For Office Use Only

REQUEST FOR EXTENSION OF TIME TO FILE A RETURN AND/OR PAY ILLINOIS ESTATE AND GENERATION-SKIPPING TRANSFER TAXES

Es	tate of:		Date of Death:		
Dec	cedent's Address (No. & Street):				
City	<i>r</i> :	State:	Zip Code:		
De	cedent's Social Security Number:	Name of Illinois Co	County with Jurisdiction over Estate:		
Name of Personal Representative or Person Filing F		Filing Return:	Telephone:		
Add	dress (No. & Street):				
City	<i>r</i> :	State:	Zip Code:		
Naı	me of Preparer:		Telephone:		
Firr	m:		Email:		
Add	dress (No. & Street):		<u> </u>		
City	r.	State:	Zip Code:		
Due	Date of this Return:				
	FILING AND/OR P	AYMENT EXTENSIO	N BASED ON IRS EXTENSION		
	AN IRS FILING AND/OR PAYMENT EXTENSION HAS BEEN OR WILL BE REQUESTED. Attach a copy of the federal extension request. Submit proof of IRS approval when available. In the case of automatic filing extensions, proof of timely mailing of Form 4768 to the IRS will be accepted.				
	EXTENS	ION OF TIME TO FILE	E ILLINOIS FORM 700		
	AN ILLINOIS ATTORNEY GENERAL EXTENSION IS REQUESTED. An Illinois extension request should be filed within 9 months of the date of death.				
	Extension date requested:				

ILLINOIS FORM 700-EXT PAGE 1

Reason for Request (attach additional pages):

EXTENSION OF TIME TO PAY

You must attach your written statement to ex Illinois estate tax by the return due date.	plain in detail why it is impossible or imp	practical to pay the full amount of the		
Extension date requested:	····			
CHECK THE APPROPRIATE EXTENSION I	REQUEST BOX(ES):			
This request is for the tax that will be or was due with the filing of Illinois Form 700				
This request is for the tax that will be due as a result of a supplemental Illinois Form 700				
This request is for the tax that will be due as a result of an amended or supplemental Federal Form 706				
This request is for the tax that will be due as a result of an audit of the Federal Form 706*				
☐ This request is for a section 6166 instal	llment payment			
* Attach a copy of the federal Form 890 or ot accepted in writing." (35 ILCS 405/7(a)(2)).	her documentation showing that the adj	usted federal tax has been "paid or		
PAYMENT 1	TO ACCOMPANY EXTENSION REC	QUEST		
Amount of Illinois Estate Tax estimated to be	due	\$		
Amount of Illinois Estate Tax paid (attach a c	copy of the payment or Treasurer's rece	ipt) \$		
Balance for which extension of time to pay is	sought (see **NOTE below)	\$**		
**NOTE: If the Extension of Time to Pay III payment is made. An extension of time to				
	ATTESTATION			
If filed by executor—Under penalties of perdecedent and that to the best of my knowled				
Executor's Signature	Title	Date		
If filed by someone other than the execute belief, the statements made herein and attac application:				
Preparer's Signature	Title	Date		

ILLINOIS FORM 700-EXT PAGE 2

INSTRUCTIONS

This extension request must be filed with the Illinois Attorney General within nine (9) months of the date of death, or by the extended due date.

For Cook, DuPage, Lake, and McHenry Counties, file with:

Office of the Attorney General Revenue Litigation Bureau 115 S LaSalle Street Chicago, IL 60603

For all other counties, file with:

Office of the Attorney General Revenue Litigation Bureau 500 South Second Street Springfield, Illinois 62701

Payment of all taxes, interest and penalties must be made to the Illinois State Treasurer with the "Illinois State Treasurer Estate Tax Payment Form" at the address designated therein. A copy of the Payment Form is available on the State Treasurer's website at www.illinoistreasurer.gov/Individuals/Estate_Tax. All payments must be mailed to or deposited with the State Treasurer in order to be credited with timely payment.

If you have questions regarding this Form or Illinois Estate Tax extensions generally, please contact the Attorney General's office at (312) 814-2491 (Chicago) or at (217) 524-5095 (Springfield). If you have questions regarding the procedure for paying the tax, please contact the State Treasurer at 1-800-252-8919.

ILLINOIS FORM 700-EXT PAGE 3