



This form must be Attached to Form 500CR

OR FISCAL YEAR BEGINNING \_\_\_\_\_ 2024, ENDING \_\_\_\_\_

►  Check here for Identity Theft

Print Using Blue or Black Ink Only

\_\_\_\_\_ Federal Employer Identification Number (9 digits) or Social Security Number

\_\_\_\_\_ Name

\_\_\_\_\_ Current Mailing Address Line 1 (Street No. and Street Name or PO Box)

\_\_\_\_\_ Current Mailing Address Line 2 (Apt No., Suite No., Floor No.)

\_\_\_\_\_ City or Town

\_\_\_\_\_ State

\_\_\_\_\_ ZIP Code + 4

\_\_\_\_\_ Foreign Country Name

\_\_\_\_\_ Foreign Province/State/County

\_\_\_\_\_ Foreign Postal Code

Reason for waiver request (check only one):

- A. Do not have access to a computer.
- B. Software does not support electronic filing of Form 500CR.
- C. Other (explain) \_\_\_\_\_

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

**Instructions**

Use this form to request a waiver from filing the Form 500CR electronically. You must include a reason for the waiver request. If a reason is not checked or an explanation given as to why you cannot file electronically, the Form 500CR will not be processed.

**The waiver request should be included with the Form 500CR in the filing of your return.**