## **AR1002NR**



## STATE OF ARKANSAS NONRESIDENT FIDUCIARY RETURN

For	or 2015 or fiscal year beginning and ending				20	•			•			
Name of estate or trust				FEIN	<u> </u>			T	ype of entity	/=	П	
•										dent's estate	$\Box$	
Nar	ne a	nd title of fiduciary or trustee	Date tr	Date trust created				le trust plex trust	Н			
N4 - 3	Para.	and discount					_		SBT		Н	
Ma	ling	address		State or federal extension filed				tor trust				
Cit	sta	te and ZIP code		extension illed	-			itable trust ruptcy estate	Н			
•	, ota	to dila 211 ocac								ed income fund	Н	
	П	ORIGINAL RETURN •	AMENDED RETURN ●	FINAL RETURI	N	A. ALL INCOME	$\Box$		B.	ARKANSAS IN	VCON	ΙE
	1						00	1				00
							00	2				00
		•	ss: (attach schedule)				00	3				00
пе			s)				00	4				00
Income			other estates and trusts, etc: <i>(att</i>				00	5			$\overline{}$	00
_			e)				00	6			-	00
							00	7	_		_	00
			s 1 through 7)				00	8				00
							00	씍	Ť			00
	l						1	10			_	00
	l						100	11	$\vdash$			00
Suc	ı		ıntant/preparer)				-	12	-			00
ictic	ı		ппаниргерагег)				100	13	-		_	00
Deductions	ı		through 13)				00	1				00
	ı	•	utions: (subtract Line 14 from Lin				1 1	15	-			00
	ı	•	eneficiaries:	,			00				_	00
			ions: (subtract Line 16 from Line				00					00
			ions. (Subtract Line To Horri Line			2200	_		_			$\exists$
			subtract Line 18 from Line 17)				00					
			REGULAR TAX TABLE using			mn A:		20				00
						26		,				ヿ
							00					
			(attach AR1000TC)				00					
			s 21 through 23)					.24	•			00
			rom Line 20)								(	00
	$\overline{}$		7, Column B:				00					٦
	25E	3. Enter the amount from Line 17	7, Column A:		25B		00					
	ı	C. Divide Line 25A by Line 25B ar					2!	5C	•			П
ents	250	APPORTIONED NET TAX:	: (multiply Line 25 by Line 25C)				2	5D	•		(	00
УЩ	26.	Arkansas income tax withheld:	(attach AR1099PT and/or 1099F	₹)	26		00					$\Box$
Ра	27.	Estimated tax paid or credit bro	ought forward from last year:		27		00					
Tax and Payments	28.	Tax paid with extension:			28		00					
	29.	Payments made with or after th	ne filing of original return: (see in	structions)	29 🗨		00					
			through 29)				00					
	31.	Overpayments received: (see in	instructions)		31 🗨		00					$\Box$
	32.	<b>NET PAYMENTS:</b> (subtract L	Line 31 from Line 30)					.32	•		(	00
			e 32 is greater than Line 25D, er					.33	•			00
			estimated tax:				00		_			┙
		AMOUNT TO BE REFUNDED TO YOU: (subtract Line 34 from Line 33)									$\overline{}$	00
		AMOUNT DUE: (if Line 32 is less than Line 25D, enter difference)						_	•			00
	37.		OA. If required, enter exception in				00	, וב	_			$\Box$
			payment. To pay by credit card s					$\overline{}$	_	and the Advanced		00
Und	er pe	er 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.								ay the Arkansas Revency discuss this retu		
Fidu	ıciar	ary/trustee's signature Date						the	e preparer shown ab			
Pre	oare	r's signature	Date					]		Yes No		$ \bot $
Nar	_				F	A	OFFICE USE ONI	LY	4			
Auc	ress	·				. [ '	^	•		- 1		



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

			•						
For net capital gains realized from:  Jan 1, 2015 - Jan 31, 2015  Feb 1, 2015 - Dec 31, 2015		Complete this form if you have a <b>NET CAPITAL GAIN OR LOSS</b> reported on federal Schedule D, federal Form 1041. <b>The amount of capital loss that can be deducted after offsetting capital gains i limited to \$3,000</b> .							
Net capital gains in excess of ten millio from a gain realized after January 1,			Arkansas did not ado previous years. The kansas amounts of de depreciation difference Lines 2, 5 and 10.	refore, there m epreciation allo	ay be a dif wed. Adjus	fference in federal st your gains and lo	and Ar		
				(A) Per federa		(B) You/Join	t		
Enter federal long-term capital gain or los Schedule D, Form 1041			1		00		00		
					2		00		
	nter adjustment, <b>if any</b> , for depreciation differences in federal and state amounts								
		i aliu Lii	I <del>C</del> Z		<u>.</u>		00		
<ol> <li>Enter federal net short-term capital loss, reported on Line 7, Schedule D, Form 10</li> </ol>			4		00		loc		
•	41		4		100		<del>-  </del> • •		
5. Enter adjustment, <b>if any</b> ,					_		00		
•	for depreciation differences in federal and state amounts								
							00		
7a. Arkansas net capital gain or loss (con					7a	•	00		
If Line 7a is more than \$10,000,000, you M	UST use the WORK	<b>(SHEET</b>							
If Line 7a is a loss skip to line 8.									
If Line 7a is a gain, answer questions A and									
Question A: Were there any transactions in t	•					Yes No	<u>,                                      </u>		
If NO then enter zero (0) on line 7b; if YES of									
Question B: Did the transactions in January	•					Yes No	)		
If NO then enter zero (0) on line 7b; if YES the	nen enter the January	net long	-term capital				$\Box$		
gain on line 7b.							ار		
7b. Net long-term capital gain January							00		
7c. Enter the SMALLER of Line 7a or 7b.					7c		00		
7d. Subtract Line 7c from Line 7a			7d		00				
7e. Multiply Line 7c by 50 percent (.50)			7e		00				
7f. Multiply Line 7d by 55 percent (.55)					7f		00		
8. Arkansas taxable amount (add Lines 7e	and 7f, or if Line 7a is	a loss er	nter the loss)						
If the WORKSHEET was used, then L	ine 9				8		00		
9. Enter federal short-term capital gain, if a	ny,								
reported on Line 7, Schedule D, Form 10	41		9		00		00		
10. Enter adjustment, <b>if any</b> ,									
for depreciation differences in federal and	d state amounts				10		00		
11. Arkansas short-term capital gain, add <i>(or</i>	subtract) Line 9 and	Line 10			11	•	00		
12. Total taxable Arkansas capital gain or los									
(Loss limited to \$3,000) Enter here					12		00		
			oution (Attach						
Beneficiaries' share of income:			Number of beneficia						
FIRST AND LAST NAME or	SSN/FEIN		ADDRESS	ST	ZIP	AMOUNT	_		
NAME OF ESTATE OR TRUST	JOH/FEIN		ADDRESS	-   31	<u> </u>	AMOUNT	00		
							00		
		<u> </u>					00		
						_			

Mail **AMENDED** to:

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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

AR1002NR (R 12/01/15)

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