

2017 Extension Request

IMPORTANT NOTE: An extension will extend your time to file. It <u>does not</u> extend your time to pay. If you owe tax, penalties and interest will begin accruing after April 18, 2018 on the amount you owe.

<u>YOU MUST COMPLETE THE PERSONAL INFORMATION AND AMOUNT PAID SECTIONS OF THIS FORM*</u>. Incomplete forms cannot be filed. It is your responsibility to set an appointment to have your tax return completed before the extended deadline of October 15, 2018.

Personal Information*			
☐ Single / ☐ Married Filing Joint / ☐ Marri		/	
Qualifying Widow(er) with dependent characteristics Taxpayer	ild		
First Name	First Nama		
Last Name			
Social Security #	Social Security #		
Address:			
City:	State:	Zip:	
Phone:	Alternate Phone:		
Amount Paid*			
(box 4) that has been withheld. Add any qua W2 Amounts (box 2)	1099-R Amounts (box 4)	Quarterly Payments (1040-ES)	
Total Aı	mount Paid 2017: \$		
Extension with Payment (F If you desire to send money with the extension your account the amount stated on the date of from our office before your extension can be process. This part of the application is volun	on, please complete the following informat equested. An additional form requiring you e electronically transmitted. We will contact	ion. The IRS will electronically debit from r signature will be generated and sent to you	
Withdraw Date:	Amount: _\$		
Bank Name:			
Routing Number:			
Account Number:		☐ Savings / ☐ Checking	

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