

# 2012 AR1000NR

## ARKANSAS INDIVIDUAL INCOME TAX RETURN

**Nonresident and Part Year Resident**

# NR1

**CHECK BOX IF  
AMENDED RETURN**

Jan. 1 - Dec. 31, 2012 or fiscal year ending \_\_\_\_\_, 20 \_\_\_\_ •

Dept. Use Only

USE LABEL OR PRINT OR TYPE	PRIMARY NAME •	MI •	LAST NAME •	YOUR 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 •			<b>Important: You MUST enter your SSN(s) above</b>

<b>ATTACH A COPY OF YOUR COMPLETE FEDERAL RETURN</b>	<b>NONRESIDENT:</b> <input type="checkbox"/> (List State of residence) <b>PART YEAR RESIDENT:</b> <input type="checkbox"/> (Dates Lived in AR)
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FILING STATUS Check Only One Box	1. <input type="checkbox"/> SINGLE (Or widowed before 2012 or divorced at end of 2012) 2. <input type="checkbox"/> MARRIED FILING JOINT (Even if only one had income) 3. <input type="checkbox"/> HEAD OF HOUSEHOLD (See Instructions) If the qualifying person was your child but not your dependent, enter child's name here: _____	4. <input type="checkbox"/> MARRIED FILING SEPARATELY ON THE SAME RETURN 5. <input type="checkbox"/> MARRIED FILING SEPARATELY ON DIFFERENT RETURNS Enter spouse's name here and SSN above _____ 6. <input type="checkbox"/> QUALIFYING WIDOW(ER) with dependent child Year spouse died: (See Instructions) _____
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<b>HAVE YOU FILED AN EXTENSION?</b>	<input type="checkbox"/> <b>Check this box if you have filed a state extension or an automatic federal extension</b>
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PERSONAL TAX CREDITS	7A. <input type="checkbox"/> YOURSELF • <input type="checkbox"/> 65 or OVER • <input type="checkbox"/> 65 SPECIAL • <input type="checkbox"/> BLIND • <input type="checkbox"/> DEAF <input type="checkbox"/> SPOUSE • <input type="checkbox"/> 65 or OVER • <input type="checkbox"/> 65 SPECIAL • <input type="checkbox"/> BLIND • <input type="checkbox"/> DEAF (Filing Status 3 Only) (Filing Status 6 Only)	Multiply number of boxes checked from 7A..... <input type="checkbox"/> X \$23 = <input type="text"/> 00																								
	7B. <b>Dependents (Do not list yourself or spouse)</b> <table border="1"> <thead> <tr> <th>First Name</th> <th>Last Name</th> <th>Dependent's Social Security Number</th> <th>Dependent's relationship to you</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td><td></td></tr> <tr><td>5.</td><td></td><td></td><td></td></tr> </tbody> </table>	First Name	Last Name	Dependent's Social Security Number	Dependent's relationship to you	1.				2.				3.				4.				5.				Multiply number of dependents from 7B..... <input type="checkbox"/> X \$23 = <input type="text"/> 00
	First Name	Last Name	Dependent's Social Security Number	Dependent's relationship to you																						
	1.																									
	2.																									
	3.																									
	4.																									
	5.																									
	7C. First name of individual(s) with developmental disability: (See Instr.) _____ Multiply number of individuals with developmental disabilities from 7C..... <input type="checkbox"/> X \$500 = <input type="text"/> 00	<input type="checkbox"/> X \$500 = <input type="text"/> 00																								
	7D. <b>TOTAL PERSONAL TAX CREDITS:</b> (Add Lines 7A, 7B, and 7C. Enter total here and on Line 32).....7D	<input type="text"/> 00																								

