



ARKANSAS INDIVIDUAL INCOME TAX
CERTIFICATE FOR INDIVIDUALS WITH
DEVELOPMENTAL DISABILITIES

Table with 2 columns and 2 rows: Primary's legal name, Spouse's legal name, Primary's social security number, Spouse's social security number

This certificate must be completed in its entirety to receive the \$500 credit for individuals with developmental disabilities. It must be attached to your individual income tax return the first time this credit is taken. It is good for five (5) years from the date the original tax credit is filed. At the end of five (5) years you must have a new certificate completed and attached to your individual income tax return. The credit is in addition to your regular dependent tax credit.

Must be completed by taxpayer

Form for taxpayer completion with fields: Developmentally disabled dependent's name, Social security number, Relationship to taxpayer, Taxpayer's signature, Date

Must be completed by
a licensed physician, a licensed psychologist, or a licensed psychological examiner

Check the box for the diagnosis:

DO NOT ADD ADDITIONAL BOXES

- Checkboxes for Cerebral Palsy, Epilepsy, Autism, Down Syndrome, Spina Bifida, Intellectual Disability

- 1. Did the developmental disability originate before the individual attained the age of 22?
2. Will the developmental disability continue or can be expected to continue indefinitely and constitute a substantial impairment...

The above individual has been diagnosed with a developmental disability by a licensed physician, a licensed psychologist, or a licensed psychological examiner. I certify that the information listed above is true and correct.

Form for physician completion with fields: Initial diagnosis date, Date of birth, Doctor or examiner's signature, Date, Doctor or examiner's name, Telephone number, Street address, City, State, Zip