

Arkansas Fiduciary Income Tax Request For Forms Approval

Company Name: _____ **Software ID:** _____ **Date:** _____

Contact Name: _____ **Email:** _____

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

Check Forms Submitted	State Form ID	Form Name	Approved as submitted	Not Approved (Correct and Resubmit)
	AR1002F	Fiduciary Income Tax Return		
	Comments:			
	AR1002NR	Nonresident Fiduciary Income Tax Return		
	Comments:			
	AR4-FID	Fiduciary Interest and Dividend Income Schedule		
	Comments:			
	AR2210	Penalty for Underpayment of Estimated Tax		
	Comments:			
	AR2210A	Annualized Penalty for Underpayment of Estimated Income Tax		
	Comments:			
	ARK-1	Arkansas Schedule K-1		
	Comments:			
	AR1055-FE	Request for Extension of Time (Fiduciary)		
	Comments:			
	AR-AIS	Arkansas Additional Information Schedule		
	Comments: Does Not Require Approval			
	AR8453-FE	Declaration for Electronic Filing		
	Comments:			

Reviewed By	Signature: _____	Date: _____
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Check Forms Submitted	State Form ID	Form Name	Approved as submitted	Not Approved (Correct and Resubmit)
1	AR TAX PMT	Arkansas Tax Payment		
	Comments:			
2	AR EXT PMT	Arkansas Extension Payment		
	Comments:			
3	AR EST PMT	Arkansas Estimated Payment		
	Comments:			
4				
	Comments:			
5				
	Comments:			
6				
	Comments:			
7				
	Comments:			
8				
	Comments:			
9				
	Comments:			

Reviewed By	Signature: _____	Date: _____
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