



2019 Income Tax Return

Arkansas Return

Thank you for using
FreeTaxUSA.com to prepare your
2019 income tax return.

You can view the status of your e-filed tax return by
signing in to your account at www.freetaxusa.com.

2020 tax preparation on FreeTaxUSA.com will be
available starting in January of 2021.

We look forward to preparing your 2020 tax return.

2019 AR1000NR



NR1

ARKANSAS INDIVIDUAL INCOME TAX RETURN

Nonresident and Part Year Resident

Jan. 1 - Dec. 31, 2019 or fiscal year ending _____, 20 ____ •

CHECK BOX IF
AMENDED RETURN

Software ID

• FREETAXUSA

USE LABEL OR PRINT OR TYPE	Primary's legal first name • BALA SAI SRI HARSH	MI •	Last name • PARVATHAREDDYGARI	Primary's social security number • 806-98-1763
	Spouse's legal first name •	MI •	Last name •	Spouse's social security number •
	Mailing address (number and street, P.O. box or rural route) • 1701 WESTPARK DR APT 70			<input type="checkbox"/> Check if address is outside U.S.
	City • LITTLE ROCK	State or province • AR	ZIP • 72204	Foreign country name

ATTACH A COPY OF YOUR COMPLETE FEDERAL RETURN

☐ NONRESIDENT: List state of residence: _____
☒ PART YEAR RESIDENT: Dates lived in AR: To: 12/31/2019 From: 07/03/2019

FILING STATUS Check Only One Box	1. <input checked="" type="checkbox"/> Single (Or widowed before 2019 or divorced at end of 2019)	4. <input type="checkbox"/> Married filing separately on the same return
	2. <input type="checkbox"/> Married filing joint (even if only one had income)	5. <input type="checkbox"/> Married filing separately on different returns Enter spouse's name here and SSN above _____
	3. <input type="checkbox"/> Head of household (see instructions) If the qualifying person was your child, but not your dependent, enter child's name here: _____	6. <input type="checkbox"/> Qualifying widow(er) with dependent child Year spouse died: (see instructions) _____

☐ Check here if you want a tax booklet mailed to you next year.☐ Check this box if you have filed a state extension
or an automatic federal extension

PERSONAL TAX CREDITS	7A. <input checked="" type="checkbox"/> Yourself • <input type="checkbox"/> 65 or over • <input type="checkbox"/> 65 Special • <input type="checkbox"/> Blind • <input type="checkbox"/> Deaf • <input type="checkbox"/> Head of household/qualifying widow(er) <input type="checkbox"/> Spouse • <input type="checkbox"/> 65 or over • <input type="checkbox"/> 65 Special • <input type="checkbox"/> Blind • <input type="checkbox"/> Deaf (Filing status 3 only) (Filing status 6 only)																
	Multiply number of boxes checked 7A <input type="checkbox"/> X \$26 = 26 00																
	Dependents (Do not list yourself or spouse)																
	<table border="1"> <thead> <tr> <th>First name</th> <th>Last name</th> <th>Dependent's social security number</th> <th>Dependent's relationship to you</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td></tr> </tbody> </table>	First name	Last name	Dependent's social security number	Dependent's relationship to you	1.				2.				3.			
	First name	Last name	Dependent's social security number	Dependent's relationship to you													
	1.																
2.																	
3.																	
7B. Multiply number of DEPENDENTS from above 7B • <input type="checkbox"/> X \$26 = 00																	
7C. Multiply number of qualifying individuals from AR1000RC5 (see instructions) 7C • <input type="checkbox"/> X \$500 = 00																	
7D. TOTAL PERSONAL TAX CREDITS: (Add lines 7A, 7B, and 7C. Enter total here and on line 34) 7D 26 00																	

ID	DL# / State ID 943816404 Your state AR Issue date (mm/dd/yyyy) 10/22/2019 Expiration date (mm/dd/yyyy) 07/07/2020
	DL# / State ID _____ Spouse state _____ Issue date (mm/dd/yyyy) _____ Expiration date (mm/dd/yyyy) _____

DIRECT DEPOSIT	Direct deposit allowed to U.S. banks only. Check if either deposit(s) will ultimately be placed in a foreign account. <input type="checkbox"/>		
	Routing Number 1 • 0 2 1 1 0 1 1 0 8	Account Number 1 • <input checked="" type="checkbox"/> Checking or • <input type="checkbox"/> Savings • 1 6 1 3 8 0 4 3 6 6	Direct deposit 1 Amt • 514 00
	Routing Number 2 •	Account Number 2 • <input type="checkbox"/> Checking or • <input type="checkbox"/> Savings •	Direct deposit 2 Amt • 00

PLEASE SIGN HERE: Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

• ☐ Next year (January 2021) we will no longer automatically mail 1099-G forms. Instead, we ask that you get this information from our website (www.atap.arkansas.gov). Check the box if you still want us to mail you a paper Form 1099-G next year.

