

Arkansas Pass-Through Entity 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)
	AR362	Arkansas Pass-Through Entity Income Tax Election or Revocation Form		
	Comments:			
	Comments:			
	Comments:			
	Comments:			
	Comments:			
	Comments:			

Reviewed By	Signature: _____	Date: _____
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