

### STATE OF ARKANSAS

# **Estimated Tax Declaration Vouchers** and Instructions for Tax Year 2016

# WHO MUST FILE A DECLARATION OF ESTIMATED TAX (Voucher 1)

Every taxpayer subject to the Income Tax Act of 1987, as amended, must file with the Department of Finance and Administration a Declaration of Estimated Tax (Voucher 1) for the income year if the taxpayer can reasonably expect their estimated tax to be more than one thousand dollars (\$1,000).

**Exception:** Individuals whose income from farming for the income year can reasonably be expected to amount to at least two thirds (2/3) of the total gross income from all sources for the income year may file a declaration and pay the estimated tax on or before the fifteenth (15th) day of the second (2nd) month after the close of the income year. Instead of filing a declaration, you may file an income tax return and pay the full amount of tax on or before the fifteenth (15th) day of the third (3rd) month after the close of the income year.

# WHEN TO FILE YOUR DECLARATION OF ESTIMATED TAX (Voucher 1)

- 1. Calendar year 2016 filers must file their Declaration of Estimated Tax on or before April 15 of the income year.
- 2. Fiscal year filers must file their Declaration of Estimated Tax on or before the fifteenth (15th) day of the fourth (4th) month of the income year with the subsequent payments being made on a quarterly installment basis.

#### **IMPORTANT NOTICE**

If the due date of a voucher falls on a Saturday, Sunday, or legal holiday, the payment will be considered timely filed if it is postmarked on the next succeeding business day.

# WHERE TO FILE YOUR DECLARATION OF ESTIMATED TAX (Voucher 1)

Mail your Declaration of Estimated Tax (Voucher 1) and subsequent payments **(with vouchers)** to the following address:

Department of Finance and Administration Income Tax Section P.O. Box 9941 Little Rock. AR 72203-9941

Make checks or money orders payable to Department of Finance and Administration. Write your Social Security Number on check or money order.

#### **UNDERESTIMATE OF TAX**

A taxpayer who makes a Declaration of Estimated Tax for the income year must estimate an amount not less than ninety percent (90%) of the amount actually due. If a taxpayer fails to make a Declaration of Estimated Tax and pay on the quarterly due date the equivalent of at least ninety percent (90%) of the amount actually due, a penalty of ten percent (10%) per annum shall be added to the amount of the underestimate. The ten percent (10%) per annum penalty will be assessed on a quarterly basis. A taxpayer who has uneven income may compute the ten percent (10%) penalty on an annualized basis. The Underestimate Penalty is computed on the lesser of the current year's tax liability or the previous year's tax liability.

### EXTENSION PAYMENT - Due April 15th, 2017

Included with Vouchers 1 through 4 is Voucher 5 for making your payment with an extension (if needed) for tax year 2016. A payment made with Voucher 5 will not be included as an estimated payment for calculating Underestimate Penalty. Voucher 5 and payment must be attached to a copy of a Federal Extension Form 4868 or Arkansas Extension Form 1055.

### HOW TO COMPLETE DECLARATION AND VOUCHERS

- Fill out the Estimated Tax Worksheet to figure your estimated tax for 2016. You must make an actual estimate of your income, deductions, and credits for 2016. Consider all available facts that will affect items during the year. It may be helpful to use last year's income and deductions as a starting point, making adjustments for 2016.
- Enter one-fourth (1/4) of Line 8 of the worksheet on "Amount of This Payment" space of voucher. Round payment to nearest whole dollar. (Example: payment of \$793.74 should be entered on voucher as \$794.00.)
- If previously requested on AR1000F/AR1000NR, the overpayment from will be credited to your estimated tax for 2016. The overpayment will be credited to the primary Social Security Number on Form AR1000F/ AR1000NR.
- Attach to the voucher your check or money order payable to the Department of Finance and Administration.

Be sure to write your Social Security Number on your check or money order.

#### If further instructions are needed, you may:

- 1. Call us at (501) 682-1100, or
- 2. Come by our office, Room 2300, Joel Y. Ledbetter Building,  $7^{\text{th}}$  and Wolfe, Little Rock, AR, or
- 3. Write us at P.O. Box 3628, Little Rock, AR 72203-3628.

