Name	Social Security	Number	
MEDICAL AND DENTAL EXPENSES: [Do not include expense(s) paid by others]. (See	Instructions)		
Medical and dental expenses:	· ·	00	
2. Enter amount from AR1000/AR1000NR, Line 28(A) and 28(B)			
3. Multiply Line 2 by 7.5% (.075)		00	
4. TOTAL MEDICAL EXPENSES: (Subtract Line 3 from Line 1; If Line 3 is more than Line 1		4>	00
TAXES: (See Instructions)		<u> </u>	•
5. Real estate tax:	5	00	
6. Personal property tax or other taxes (Attach list):	6	00	
7. TOTAL TAXES: (Add Lines 5 and 6)		7>	00
INTEREST EXPENSES: (See Instructions)			
Home mortgage interest paid to financial institutions:	8	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: (See Instructions)		00	
15. Check-off contributions: (See Instructions)		00	
16. Other:		00	
17. Carryover contributions from prior years:	00		
18. TOTAL CONTRIBUTIONS: (Add Lines 13 through 17)		18>	00
CASUALTY AND THEFT LOSSES: (See Instructions)			
19. TOTAL CASUALTY AND THEFT LOSSES: (Attach Federal Form 4684)		19>	00
POST-SECONDARY EDUCATION TUITION DEDUCTION(S): (See Instructions)			
20. TOTAL POST-SECONDARY EDUCATION TUITION DEDUCTION(S): [Attach AR1075(s	s)]	20➤	00
MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% AGI LIMIT: (See Instructions,			
21. Unreimbursed employment business expenses: (Attach Federal Form 2106)		00	
22. Other expenses: (List type and amount)	22	00	
23. Add the amounts on Lines 21 and 22. Enter the total.		00	
24. Enter the amount from AR1000/AR1000NR, Line 28(A) and 28(B) 24		<del></del>	
25. Multiply Line 24 above by 2% (.02)	25	00	
26. TOTAL MISCELLANEOUS DEDUCTIONS: (Subtract Line 25 from Line 23; If Line 25 is n	more than Line 23, enter 0)	26≯	00
OTHER MISCELLANEOUS DEDUCTIONS: (See Instructions)			
27. TOTAL MISCELLANEOUS DEDUCTIONS NOT SUBJECT TO THE 2% AGI LIMITATION	N. (Attach list)	27>	00
TOTAL ITEMIZED DEDUCTIONS:			
28. If the amount on AR1000/AR1000NR, Line 28(A) and 28(B) is \$145,950 or less (\$72,975)	if married		
filing separately on separate returns), add Lines 4, 7, 12, 18, 19, 20, 26 and 27. Enter the total here.			
If the amount on AR1000/AR1000NR, Line 28(A) and 28(B) is over \$145,950 (\$72,975 if married filing separately on			
separate returns), see worksheet in the instructions to calculate the allowable amount to e			
IF YOU CHECKED FILING STATUS 1, 2, 3 OR 6, enter the allowable amount here and o	on AR1000/AR1000NR, Line	e 29(A) 28➤	00
Note: Complete lines 29 through 33 ONLY if you and	YOU	R QD	OUSE'S
your spouse are using Filing Status 4 or 5.	Adjusted Gro		Gross Income
On Faterthand Particular and San ( APAGOG/APAGGGC P 11 CO O C 12 C 17			
29. Enter the adjusted gross income from AR1000/AR1000NR, Line 28, Columns (A) and (B)	nere. 29A	00 29B	00
30. Total Arkansas adjusted gross income: (Add columns 29A and 29B from above)		30	00
j ov. Total Athalisas aujusteu gross iricume. (Aud columnis 29A and 29D 110m above)			100
31. Divide the amount on Line 29A above by the amount on Line 30. Enter the percentage he	ere	31	%
2 and announced and and announced announced in the perioditage flo			70
32. Multiply Line 28 by the percentage on Line 31. Enter here and on AR1000/AR1000NR, Lin	ne 29, Col. (A)	(YOU) 32	00
33. Subtract Line 32 from Line 28, Form AR3. Enter here and on AR1000/AR1000NR, Line 29			
If you and your spouse are using Filing status 5, enter this amount on Line 29, Col. (A) of y	your spouse's return	(SPOUSE) 33	00