PLEASE SIGN HERE	Primary's signature	Date	Telephone 860-461-3040	May the Arkansas Revenue Agency discuss this return with the preparer? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Spouse's signature	Date	Telephone	

PAID PREPARER	Paid preparer's signature	PTIN/ID number •	For Department Use Only A •
	Preparer's name SELF - PREPARED	City/State/ZIP	Telephone

Refund:

Arkansas State Income Tax
P.O. Box 1000
Little Rock, AR 72203-1000

Tax Due/No Tax:

Arkansas State Income Tax
P.O. Box 2144
Little Rock, AR 72203-2144



NR2

Primary SSN 806 - 98 - 1763

ROUND ALL AMOUNTS TO WHOLE DOLLARS		(A) Primary/Joint Income	(B) Spouse's Income Status 4 Only	(C) Arkansas Income Only
INCOME Attach W-2(s)/1099(s) here / Attach check on top of W-2(s)/1099(s)	8. Wages, salaries, tips, etc: (Attach W-2s)	31352	00	27669
	9. Military pay: Primary [] 00 Spouse [] 00			
	10. Interest income: (If over \$1,500, attach AR4)			
	11. Dividend income: (If over \$1,500, attach AR4)			
	12. Alimony and separate maintenance received:			
	13. Business or professional income: (Attach federal Schedule C)			
	14. Capital gains/(losses) from stocks, bonds, etc: (See instr. attach federal Schedule D)	-2	00	
	15. Other gains or (losses): (Attach federal Form 4797 and/or AR4684 if applicable)			
	16. Non-qualified IRA distributions and taxable annuities: (Attach all 1099Rs)			
	17. Military retirement: Primary [] 00 Spouse [] 00			
	18A. Primary employer pension plan(s)/qualified IRA(s): (Attach all 1099Rs)			
	Gross distribution [] 00 Taxable amt [] 00 Less \$6,000			
	18B. Spouse employer pension plan(s)/qualified IRA(s): (Attach all 1099Rs)			
	Gross distribution [] 00 Taxable amt [] 00 Less \$6,000			
	19. Rents, royalties, partnerships, estates, trusts, etc.: (Attach federal Schedule E)			
	20. Farm income: (Attach federal Schedule F)			
	21. Unemployment (Attach 1099-G)			
22. Other income/depreciation differences: (Attach Form AR-OI)				
23. TOTAL INCOME: (Add lines 8 through 22)	31350	00	27669	
24. TOTAL ADJUSTMENTS: (Attach Form AR1000ADJ)				
25. ADJUSTED GROSS INCOME: (Subtract line 24 from line 23)	31350	00	27669	
TAX COMPUTATION	26. Select tax table: (Select only one)			
	27. <input type="checkbox"/> Low income table (\$0), For low income qualifications see line 26 instructions <input checked="" type="checkbox"/> Standard deduction (\$2,200 or \$4,400 for filing status 2 only) <input type="checkbox"/> Itemized deductions (AR3) Spouse itemized on separate return, Check here. <input type="checkbox"/>	2200	00	
	28. NET TAXABLE INCOME: (Subtract line 27 from line 25)	29150	00	
	29. TAX: (Enter tax from tax table)	1036	00	
	30. Combined tax: (Add amounts from line 29, columns A and B)			1036
	31. Enter tax from Lump Sum Distribution Averaging Schedule: (Attach AR1000TD)			
	32. Additional tax on IRA and qualified plan withdrawal and overpayment: (Attach federal Form 5329, if required)			
33. TOTAL TAX: (Add lines 30 through 32)			1036	
TAX CREDITS	34. Personal tax credit(s): (Enter total from line 7D)			26
	35. Child care credit: (20% of federal credit allowed; attach federal Form 2441)			
	36. Other credits: (Attach AR1000TC)			
	37. TOTAL CREDITS: (Add lines 34 through 36)			26
38. NET TAX: (Subtract line 37 from line 33. If line 37 is greater than line 33, enter 0)			1010	
PRORATION	38A. Enter the amount from line 25, Column C:			27669
	38B. Enter the total amount from line 25, Columns A and B:			31350
	38C. Divide line 38A by 38B: (See instructions)	0.8825		
	38D. APPORTIONED TAX LIABILITY: (Multiply line 38 by line 38C)			891
PAYMENTS	39. Arkansas income tax withheld: (Attach state copies of W-2 and/or 1099R, 1099-G)			1405
	40. Estimated tax paid or credit brought forward from 2018:			
	41. Payment made with extension: (See instructions)			
	42. AMENDED RETURNS ONLY - Previous payments: (See instructions)			
	43. Early childhood program: Certification number: _____ (20% of federal credit; attach federal Form 2441 and Form AR1000EC)			
	44. TOTAL PAYMENTS: (Add lines 39 through 43)			1405
	45. AMENDED RETURNS ONLY - Previous refund: (See instructions)			
46. Adjusted total payments: (Subtract line 45 from line 44)			1405	
REFUND OR TAX DUE	47. AMOUNT OF OVERPAYMENT/REFUND: (If line 46 is greater than line 38D, enter difference)			514
	48. Amount to be applied to 2020 estimated tax:			
	49. Amount of Check-Off contributions: (Attach Schedule AR1000-CO)			
	50. AMOUNT TO BE REFUNDED TO YOU: (Subtract lines 48 and 49 from line 47)			514
	51. AMOUNT DUE: (If line 46 is less than line 38D, enter difference; If over \$1,000, continue to 52A)			
	52A. UEP: Attach Form AR2210 or AR2210A. If required, enter exception in box 52A [] Penalty 52B [] 00			
	52C. Add lines 51 and 52B: (See instructions)			
TOTAL DUE				00
PAY ONLINE: Please visit our secure site ATAP (Arkansas Taxpayer Access Point) at www.atap.arkansas.gov . ATAP allows taxpayers or their representatives to log on, make payments and manage their account online. ATAP is available 24 hours.				
PAY BY CREDIT CARD: (See instructions) PAY BY MAIL: (See instructions)				



