## AR1002NR STATE OF ARKANSAS

·2006

Fo	or 200	6 or Fiscal	Year beginning and ending		20•			•		
_		Estate or T			Federal Identification Number			Type of Entity:		
								Decedent's estate		
Ŀ				•	•			mple trust		
Ма	iling <i>P</i>	Address		Da	Date trust created			omplex trust	1	Н
•							SBT rantor trust		Н	
Cit	, Cto	to and Zin (	2ada			$\dashv$		haritable trus	st	Н
Cit	, Sia	te and Zip (	Sode				Ва	ankruptcy es	state	
•							Po	ooled income	e fund	
	П	ORIGINAL F	RETURN • AMENDED RETURN •	FINAL RETURN	A. FEDERAL RETURI	ı	Т	B. ARKANS	SAS INC	OMF
	1.		come:			00	<b>₁</b> ├			00
	2.		Dividends:		<u> </u>	00	<u></u>			00
Income	1		from Trade or Business: (Attach Schedule)			00	<u></u>			00
	3.					00	<u>}</u>			00
	4.		ains: (See Instructions)			00	<u>4</u>  -			00
	5.		yalties, Partnerships, other Estates and Trusts, etc: (A			_	5			
	6.		me: (Attach Schedule)			00	6			00
	7.		ome:			00	<sup>7</sup>  -			00
	8.		me: (Add Lines 1 through 7)			00	8	<u> </u>		00
	9.	Interest		9		00	9			00
	10.	Taxes		10		_	10			00
	11.	Fiduciary F	Fees	11		_	11			00
ns	12.	Charitable	Deduction	12		00				00
Deductions	13.	Attorney, A	Accountant, and Return Preparer Fees	13		00	13			00
np	14.	Other Ded	luctions	14		00	14			00
ď	15.	Total Dedu	uctions: (Add Lines 9 through 14)	15	•	00	15	•		00
	16.		ncome (Subtract Line 15 from Line 8)			00	16			00
	17.		o be Distributed to Beneficiaries:			00	17	•		00
	18.		le Income: (Subtract Line 17 from Line 16)			00				00
	19.		Enter Tax from <b>REGULAR TAX TABLE 2</b> using the		•		_			00
	20.		Fax Credit:				. • L			
	1		e Tax Credit:		$\overline{}$	00				
	22.		and Incentive Tax Credit:			00				
	23.						22 [			00
	1	, ,								00
	24.	Tax Liability: (Subtract Line 23 from Line 19)  A. Enter the Amount from Line 18, Column B:								100
١,,						00				
ents			Amount from Line 18, Column A:				Г			To/
ayments			e 24A by Line 24B and enter percentage here:							% 00
	-		ed Tax Liability: (Multiply Line 24 by Line 24C)			_	‡D]•			100
Tax and	25.		Tax Paid or Credit Brought Forward From Last Year:.			00				
X	26.		vith Extension:			00				
🖺	27.	•	Made With or After the Filing of Original Return: (See	,		00				
	28.		nents: (Add Lines 25 through 27)			00				
	29.		ents Received: (See Instructions)			00	_			
	30.	Net Payme	ents: (Subtract Line 29 from Line 28)				30			00
	31.	Amount of	Overpayment: (If Line 30 is greater than Line 24D, et	nter difference)			31	•		00
	32.	Amount to	be Applied to 2007 Estimated Tax:	32	•	00				
	33.	AMOUN1	TTO BE REFUNDED TO YOU: (Subtract Line 32)	from Line 31)			33	•		00
			DUE: (If Line 30 is less than Line 24D, enter difference							00
Ur	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							C	. •		
l ' '	Spare	o, o oigilalu		Date			D	•		
NameID/SSN ●							E		$\overline{}$	
							F			
Address City, State, and Zip								•		
AR1002NR (R 11/06) May the Arkansas Revenue Agency discuss this return with the preparer shown above? Yes No							╁	•	-+	
1 4		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, the randings revenue rigeries discuss this return wit	proparor oriowir abov	J. L. 100 L. 110		1	1 1	- 1	

## Schedule A: Capital Gains Worksheet (Attach Federal Schedule D)

Arkansas has not adopted the depreciation provisions contained in the Job Creation Workers Act of 2002, the Jobs and Growth Tax Relief Reconciliation Act of 2003, the Working Families Relief and American Jobs Creation Acts of 2004, or the Energy Tax Incentive Act of 2005. While the new depreciation provisions may be used for federal returns, Arkansas operates under a different tax code. On Arkansas income tax returns, taxpayers must file following the rules in sections 167, 168, 179, and 179A under the Internal Revenue Code of 1986, enacted January 1, 1999. Arkansas does not recognize the 50% bonus depreciation or the increased Section 179 expense provisions, therefore there may be differences in the Arkansas and the federal basis of assets that you dispose of during the year. These and any other differences should be reconciled using the adjustment lines in the worksheet below.

You can find more information about Arkansas tax code or file your income tax electronically by visiting the Department of Finance and Administration web site at **www.arkansas.gov/dfa/**.

Complete this worksheet if you have a NET CAPITAL GAIN OR LOSS reported on Schedule D, Federal Form 1041. Adjust your gains and losses for any differences in the federal and Arkansas amounts using Lines 2. 5 and 10.

differ	rences in the fede	eral and	d Arkansas amounts using Line	es 2, 5 and 10.					
						Per Sch D, Fo	rm 1041	Arkansas	
1.	Enter Federal L	ong-Te	erm Capital Gain or Loss repor	ted on Line 12,			00	000	
	•		41		1		00	00	
2.	•		ny, for differences in federal an					00	
2			Capital Gain or Loss, add (or s			_	00		
	-			•	iu Line Z				
٦.	<ol> <li>Enter Federal Net Short-Term Capital Loss, if any, reporte on Line 5, Schedule D, Form 1041</li> </ol>				4		00	00	
5.	Enter adjustment, if any, for differences in federal and state								
	amounts						5	00	
6.	Arkansas Net S	hort-Te	erm Capital Loss, add (or subtr	act) Line 4 and L	ine 5		6	00	
7.	Arkansas Net C	apital	Gain or Loss (If gain, subtract	oss add Lines 6 and 3)		7	00		
8.	Arkansas Taxab	ole Am	ount. If a gain, multiply Line 7 b	by 70 percent (.70	0), otherwise enter loss		8	00	
9.			erm Capital Gain, if any, report				00	00	
			orm 1041		9		100		
10.			ny, for differences in federal an				40	00	
11			Capital Gain, add (or subtract)				_	00	
11. 12.			s Capital Gain, add (or subtract)				·········· ''  -	100	
12.			R1002/AR1002NR				12	00	
		G	chedule B: Inco	no Dietril	oution (Attack	Fodoral	K-1/c)		
			chedule B. Ilicoi	iie Distiii	Hitaci	reuerar	K-13)		
	Beneficiaries' sha	re of i	ncome:		Number of benefici	aries who receive	ed distributior	ns:	
FIRST NAME MI LAST NAME SSN					ADDRESS ST ZIP AMOUN				
•	IKOT IKANIE		LAST NAME	3314	ADDRESS	3.	211	AMOUNT	
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Mail **TAX DUE** to: State Income Tax, P. O. Box 2144, Little Rock, AR 72203-2144 Mail **REFUND** to: State Income Tax, P. O. Box 1000, Little Rock, AR 72203-1000

Mail **AMENDED** to: State Income Tax, P. O. Box 3628, Little Rock, AR 72203-3628 Mail **NO TAX DUE** to: State Income Tax, P. O. Box 8026, Little Rock, AR 72203-8026