



ARKANSAS PASS-THROUGH ENTITY TAX
REQUEST FOR ARKANSAS EXTENSION OF TIME FOR
FILING INCOME TAX RETURNS

Tax year beginning _____, 20____ and ending _____, 20____.
(Tax year beginning and ending dates are required fields)

Software ID
DFA WEB

Name, Federal Employer Identification Number, Mailing Address, City, State or Province, Zip, Check if address is outside U.S. Foreign Country Name

STOP File only if you are requesting a 60 or 180 day Arkansas extension as referenced in Item 2 below
(See Instructions for additional information)

NAICS Code, Date of Incorporation, Type of Entity (Domestic/Foreign)

1. INDICATE TYPE OF ENTITY FOR WHICH EXTENSION IS BEING REQUESTED:

- S CORPORATION - Electing Pass-Through Entity Status
Partnerships - Electing Pass-Through Entity Status
LIMITED LIABILITY COMPANY (LLC) THAT DOES NOT FILE A FEDERAL SUB S OR PARTNERSHIP RETURN

2. CHECK ONLY ONE BOX BELOW (BOX A OR BOX B) TO REQUEST AN ARKANSAS EXTENSION:

- A Check this box if requesting an additional 60 day extension from the Federal Extended return due date
B Check this box if requesting an additional 180 day extension from the Arkansas original return due date

File this request by the original due date or, if applicable, the extended due date of the Arkansas return. A request for an extension which is postmarked AFTER the due date of the tax return will NOT be considered.

Please mail the Pass-through Entity Tax Extensions to the following address: CORPORATION INCOME TAX SECTION
P.O. Box 919
Little Rock, AR 72203-0919

APPROVED BY: _____ DENIED: Extension request not filed on time.
E-mail To: passthrough.entitytax@dfa.arkansas.gov

Make check or money order payable in U.S. Dollars to "Dept. of Finance and Administration" cut here

AR1155-PET STATE of ARKANSAS
Pass-through Extension Tax Payment

Software ID DFA WEB

Fiscal Year Ending (MM/DD/YYYY)

Employer Identification Number Due Date

Mail To: Department of Finance and Administration
Pass-through Entity Tax
P.O. Box 919
Little Rock, AR 72203-919

Name, Address, City, State, Zip, Telephone #

Amount of this Payment \$

Include Cents (ex. 1,234,567.00)