Office of the New Mexico Secretary of State Filing Number: 0002217476 Filed On: 3/15/2022

Department of the Treasury Internal Revenue Service

## Application for Automatic Extension of Time To File Certain winder of Pages: 1 of 1 Business Income Tax, Information, and Other Returns OMB No. 1545-0

OMB No. 1545-0233

► File a separate application for each return.

▶	Go to	www.irs.	.gov/Forn	17004 for	instructions	and	the I	latest	informati	ior
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	Name Identifying number									
Print	ROGERS MORTUARY INC									
	85-0065103									
or		et, and room or suite no. (If P.O. box, see instructions.)								
Type	600 REYNOLDS AVENUE									
	City, town, state, and ZIP code (If a foreign address	s, enter city, prov	vince or state, and country (follow the country's pr	actice for entering posta	I code).)					
	LAS VEGAS		NM 87701							
	File request for extension by the due date of the retu				<del></del>					
Part			·							
1	Enter the form code for the return listed below	that this app	olication is for	<del> </del>	. 2 5					
Applic		Form	Application		Form					
Is For		Code	Is For:		Code					
	706-GS(D)	01	Form 1120-ND (section 4951 taxes	s)	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					
Form	1120	12	Form 8725		30					
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	1								
2	If the organization is a foreign corporation that	does not ha	eve an office or place of business in the	e United States,						
	check here		·		. ▶ □					
3	If the organization is a corporation and is the o	common pare	ent of a group that intends to file a con	solidated return,						
	check here				. ▶ □					
	If checked, attach a statement listing the name	e, address, a	and employer identification number (El	N) for each member	er					
	covered by this application.									
4	If the organization is a corporation or partners	hip that qual	ifies under Regulations section 1.6081	I-5, check here	<b>▶</b> □					
5a	The application is for calendar year 20 21,	or tax year b	eginning , 20 , and	d ending	, 20					
	Short tax year. If this tax year is less than 12			Final return						
	☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (See instructions-attach explanation.)									
6	Tentative total tax	. 6	0_							
7	Total payments and credits. See instructions			. 7	0					
8	<b>Balance due.</b> Subtract line 7 from line 6. See	instructions		. 8	0					

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **7004** (Rev. 12-2018)