

STATE OF ARKANSAS FIDUCIARY RETURN

For 2013 or fiscal year beginning and ending 20

Name of estate or trust, Mailing address, City, state and ZIP code, Federal Identification Number, Date trust created, Type of entity (Decedent's estate, Simple trust, etc.)

Check this box if you have filed a state extension or an automatic federal extension

Table with columns: ORIGINAL RETURN, AMENDED RETURN, FINAL RETURN, A. ALL INCOME, B. ARKANSAS INCOME. Rows include Income (Interest, Dividends, etc.), Deductions (Taxes, Interest, etc.), Tax and Payments (Standard deduction, Total tax, Credits, etc.).

Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief, the statements are true and complete.

Fiduciary's signature, Date, Preparer's signature, Date, Name, ID/SSN, Address, City, state, and ZIP

May the Arkansas Revenue Agency discuss this return with the preparer shown above? (Yes/No), OFFICE USE ONLY (A, B, C)

