

**ARKANSAS INDIVIDUAL INCOME TAX
ITEMIZED DEDUCTION SCHEDULE**

Name	Social Security Number
------	------------------------

MEDICAL AND DENTAL EXPENSES: [Do not include expense(s) paid by others]. (See Instructions)

1. Medical and dental expenses.....	1	00	
2. Enter amount from AR2/NR2, Line 24(A) and 24(B):	2	00	
3. Multiply Line 2 by 7.5% (.075).....	3	00	
4. TOTAL MEDICAL EXPENSES: (Subtract Line 3 from Line 1; if Line 3 is more than Line 1, enter 0)	4	00	▶

TAXES: (See Instructions)

5. Real estate tax:	5	00	
6. Personal property tax or other taxes: (List type and amount)	6	00	
7. TOTAL TAXES: (Add Lines 5 and 6)	7	00	▶

INTEREST EXPENSES: (See Instructions)

8A. Home mortgage interest paid to financial institutions:.....	8A	00	
8B. Qualified mortgage insurance premiums (PMI):.....	8B	00	
9. Home mortgage interest paid to an individual: Name: _____ Address: _____	9	00	
10. Deductible points:.....	10	00	
11. Investment interest: (Attach federal Form 4952)	11	00	
12. TOTAL INTEREST EXPENSE: (Add Lines 8 through 11)	12	00	▶

CONTRIBUTIONS: (See Instructions)

13. Cash contributions:.....	13	00	
14. Art and literary contributions: (See Instructions)	14	00	
15. Other:	15	00	
16. Carryover contributions: (List type and amount)	16	00	
17. TOTAL CONTRIBUTIONS: (Add Lines 13 through 16).....	17	00	▶

CASUALTY AND THEFT LOSSES: (See Instructions)

18. TOTAL CASUALTY AND THEFT LOSSES: (Attach federal Form 4684)	18	00	▶
---	----	----	---

POST-SECONDARY EDUCATION TUITION DEDUCTION(S): (See Instructions)

19. TOTAL POST-SECONDARY EDUCATION TUITION DEDUCTION(S): [Attach AR1075(s)]	19	00	▶
---	----	----	---

MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% AGI LIMIT: (See Instructions)

20. Unreimbursed employee business expenses: (Attach federal Form 2106).....	20	00	
21. Other expenses: (List type and amount)	21	00	
22. Add the amounts on Lines 20 and 21. Enter the total:	22	00	
23. Enter the amount from AR2/NR2, Line 24(A) and 24(B):	23	00	
24. Multiply Line 23 above by 2% (.02):	24	00	
25. TOTAL MISCELLANEOUS DEDUCTIONS: (Subtract Line 24 from Line 22; If Line 24 is more than Line 22, enter 0)	25	00	▶

OTHER MISCELLANEOUS DEDUCTIONS: (See Instructions)

26. TOTAL MISCELLANEOUS DEDUCTIONS NOT SUBJECT TO THE 2% AGI LIMITATION: (List type and amount)	26	00	▶
---	----	----	---

TOTAL ITEMIZED DEDUCTIONS:

27. Add amounts on Lines 4, 7, 12, 17, 18,19, 25, and 26 and enter the total here.).....	27	00	▶
--	----	----	---

Note: Complete lines 28 through 32 ONLY if you and your spouse are using Filing Status 4 or 5.

		YOUR Adjusted Gross Income		SPOUSE'S Adjusted Gross Income
28. Enter the adjusted gross income from AR2/NR2, Line 24, Columns (A) and (B) here.....	28A	00	28B	00
29. Total Arkansas adjusted gross income: (Add columns 28A and 28B from above)	29		29	00
30. Divide the amount on Line 28A above by the amount on Line 29. Enter the percentage here	30		30	%
31. Multiply Line 27 by the percentage on Line 30. Enter here and on AR2/NR2, Line 25, Col. (A).....	(YOU) 31		31	00
32. Subtract Line 31 from Line 27, Form AR3. Enter here and on AR2/NR2, Line 25, Column (B). If you and your spouse are using Filing status 5, enter this amount on Line 25, Col. (A) of your spouse's return	(SPOUSE) 32		32	00