

STATE OF ARKANSAS FIDUCIARY RETURN

		14 or fiscal year beginning and ending		_20 •		•			
Na	me c		T	/pe of entity:					
•			•			[Decedent's estate		
Na	me a	1	Simpl	le trust					
•		and title of fiduciary or trustee						olex trust	
Ма	ilina	address	-	State or fede	rol		ESBT		
•						tor trust			
Cit	v eta	te and ZIP code	<u> </u>	extension file	-			table trust	
•	, 010							ed income fund	
	ORIGINAL RETURN • AMENDED RETURN • FINAL RETURN A. ALL INCOME							ARKANSAS INCOME	
	1.	Interest income:	1		00	1		00	
	2.	Ordinary dividends:	2		00	2	2	00	
		Net profit from trade or business: (attach schedule)			00	3		00	
me		Capital gains: (see instructions)			00	4		00	
ncome		Rents, royalties, partnerships, other estates and trusts, etc: (attach schedule)			00	5	;	00	
-		Farm income: (attach schedule)			00	6		00	
	I .	Other income:			00	7	, —	00	
	I .	TOTAL INCOME: (add Lines 1 through 7)			00	8		00	
		Taxes:			00	9	-	00	
	I .	Interest:			00	10		00	
		Charitable contributions:			00	11		00	
Suc	I .	Fees: (fiduciary/attorney/accountant/preparer)			00	12		00	
Deductions	I	Other deductions:			00	13		00	
edt	I .	Total deductions: (add Lines 9 through 13)			00		•	00	
		Adjusted income before distributions: (subtract Line 14 from Line 8)			00			00	
	I	Amounts to be distributed to beneficiaries:			00			00	
	I	Adjusted income after distributions: (subtract Line 16 from Line 15)			00			00	
		Standard deduction:					-	2000 00	
	19.	NET TAXABLE INCOME: (subtract Line 18 from Line 17)				.19	,	00	
	20.	TOTAL TAX: Enter tax from REGULAR TAX TABLE using the amount on Line	19,	Column B:		.20)	00	
	21.	Personal tax credit:	21		26 00			•	
	22.	Other state tax credit:	22	•	00				
	23.	Business Incentive Tax Credit: (attach AR1000TC)	23	•	00				
		TOTAL CREDITS: (add Lines 21 through 23)				.24	•	00	
	25.	NET TAX: (subtract Line 24 from Line 20)				.25	5	00	
	26.	Arkansas income tax withheld: (attach AR1099PT and/or 1099R)	26	1	00			· · ·	
ente	27.	Estimated tax paid or credit brought forward from last year:	27	•	00				
Payment	28.	Tax paid with extension:	28	•	00				
	29.	Payments made with or after the filing of original return: (see instructions)	29	•	00				
and	30.	Total payments: (add Lines 26 through 29)	30		00				
Тах	31.	Overpayments received: (see instructions)	31	•	00				
	32.	NET PAYMENTS: (subtract Line 31 from Line 30)				.32	•	00	
	33.	Amount of overpayment: (if Line 32 is greater than Line 25, enter difference)				.33		00	
	34.	Amount to be applied to 2015 estimated tax:	34	•	00				
	35.	AMOUNT TO BE REFUNDED TO YOU: (subtract Line 34 from Line 33)				.35	5 •	00	
	36.	AMOUNT DUE: (if Line 32 is less than Line 25, enter difference)				.36	5 •	00	
	37.	Attach Form AR2210 or AR2210A. If required, enter exception in box 37A	enal	lty 37B •	0	0			
		Attach Form AR1002V to your payment. To pay by credit card see instructions		TOTAL	DUE 3	7C		00	
Unc	ler pe	nalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief,	the	statements are true ar	nd complete	э.		ay the Arkansas Revenue ncy discuss this return with	
Fid	uciar	y/trustee's signatureDate]	-	e preparer shown above?	
Pre	pare		Yes No						
	ne	- [OFFICE USE ONLY					
	dress	□ ID/SSN City, state, and ZIP				A	•		

Schedule A: Capital Gains Worksheet (Attach Federal Schedule D)

In Arkansas only 70% of net long term capital gain is taxed. 100% of short term capital gains is taxed.

Per Act 1488 of 2013, the amount of net capital gain in excess of ten million dollars (\$10,000,000) from a gain realized on or after January 1, 2014, is exempt from state tax.

Complete this worksheet if you have a **NET CAPITAL GAIN OR LOSS** reported on federal Schedule D, federal Form 1041. **The amount of capital loss that may be deducted after offsetting capital gains is limited to \$3,000.**

Adjust your gains and losses for any depreciation differences, if any, in the federal and Arkansas amounts using Lines 2, 5 and 10. *

*(Arkansas did not adopt the federal "bonus depreciation" provision from previous years. Therefore, there may be a difference in federal and Arkansas amounts of depreciation allowed.)

						Per Sch D, Fo	orm 1041	Arkansas			
1.		-	m capital gain or loss repor				00	00			
			41				00	00			
2.			any, for depreciation different					00			
0							00				
3.	-		apital gain or loss, add (or		I Line 2			00			
4.			t-term capital loss, if any), Form 1041		4		00	00			
5.	,		any, for depreciation different								
5.	•						5	00			
6.			00								
7a.			•	,				00			
7b.		Arkansas net capital gain or loss (<i>If gain, subtract Line 6 from 3. If loss add Lines 6 and 3</i>)									
8.			ount. If a gain, multiply Line					00			
9.	Enter federal sh	ter federal short-term capital gain, if any, reported on									
	Line 7, Schedul	e D, F	orm 1041		00	00					
10.	Enter adjustmer		00								
	amounts	10									
11.	Arkansas short-term capital gain, add (or subtract) Line 9 and Line 10							00			
12.		otal taxable Arkansas capital gain or loss, add Lines 8 and 11, (loss limited to \$3,000),									
	enter here and	on Lin	e 4, Form AR1002F/AR100	02NR			12	00			
		Ş	Schedule B: Inc	come Distri	ibution (Attach	n Federal	K-1s)				
	Beneficiaries' sha	are of i	ncome:		Number of beneficiaries who received distributions:						
FI	RST NAME	МІ	LAST NAME	SSN	ADDRESS	ST	ZIP	AMOUNT			
								00			
								00			
								00			
								00			
				1				00			

Mail TAX DUE to: State Income Tax, P. O. Box 2144, Little Rock, AR 72203-2144

Mail **REFUND** to: State Income Tax, P. O. Box 1000, Little Rock, AR 72203-1000

 Mail AMENDED to:
 State Income Tax, P. O. Box 3628, Little Rock, AR 72203-3628

 Mail NO TAX DUE to:
 State Income Tax, P. O. Box 8026, Little Rock, AR 72203-8026

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