Extension Request to File Information Returns Electronically

Firm Name:			Date:	
			/ /	
Mailing Address:			Federal Employer Identification Number:	
City/State/ZIP Code:			Waiver Request for	
			Tax Year:	
Contact Name:		Title:	Telephone N	lumber:
Information Re	eturn Filing Extension Requests			•
We consider 30	o-day and 90-day information return	filing extensions. To request our a	approval, provide	a written explanation
for each return	type extension you request.			
30-Day Extension				
Check the box for each return type extension request and enter your explanation in the text field.				
Return Type	Extension Request Explanation			
□ 1098				
□ 1099				
□ 5498				
☐ W-2G				
90-Day Extens				
	-day extension to file 1099-B inform		enter your explar	nation in the text field.
Return Type	Extension Request Explanation			
□ 1099-B				
_ :000 2				
We approve info	ormation return filing extensions on	v for the Franchise Tax Board. We	e require the pave	er/emplover to provide
	ees with their paper return copies p			
	498 and January 31 for all other inf			
	I holiday, we extend the due date to		· ·	•
Lacknowledge	e that I examined the information pro	ovided on this form, including any	accompanying	statements. To the
	owledge and belief, it is true, correct		accompanying s	natoriorità. Io tric
Signature:		Title:		Date:

Fax completed form to: IRPHELP

916.855.5555

Internet and Telephone Assistance

Website: Go to **ftb.ca.gov** and search for information returns

Telephone: 916.845.6304