

OPTIONAL - E-File an Extension

First Name:	Last Name:
Company Name:	
Business structure:	FEIN/SSN:
Address:	City, State, Zip:
Email:	Phone: () -
Date of Birth:	

Estimate of total tax liability*:	\$
Total payments made:	\$
Balance:	\$
Amount you'd like to pay with extension:	\$
Check here to pay the balance due	Pay full balance

*If you would like us to estimate your tax liability based on your prior year return, please attach your complete return to this form and check here:
Description Calculate my estimated tax liability for me.
Please list any adjustments to be made to last year's return to calculate estimated tax liability:

By completing and signing this form you are requesting Tuolumne Books LLC to complete and e-file an Automatic Extension of Time to File. If you would like to make a payment with your filing, please complete and return the attached Tax Payment Account Form. You will be able to review and sign your Automatic Extension before it is e-filed on your behalf.

Signature

Print Name

Title

Date