



ARKANSAS FIDUCIARY INCOME TAX DECLARATION FOR ELECTRONIC FILING

For calendar year 2024, or tax year beginning _____, 20 ____, ending _____, 20 ____

Name of Estate or Trust, Federal Identification Number, Name and Title of Fiduciary, Mailing Address, City, State or Province, ZIP, Foreign Country checkbox

PART I - TAX RETURN INFORMATION (Whole Dollars Only)

Table with 3 columns: Line number, Description, Amount. Rows 1-5 for Net Taxable Income, Net Tax, State Income Tax Withheld, Refund, Tax Due.

PART II - DECLARATION OF FIDUCIARY

- 6a. I authorize the State of Arkansas Income Tax Section to initiate debit entries to my account as indicated on the Arkansas Income Tax Payment form (AR TAX PMT).
6b. I authorize the State of Arkansas Income Tax Section to initiate debit entries to my account as indicated on the Arkansas Estimated Tax Payment form (AR EST PMT) or Arkansas Extension Payment form (AR EXT PMT).

If I have filed a balance due return, I understand that if the State of Arkansas does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under the penalties of perjury, I declare that the information I have given my ERO and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my 2024 Arkansas Fiduciary income tax return.

Sign Here: Fiduciary's Signature, Date

PART III - DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

I declare that I have reviewed the above Fiduciary's return and that the entries on Form AR8453-FE are complete and correct to the best of my knowledge.

ERO'S Use Only: ERO'S Signature, Date, Check if paid preparer, Check if self-employed, Your SSN or PTIN, Firm's name and address, FEIN

Under penalties of perjury, I declare that I have examined the above Fiduciary's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

Paid Preparer's Use Only: Preparer's Signature, Date, Check if self-employed, Preparer's SSN or PTIN, Firm's name and address, FEIN