

STATE OF ARKANSAS REQUEST FOR EXTENSION OF TIME FOR FILING PARTNERSHIP TAX RETURNS

			Software ID
Jan. 1 - Dec. 31, 2021 or fiscal year beginning	and ending	20	•
Name of entity		F	ederal employer identification number
•		•	•
Mailing address (Number and street, P.O. box or rural route)			
•			
City	State or province	ZIP	Check if address is outside U.S.
•	•	•	Foreign country name

Filing this Arkansas extension form will extend the date to file your return to October 15th for calendar year filers. Fiscal year filers will have an extension of 180 days from their return due date.

File this request on or before the due date of your return. Keep a copy for your records.

NOTE: Income tax returns must be filed and the tax paid on or before the fifteenth (15th) day of the fourth (4th) month following the close of the tax year (April 15th for calendar year filers). This extension is an agreement by the Commissioner of Revenue to waive the statutory penalty for failure to file timely if the return is filed by the extension due date and the tax is paid by the original due date of the return (April 15th for calendar year filers).

Mail to the following address: Individual Income Tax Section

P.O. Box 8149

Little Rock, AR 72203-8149