

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Department of Revenue DIVISION OF TAXATION One Capitol Hill Providence, RI 02908-5800 Fax (401) 574-8932

EXTENSION REQUEST INSTRUCTIONS

EXTENSION REQUEST:

To be used by a Political Organization for requesting an automatic six (6) month extension of time for filing a Rhode Island Political Organization Tax Return RI-1120POL.

TO BE EFFECTIVE:

- 1. Payment of the full amount of the tax reasonably estimated to be due must be submitted with this request.
- 2. This form must be completed and filed before the date prescribed for payment of the tax.
- 3. This form must be signed by a person authorized to represent the organization in this matter.

NOTE:

The extension of time is limited to:

- 1. The date requested, or
- 2. The date on which a certificate of good standing is required to be issued, whichever is earlier.

PAYMENT:

Payments shall be made in the form of a check or money order.

DIVIS	STATE OF RHODE ISLAND DIVISION OF TAXATION * ONE CAPITOL HILL SUITE 9, PROVIDENCE, RI 02908-5814			AUTOMATIC SIX MONTH EXTENSION REQUEST			
Taxpayer Identification	n Number	1120POL	For Calendar Year Or Taxable Year Beginning .		and Ending		_
		Extension	ESTIMATED TAX CURRENT YEAR			0	0
NAME			AMOUNT PAID AND CREDITED TO DATE			0	0
ADDRESS			AMOUNT DUE WITH EXTENSION			0	0
CITY, STATE, ZIP CODE			AMOUNT ENCLOSED	\$		0	0
			I declare, under the penaltic	es of perjury, that	this document has	been examir	ned by

me and, to the best of my knowledge and belief, is true, accurate and complete.