ROUND ALL AMOUNTS TO WHOLE DOLLARS		(A) Your/Joint Income	(B) Spouse's Income Status 4 Only	(C) Arkansas Income Only
8. Wages, salaries, tips, etc: (Attach W-2s).....8		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
9A. U. S. Military compensation: (Your/joint gross amt.) • <input type="text"/> 00 <b>Less \$9,000</b> 9A		<input type="text"/> 00		<input type="text"/> 00
9B. U. S. Military compensation: (Spouse's gross amt.) • <input type="text"/> 00 <b>Less \$9,000</b> 9B			<input type="text"/> 00	<input type="text"/> 00
10. Interest income: (If over \$1,500, attach AR4).....10		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
11. Dividend income: (If over \$1,500, attach AR4).....11		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
12. Alimony and separate maintenance received: .....12		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
13. Business or professional income: (Attach federal Schedule C or C-EZ).....13		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
14. Capital gains/(losses) from stocks, bonds, etc: (See Instr. Attach federal Schedule D) ..14		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
15. Other gains or (losses): (Attach federal Form 4797 and/or 4684 if applicable) .....15		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
16. Non-Qualified IRA distributions and taxable annuities: (Attach All 1099Rs).....16		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
17A. Your/Joint Employer pension plan(s)/Qualified IRA(s): (See Instructions, Attach All 1099Rs) Gross Distribution • <input type="text"/> 00 Taxable Amount • <input type="text"/> 00 <b>Less \$6,000</b> 17A		<input type="text"/> 00		<input type="text"/> 00
17B. Spouse Employer pension plan(s)/Qualified IRA(s): (Filing Status 4 only) Gross Distribution • <input type="text"/> 00 Taxable Amount • <input type="text"/> 00 <b>Less \$6,000</b> 17B			<input type="text"/> 00	<input type="text"/> 00
18. Rents, royalties, partnerships, estates, trusts, etc.: (Attach federal Schedule E).....18		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
19. Farm income: (Attach federal Schedule F).....19		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
20. Other income/depreciation differences: (List type and amount. See Instr.).....20		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
21. <b>TOTAL INCOME:</b> (Add Lines 8 through 20) .....21		<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00

