4:    |  |
| Claim Amt 5:    |  |
| Amt Expired:    |  |

|                    |  |
|--------------------|--|
| <b>Yr Expires:</b> |  |
| Balance 1:         |  |
| Balance 2:         |  |
| Balance 3:         |  |
| Balance 4:         |  |
| Balance 5:         |  |