IRS DCN

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Office Use Only - Do Not Write or Staple in This Space

AR8453-OL ARKANSAS INDIVIDUAL INCOME TAX 2009

DECLARATION FOR ELECTRONIC FILING

USE LABEL OR PRINT	First Name and Initial	Last Name*(s)*	Your Social Security Number ●
	Mailing Address		Spouse's Social Security Number
	City, State, and Zip Code		Telephone Number

Staple W-2(s) and 1099(s) here

PART 1 TAX RETURN INFORMATION (Whole Dollars Only)

Attach W-2(s) and 1099R(s) Here

1. Total Income *(Form AR1000 or AR1000NR, Line 22)*	1		00
2. Net Tax *(Form AR1000 or AR1000NR, Line 44)*	2		00
3. State Income Tax Withheld *(Form AR1000 or AR1000NR, Line 45)*	3		00
4. Refund *(Form AR1000 or AR1000NR, Line 50)*	4		00
5. Tax Due *(Form AR1000 or AR1000NR, Line 54)*	5		00

PART 2 DECLARATION OF TAXPAYER

6a. ☐ I consent that my refund be directly deposited as designated in the electronic portion of my 2009 Arkansas income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

Routing Number ☐☐☐☐☐☐☐☐☐ ☐ Checking ☐ Savings

Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Direct deposits will not be deposited into accounts outside the United States.

To comply with new banking rules, answer the following:

Will this refund go to an account outside the United States? ☐ Yes ☐ No

Call (501) 682-7225 if your response changes in the future.

b. ☐ I do not want direct deposit of my refund, or I am not receiving a refund.

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. If I have filed a joint federal and state return and my federal return is rejected, I understand my state return will be rejected also.

Under the penalties of perjury, I declare that the information I have provided and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my 2009 Arkansas income tax return. To the best of my knowledge and belief, my return is true, correct, and complete.

Sign Here

Your Signature _____ Date _____ Spouse's Signature _____ Date _____

DO NOT MAIL A COPY OF YOUR AR1000/AR1000NR WITH THE AR8453-OL

MAIL THE AR8453-OL WITH W-2(S), 1099-R(S), AND/OR W-2G(S) TO:

ARKANSAS ELECTRONIC FILING GROUP
P.O. BOX 8067
LITTLE ROCK, AR 72203-8067

Special Information

Taxpayers who prepare their own returns and file their State of Arkansas tax returns electronically are required to complete and sign Form 8453-OL and attach annual wage forms along with any other supporting forms and schedules and mail to the Arkansas E-File Section. This form is required to be sent to the E-File Section within 24 hours of receiving the State acknowledgement of receipt of the electronically filed tax return.

A taxpayer who fails to submit proper documentation timely may be declared to be ineligible to file electronic returns without the assistance of an Electronic Return Originator.

Direct Deposit will be offered on electronically filed Arkansas individual income tax returns. This is restricted to taxpayers who will receive their federal refund as a direct deposit. You must use the same account that is being used for direct deposit of the federal refund. Direct deposits will not be deposited into accounts outside the United States.

Declaration Control Number (DCN)

The DCN is a 14 digit number assigned to your return by your on-line service provider and/or transmitter. Clearly type or print the DCN in the top left hand corner of Form AR8453-OL. The first two digits are always "00". The next six digits are the electronic filer identification number *(EFIN)*. The next five digits are the batch number and serial number. The "0" represents the year the return is filed *(2010)*.

Example: The EFIN is 710001. The batch number is 000. The serial number is 56. The DCN is 00-710001-00056-0.

Name and Address

If you received a mailing label from the State of Arkansas, place the label in the name area. If the information on the label is incorrect or you did not receive a label, print or type the information in the spaces provided. Enter your Social Security Number*(s) (SSN)* in the space*(s)* provided. An incorrect or missing SSN will delay any refund. If filing a joint return, be sure the names and SSN(s) are listed in the same order.

If the Post Office does not deliver mail to your home and you have a P. O. Box, enter the box number instead of the home address.

Note: The address must match the address shown on the electronically filed form AR1000.

Note: All W-2(s) and 1099(s) must be attached to the AR8453-OL.

Declaration of Taxpayer

An electronically transmitted income tax return will not be considered filed until the State of Arkansas has received a signed form AR8453-OL with W-2(s) and/or 1099(s) attached. If filing a joint return, your spouse must also sign.

When to Mail

Mail the AR8453-OL and attachments *(W-2(s), 1099(s), and any additional required schedules)* to the Department of Finance and Administration on the next working day after you have received your State Acknowledgment (that the State has accepted your electronically filed return) from your on-line service provider and/or transmitter.

Where to Mail

1. If you are mailing the AR8453-OL with copies of W-2(s) and/or 1099(s) only, mail to:

   Arkansas Electronic Filing Group
   P. O. 8067
   Little Rock, AR 72203-8067

If you have a tax due return, do not mail your payment with the AR8453-OL. See the Tax Due Information Section below.

2. If you are claiming a credit for taxes paid to another state, filing the AR1000DC, AR1000RC5, or AR1000-OD Form(s) along with your W-2(s) and 1099(s), mail your AR8453-OL to:

   Arkansas Electronic Filing Group
   P. O. Box 8094
   Little Rock, AR 72203-8094

If you have a tax due return, do not mail your payment with the AR8453-OL. See the Tax Due Information Section below.

Notes on special schedules to be attached:

If you are claiming an adjustment to income for a permanently disabled child, attach the AR1000DC to the back of the AR8453-OL and mail to address 2 (above).

If you are claiming the Other State Tax credit, attach a copy of the tax return*(s)* from each state to the back of the AR8453-OL and mail to address 2 (above).

If you are claiming the Developmentally Disabled Child Credit, fax a copy of the AR1000RC5 to 501-682-7393 or 501-682-7692. If you do not have access to a fax, attach a copy of the form to the back of the AR8453-OL and mail to address 2 (above).

If you are claiming the Organ Donor Deduction, fax a copy of the AR1000-OD to 501-682-7393 or 501-682-7692. If you do not have access to a fax, attach a copy of the form to the back of the AR8453-OL and mail to address 2 (above).

Refunds

After the State of Arkansas has accepted your electronically filed return, the refund should be issued within 7 to 10 business days.

Tax Due Information

Do Not attach your check or money order to Form AR8453-OL. Do not mail a copy of your AR1000/AR1000NR. Mail your payment with **Form AR1000-V** on or before April 15, 2010 to:

State Income Tax – E-File Payment
P. O. Box 8149
Little Rock, AR 72203-8149

If you do not have Form AR1000-V, you may get it from your on-line service provider and/or transmitter. You can also download it from the State of Arkansas's web site, www.arkansas.gov/efile.