AR3 2017

## ARKANSAS INDIVIDUAL INCOME TAX ITEMIZED DEDUCTIONS

Primary Name	Prim	nary Social Security Numb	er
MEDICAL AND DENTAL EXPENSES: [Do not include expense(s) paid by others]. (See Inst	ructions)		
Medical and dental expenses:	1	00	
Enter amount from Form AR1000F/AR1000NR, line 24(A) and 24(B):2	00		
3. Multiply line 2 by 10% (.10), otherwise enter 0:			
4. TOTAL MEDICAL EXPENSES: (Subtract line 3 from line 1; if more than line 1, enter 0)		4 ≻	00
TAXES: (See Instructions)			
5. Real estate tax:			
Personal property tax or other taxes: (List type and amount)	6	00	
7. TOTAL TAXES: (Add lines 5 and 6)		7≻	00
INTEREST EXPENSES: (See Instructions)			
Home mortgage interest paid to financial institutions:		00	
Home mortgage interest paid to an individual: Name:			
Address:	9	00	
10. Deductible points:		00	
11. Investment interest: (Attach federal Form 4952)	11	00	
12. TOTAL INTEREST EXPENSE: (Add lines 8 through 11)		12 ➤	00
CONTRIBUTIONS: (See Instructions)			
13. Cash contributions:	13	00	
14. Art and literary contributions:	14	00	
15. Other:	15	00	
16. Carryover contributions: (List type and amount)	16	00	
17. TOTAL CONTRIBUTIONS: (Add lines 13 through 16)		17 >	00
CASUALTY AND THEFT LOSSES: (See Instructions)			
18. TOTAL CASUALTY AND THEFT LOSSES: (Attach federal Form 4684)		18 ➤	00
POST-SECONDARY EDUCATION TUITION DEDUCTION(S): (See Instructions)			
19. TOTAL POST-SECONDARY EDUCATION TUITION DEDUCTION(S): [Attach AR1075(s)]		19 ➤	00
MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% AGI LIMIT: (See Instructions)			
20. Unreimbursed employee business expenses: (Attach federal Form 2106)	20	00	
21. Other expenses: (List type and amount)	21	00	
22. Add the amounts on lines 20 and 21. Enter the total:	<u></u> 22	00	
23. Enter amount from Form AR1000F/AR1000NR, line 24(A) and 24(B): 23	00		
24. Multiply line 23 above by 2% (.02):	24	00	
25. TOTAL MISCELLANEOUS DEDUCTIONS: (Subtract line 24 from line 22; If line 24 is more the	nan line 2	22, enter 0) <b>25</b>	00
OTHER MISCELLANEOUS DEDUCTIONS: (See Instructions)			
26. Volunteer firefighter expenses:	26	00	
27. Other miscellaneous deductions: (List type and amount)	27	00	
28. TOTAL MISCELLANEOUS DEDUCTIONS NOT SUBJECT TO THE 2% AGI LIMITATION:	Add line	s 26 and 27) <b>28</b> >	00
TOTAL ITEMIZED DEDUCTIONS:		_	
29. Add amounts on Lines 4, 7, 12, 17, 18,19, 25, and 28 and enter the total here:		29 ➤	00
Complete lines 30 - 34 ONLY if Filing Status 4 or 5.		PRIMARY	SPOUSE'S
		justed Gross Income	Adjusted Gross Income
30. Enter adjusted gross income from Form AR1000F/AR1000NR, line 24, Columns (A) and (B) here:		00 <sub>30B</sub>	00
31. Total Arkansas adjusted gross income: (Add columns 30A and 30B from above)			
32. Divide the amount on line 30A above by the amount on line 31. Enter the percentage here:			%
33. Multiply line 29 by the percentage on line 32. Enter here and on Form AR1000F/AR1000NI			00
34. Subtract line 33 from line 29. Enter here and on Form AR1000F/AR1000NR, line 25, Colum		-	1
your spouse are using Filing Status 5, enter on line 25, Col. (A) of your spouse's return:		<b>(Spouse)</b> 34	00