

TAX PAYER IDENTIFYING INFORMATION "QUICK SHEET" Please provide us the following information as completely and accurately as possible:

1.	Tax payer legal name, or legal entity (business) name:
2.	Social security number of primary tax payer, or business identifying number (FEIN/TIN):
3.	If married, provide your spouse's Social Security Number:
4.	Physical address (PO Box not accepted) on file with the IRS:
5.	If you've recently moved, provide your current address:
The below questions DO NOT need to be completed for Form 1040 filers (i.e. Individuals); skip to Question 9 below. If you are requesting we complete your extension and are filing for a business, estate, trust, or gift return, please complete the below questions:	
6.	Please check if you are a corporation/partnership that qualifies under Regs. Sect. 1.6081-5:
	☐ YES ☐ NO ☐ I'm not sure if this applies to me, please call me
7.	If you will report less than a full 12 months of transactions on your Tax Return, or a 'short year', please indicate why below:
	☐ Initial Return ☐ Final Return ☐ Change in Accounting Method ☐ Consolidated Return Will be Filed
8.	If you checked any of the boxes in Number 7 above, please indicate the beginning and end of your tax year: Beginning, and ending
9.	Il you are unsure whether you have answered all of these questions correctly, please check the following box, and a representative will get back to you: \Box Please call me
10.	. Check the appropriate box below to indicate whether you would like to make a payment at this time with your extension. If "Yes", .a representative will contact you.
	☐ YES, in the amount of (if amount known, or blank) \$ ☐ NO ☐ I'm not sure if this applies to me, please call me

Please remember that you can always call us toll free at 1-866-ART-4048, ext. 701 if you have any questions. Our operators are standing by. Return this completed form to us via fax to: 1-866-851-4048, or email to officemananger@artcorp.us