



2020

General Information:

Number of developmentally disabled individuals

Names of developmentally disabled individuals

Type of disability

Taxpayer		Spouse	
Yes	No	Yes	No

Do you qualify as being deaf for personal credit purposes?

Early Childhood Program certification number

Residency Information:

From (Mo/Da/Yr)	To (Mo/Da/Yr)
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If you did not live in Arkansas for all of 2020, enter the dates you did live in Arkansas

Enter the state names other than Arkansas where you had income

Education Savings:

Did you or your spouse make any contributions to an Arkansas Tax Deferred Tuition Savings Program account?

Yes	No
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If Yes, enter the following:

TS	Name of Designated Beneficiary	Social Security Number	Account Number	2020 Amount Contributed

Check-Off Contribution:

Enter the amount you wish to contribute on your 2020 tax return to:

Arkansas Disaster Relief Fund	
Arkansas Game and Fish Foundation	
Arkansas School for the Blind and Deaf	
Baby Sharon's Children Catastrophic Illness Grant Program Trust Fund	
Organ Donor Awareness Education Program	
Military Family Relief Program	
Arkansas Area Agencies on Aging	
Newborn Umbilical Cord Initiative	
Arkansas Tax Deferred Tuition Savings Program	

Enter Any Additional Arkansas Information:
