

# Arkansas Composite Income Tax Request For Forms Approval

This is...    **Original Submission**     **OR**    **Resubmission**

**Company Name:** \_\_\_\_\_    **Software ID:** \_\_\_\_\_    **Date:** \_\_\_\_\_

**Product Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_    **Email:** \_\_\_\_\_

**Email to: ARForms@dfa.arkansas.gov**

Check Forms Submitted	State Form ID	Form Name	Approved as submitted	Not Approved (Correct and Resubmit)
	AR1000CR	CompositeTax Income Tax Return		
	Comments:			
	AR K-1	Arkansas Schedule K-1		
	Comments:			
	AR K-1 (Inst.)	Arkansas Schedule K-1 (Inst.)		
	Comments:			
	AR K-1FE	Arkansas Schedule K-1 (Fiduciary)		
	Comments:			
	AR K-1FE (Inst.)	Arkansas Schedule K-1 (Fiduciary) (Inst.)		
	Comments:			
	AR1055-CR (Form Only)	Request for Extension of Time (Composite)		
	Comments:			
	AR1055-CR (Inst.)	Request for Extension of Time (Composite) (Inst.)		
	Comments:			
	Please see next page for additional forms			

<b>Reviewed By</b>	Signature: _____	Date: _____
--------------------	------------------	-------------

# Arkansas Composite Income Tax Request For Forms Approval

This is...    **Original Submission**     **OR**    **Resubmission**

**Company Name:** \_\_\_\_\_    **Software ID:** \_\_\_\_\_    **Date:** \_\_\_\_\_

**Product Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_    **Email:** \_\_\_\_\_

**Email to: ARForms@dfa.arkansas.gov**

Check Forms Submitted	State Form ID	Form Name	Approved as submitted	Not Approved (Correct and Resubmit)
	AR8453-CR	Declaration for Electronic Filing		
	Comments: _____			
	AR8453-CR (Inst.)	Declaration for Electronic Filing (Inst.)		
	Comments: _____			
	AR TAX PMT	Arkansas Tax Payment		
	Comments: _____			
	AR EXT PMT	Arkansas Extension Payment		
	Comments: _____			
	AR EST PMT	Arkansas Estimated Payment		
	Comments: _____			
	Comments: _____			
	Comments: _____			
	Comments: _____			

<b>Reviewed By</b>	Signature: _____	Date: _____
--------------------	------------------	-------------