ARKANSAS INDIVIDUAL INCOME TAX CAPITAL GAINS

Primary's legal name BALA SAI SRI HARSH PARVATHAREDDYGARI	Primary's social security number 806-98-1763
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In Arkansas, only 50% of the net capital gain is taxed. 100% of the short term capital gain is taxed.

Per Act 1488 of 2013, the amount of net capital gain in excess of ten million dollars (\$10,000,000) from a gain realized on or after January 1, 2014, is exempt from state tax.

Complete the AR1000D if you have a CAPITAL GAIN OR LOSS reported on federal Schedule D, or if Schedule D is not required, a gain reported on federal Form 1040, Schedule 1, line 13. The amount of capital loss that can be deducted after offsetting capital gains is limited to \$3,000 (\$1,500 per taxpayer for filing status 4 or 5). See instructions for line 14, Form AR1000F/AR1000NR.

Adjust your gains and losses for depreciation differences, if any, in the federal and Arkansas amounts using lines 2, 5 and 10. *

Note. Arkansas did not adopt the federal "bonus depreciation" provision from previous years. Therefore, there may be a difference in federal and Arkansas amounts of depreciation allowed.

Full Year Resident Filers - Complete columns (A) and (B) only.

Nonresident or Part Year Resident Filers - Complete columns (A), (B), and (C).

	Federal Schedule D	(A) Primary	(B) Spouse	(C) Arkansas Only
1. Enter federal long-term capital gain or loss reported on line 15, federal Schedule D or Form 1040, line 6.....1	00	00	00	00
2. Enter adjustment, if any, for depreciation differences in federal and state amounts.....2		00	00	00
3. Arkansas long-term capital gain or loss. Add (or subtract) line 1 and line 2.....3	•	00	•	00
4. Enter federal net short-term capital loss, if any, reported on line 7, federal Schedule D4	- 2 00	- 2 00	00	00
5. Enter adjustment, if any, for depreciation differences in federal and state amounts.....5		00	00	00
6. Arkansas net short-term capital loss. Add (or subtract) line 4 and line 5.....6	•	- 2 00	•	00
7a. Arkansas net capital gain or loss. (If gain, subtract line 6 from 3. If loss, add lines 6 and 3.).....7a	•	- 2 00	•	00
7b. If the amount on line 7a is over \$10,000,000, only enter \$10,000,000. If less than \$10,000,000, enter the total amount.....7b		- 2 00	00	00
8. Arkansas taxable amount. If a gain multiply line 7b by 50 percent (.50), otherwise enter loss.....8		- 2 00	00	00
9. Enter federal short-term capital gain, if any, reported on line 7, federal Schedule D.....9	00	00	00	00
10. Enter adjustment, if any, for depreciation differences in federal and state amounts.....10		00	00	00
11. Arkansas short-term capital gain. Add (or subtract) line 9 and line 10.....11	•	00	•	00
12. Total taxable Arkansas capital gain or loss. Add lines 8 and 11. (Loss limited to \$3,000, for filing status 1, 2, 3, and 6, \$1,500 per taxpayer if filing status 4 or 5.) Enter here. Filing status 1,2,3,5 and 6: Add line 12, columns A and B and enter on AR1000F/AR1000NR, line 14. Filing status 4: Enter line 12, column A on AR1000F/AR1000NR, line 14, column A. Enter line 12, column B on AR1000F/AR1000NR, line 14, column B.		- 2 00	00	00

SCHEDULE D
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

- Attach to Form 1040, 1040-SR, or 1040-NR.
► Go to www.irs.gov/ScheduleD for instructions and the latest information.
► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2019

Attachment
Sequence No. **12**

Name(s) shown on return

BALA SAI SRI HARSH PARVATHAREDDYGARI

Your social security number

806-98-1763

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .	48.	50.		-2.
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6 ()	
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back			7	-2.

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14 ()	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to Part III on the back			15	

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	-2.
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 22. 		
17 Are lines 15 and 16 both gains? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet ►	18	
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet ►	19	
20 Are lines 18 and 19 both zero or blank? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). Don't complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14, the smaller of: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) </div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div> </div> </div>	21	(-2)
Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040 or 1040-SR, line 3a; or Form 1040-NR, line 10b? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). <input checked="" type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		