## Form 7004 Scenario 5

**RETURN TYPE**: 7004

**TAX YEAR:** 2021

FORMS REQUIRED: 7004

**TAX PERIOD:** 01/01/2021 – 12/31/2021

**HEADER INFO:** 

Originator: EFIN: Self-select

Type: ERO

Practitioner PIN: N/A
EFIN: Self-select
PIN: Self-select
PIN Entered by – ERO

**Filer: EIN:** 00-000051

Name: John N. Smith Estate

Name Control: SMIT

Address: 47 Lemon Street

Somewhere, TX 78881

**Binary Attachment Count:** 0

## Form **7004**(Rev. December 2018)

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## Application for Automatic Extension of Time To File Certain Business Income Tax, Information, and Other Returns

OMB No. 1545-0233

► File a separate application for each return. Department of the Treasury ▶ Go to www.irs.gov/Form7004 for instructions and the latest information. Internal Revenue Service Identifying number John N. Smith Estate 00-0000051 **Print** Number, street, and room or suite no. (If P.O. box, see instructions.) or **Type** City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).) Somewhere, TX 78881 Note: File request for extension by the due date of the return. See instructions before completing this form. Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions. 0 4 **Application Form Application Form** Is For: Code Is For: Code Form 706-GS(D) 01 Form 1120-ND (section 4951 taxes) 20 Form 706-GS(T) 02 Form 1120-PC 21 Form 1041 (bankruptcy estate only) 03 Form 1120-POL 22 Form 1041 (estate other than a bankruptcy estate) 04 Form 1120-REIT 23 Form 1041 (trust) 05 Form 1120-RIC 24 Form 1041-N 06 Form 1120S 25 Form 1041-QFT 07 Form 1120-SF 26 Form 1042 80 Form 3520-A 27 Form 1065 09 Form 8612 28 Form 1066 11 Form 8613 29 12 30 Form 1120 Form 8725 Form 1120-C 34 Form 8804 31 Form 1120-F 15 Form 8831 32 Form 1120-FSC 16 Form 8876 33 Form 1120-H 17 Form 8924 35 Form 1120-L 18 Form 8928 36 Form 1120-ND 19 Part II **All Filers Must Complete This Part** If the organization is a foreign corporation that does not have an office or place of business in the United States, 2 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, 3 If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application. If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here .  $\blacktriangleright$ The application is for calendar year 20 21, or tax year beginning , 20\_\_\_, and ending **Short tax year.** If this tax year is less than 12 months, check the reason: Initial return ☐ Final return Change in accounting period Consolidated return to be filed Other (See instructions—attach explanation.) 6

**Total** payments and credits. See instructions . . . . . . . . . . . . . . . . .

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