<b>ADJUSTMENTS</b>		<b>(A) Your/Joint Income</b>	<b>(B) Spouse's Income Status 4 Only</b>	<b>(C) Arkansas Income Only</b>								
	22. <b>TOTAL INCOME:</b> (From Line 21, Columns A through C).....22.	00	00	00								
	23. <b>TOTAL ADJUSTMENTS:</b> (Attach Form AR1000ADJ).....23.	00	00	00								
	24. <b>ADJUSTED GROSS INCOME:</b> (Subtract Line 23 from Line 22).....24.	00	00	00								
<b>TAX COMPUTATION</b>	25. Select tax table: (Check the appropriate box) • <input type="checkbox"/> <b>LOW INCOME</b> Table <input type="checkbox"/> <b>REGULAR</b> Table If you qualify for the Low Income Tax Table, enter zero (0) on Line 25A. If not, then: Enter the larger of your: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input type="checkbox"/> <b>Itemized Deductions</b> (See Instructions, Line 25)  OR  <input type="checkbox"/> <b>Standard Deduction</b> (See Instructions, Line 25) .....25• </div> <div style="width: 45%;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">(A) Your/Joint Income</th> <th style="width: 50%; text-align: center;">(B) Spouse's Income Status 4 Only</th> </tr> <tr><td style="text-align: right;">00</td><td style="text-align: right;">00</td></tr> <tr><td style="text-align: right;">00</td><td style="text-align: right;">00</td></tr> <tr><td style="text-align: right;">00</td><td style="text-align: right;">00</td></tr> </table> </div> </div>				(A) Your/Joint Income	(B) Spouse's Income Status 4 Only	00	00	00	00	00	00
	(A) Your/Joint Income	(B) Spouse's Income Status 4 Only										
	00	00										
	00	00										
	00	00										
	26. <b>NET TAXABLE INCOME:</b> (Subtract Line 25 from Line 24) Columns A&B .....26•	00	00	00								
	27. <b>TAX:</b> (Enter tax from tax table).....27	00	00	00								
	28. Combined tax: (Add amounts from Lines 27A and 27B) .....28			00								
	29. Enter tax from Lump Sum Distribution Averaging Schedule: (Attach AR1000TD) .....29•			00								
	30. IRA and qualified plan withdrawal and overpayment penalties: (Attach federal Form 5329, if required) .....30•			00								
31. <b>TOTAL TAX:</b> (Add Lines 28 through 30) .....31•			00									
<b>TAX CREDITS</b>	32. Personal Tax Credit(s): (Enter total from Line 7D) .....32•	00										
	33. Child Care Credit: (20% of federal credit allowed; Attach federal Form 2441) .....33•	00										
	34. Other Credits: (Attach AR1000TC) .....34•	00										
	35. <b>TOTAL CREDITS:</b> (Add Lines 32 through 34) .....35•			00								
	36. <b>NET TAX:</b> (Subtract Line 35 from Line 31. If Line 35 is greater than Line 31, enter 0) .....36•			00								
<b>PRORATION</b>	36A. Enter the amount from <b>Line 24, Column C:</b> .....36A•	00										
	36B. Enter the total amount from <b>Line 24, Columns A and B:</b> .....36B•	00										
	36C. Divide Line 36A by 36B: (See Instructions) .....36C•											
	36D. <b>APPORTIONED TAX LIABILITY:</b> (Multiply Line 36 by Line 36C) .....36D•			00								
<b>PAYMENTS</b>	37. Arkansas income tax withheld: [Attach state copies of W-2 and/or 1099R Form(s)] .....37•	00										
	38. Estimated tax paid or credit brought forward from 2011: .....38•	00										
	39. Payment made with extension: (See Instructions) .....39•	00										
	40. <b>AMENDED RETURNS ONLY</b> - Previous payments (see instructions): .....40•	00										
	41. Early childhood program: Certification Number: .....41•	00										
	42. <b>TOTAL PAYMENTS:</b> (Add Lines 37 through 41) .....42•	00										
	43. <b>AMENDED RETURNS ONLY</b> - Previous refund (see instructions): .....43•			00								
	44. Adjusted Total Payments (Subtract Line 43 from Line 42) .....44•			00								
<b>REFUND OR TAX DUE</b>	45. <b>AMOUNT OF OVERPAYMENT/REFUND:</b> (If Line 44 is greater than Line 36D, enter difference) .....45•			00								
	46. Amount to be applied to 2013 estimated tax: .....46•	00										
	47. Amount of Check-off Contributions: (Attach Schedule AR1000-CO) .....47•	00										
	48. <b>AMOUNT TO BE REFUNDED TO YOU:</b> (Subtract Lines 46 and 47 from Line 45) ..... <b>REFUND</b> 48• ☺			00								
	49. <b>AMOUNT DUE:</b> (If Line 44 is less than Line 36D, enter difference; If over \$1,000, see instructions) ..... <b>TAX DUE</b> 49• ☹			00								
	50A. <b>UEP:</b> Attach Form AR2210 or AR2210A. If required, enter exception in box 50A • <input type="checkbox"/> Penalty 50B • <input type="checkbox"/> 00											
	50C. Add Lines 49 and 50B. Attach Form AR1000V to check or money order payable in U.S. Dollars to "Dept. of Finance and Administration". Include your SSN on payment. To pay by credit card, see instructions..... <b>TOTAL DUE</b> 50C •			00								
<b>PAID PREPARER</b>	51. Amount of income not subject to Arkansas tax from AR4, Part III:		May the Arkansas Revenue Agency discuss this return with the preparer shown below? <div style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</div>									
	<b>FOR MAILING ADDRESSES SEE PAGE 2 OF INSTRUCTIONS</b>											
<b>PLEASE SIGN HERE</b>	<b>PLEASE SIGN HERE:</b> 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		Occupation	Date	Home Telephone:							
	Spouse's Signature		Occupation	Date	Work Telephone:							
<b>PAID PREPARER</b>	Paid Preparer's Signature		ID Number/Social Security Number		<b>For Department Use Only</b>							
	Preparer's Name		City/State/Zip		A      •							
	Address		Telephone Number									