

Arkansas Partnership 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) |
|-----------------------|--|---|-----------------------|-------------------------------------|
| | AR1050 | Partnership Income Tax Return | | |
| | Comments: | | | |
| | ARK-1 | Arkansas Schedule K-1 | | |
| | Comments: | | | |
| | AR-AIS | Arkansas Additional Information Schedule | | |
| | Comments: Does Not Require Approval | | | |
| | AR8453-PE | Declaration for Electronic Filing | | |
| | Comments: | | | |
| | AR1055-PE | Request for Extension of Time (Partnership) | | |
| | Comments: | | | |
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| | Comments: | | | |
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| | Comments: | | | |
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| | Comments: | | | |

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| Reviewed By | Signature: _____ | Date: _____ |
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