20	016 ESTIMATED TAX WO	ORKSHEET (FOR YOUR RECO	ORDS ONLY)	PRIMARY	SPOUSE
1.	Enter Adjusted Gross Income exp	ected in 2016	1	Ic	00 00
2.		s, enter the estimated total of those deducti			
		er the standard deduction of \$2,200 per taxp	•		00
3.		axable Income)		C	00 00
1.	,	on Line 3 by using Tax Rate Schedule on fo		C	00 00
5.				5	00
).	•	it of each credit.)			00
'. '.	,	o be withheld during 2016 from salaries, wa			00
3.		nd 7 from Line 5)			00
	If \$1,000 or more, file the De	claration Voucher.			
	If less than \$1,000 no Declar	ration Voucher is required.			
		le a declaration on April 15, 2016: ourth (1/4) of Line 8. <i>(Make four (4) installm</i>	ents.)		
		le a declaration on June 15, 2016: nird (1/3) of Line 8. (Make three (3) installm	ents.)		
		le a declaration on September 15, 2016: alf (1/2) of Line 8. (Make two (2) installmen	ts.)		
		le a declaration on January 15, 2017: oucher. (Line 8 must be paid in full.)			
ΓΑ	X CREDITS				
	Single or Married Filing Separate F	-orms		\$26	
	Married Filing Joint Return, Head	of Household, Married Filing Separately			
	_	Widow(er) with Dependent Child		\$52	
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	•	ecial			
	·	ial			
05	stmarked on the next succeed 000ES Instructions (R 7/22/15)	s on a Saturday, Sunday, or legal h ding business day which is not a Sa y the dotted line or the proce	aturday, Sunday, or lega	l holiday.	
. [	R1000FS	STATE of ARKA	NSAS	2016	<u>,                                    </u>
۱ſ	(R 7/22/15)	<b>Estimated Tax for Individ</b>	uals (Declaration	1)	,
	AIRS	Calendar Year 20	116 or	Vouche	er _
	AIRS	Fiscal Year Ending(MN	I/DD/YYYY)	1	
	Your Social Security Number	Spouse's Social Security Number (if applicable)	Due Date		
			04/15/2016		
	First	MI Last			
	Primary Name				
	Spouse Name				
	Address		Amount		
			of this	\$	
	City, State, Zip		Payment	Includ	e Cents
	Telephone #				34,567.00)

### TAX RATE SCHEDULE

If your **NET TAXABLE INCOME** is less than \$4,300, your tax is nine tenths of one percent (.9%) of your net taxable income. [**Example**: If your net taxable income is \$2,750, your tax is nine tenths of one percent (.9%) of that amount (\$25).]

IF YOUR NET TAXABLE INCOME IS:	BUT NOT MORE THAN:	YOUR TAX IS:	PLUS %	OF THE EXCESS OVER:	IF YOUR NET TAXABLE INCOME IS:	BUT NOT MORE THAN:	YOUR TAX IS:	PLUS %	OF THE EXCESS OVER:
\$ 4,300.00	\$ 8,399.99	\$ 39.00	2.4	\$ 4,299.99	\$ 68,001.00	\$ 69,000.99	\$ 3,345.00	6.0	\$ 68,000.99
8,400.00	12,599.99	137.00	3.4	8,399.99	69,001.00	70,000.99	3,405.00	6.0	69,000.99
12,600.00	20,999.99	280.00	4.4	12,599.99	70,001.00	71,000.99	3,465.00	6.0	70,000.99
21,000.00	23,999.99	666.00	5.0	20,999.99	71,001.00	72,000.99	3,525.00	6.0	71,000.99
24,000.00	24,999.99	816.00	5.0	23,999.99	72,001.00	73,000.99	3,585.00	6.0	72,000.99
25,000.00	25,999.99	866.00	5.0	24,999.99	73,001.00	74,000.99	3,645.00	6.0	73,000.99
26,000.00	26,999.99	916.00	5.0	25,999.99	74,001.00	75,000.99	3,705.00	6.0	74,000.99
27,000.00	27,999.99	966.00	5.0	26,999.99	75,001.00	76,000.99	3,825.00	6.9	75,000.99
28,000.00	28,999.99	1,016.00	5.0	27,999.99	76,001.00	77,000.99	3,994.00	6.9	76,000.99
29,000.00	29,999.99	1,066.00	5.0	28,999.99	77,001.00	78,000.99	4,163.00	6.9	77,000.99
30,000.00	30,999.99	1,116.00	5.0	29,999.99	78,001.00	79,000.99	4,332.00	6.9	78,000.99
31,000.00	31,999.99	1,166.00	5.0	30,999.99	79,001.00	80,000.99	4,501.00	6.9	79,000.99
32,000.00	32,999.99	1,216.00	5.0	31,999.99	80,001.00	81,000.99	4,610.00	6.9	80,000.99
33,000.00	33,999.99	1,266.00	5.0	32,999.99	81,001.00	82,000.99	4,679.00	6.9	81,000.99
34,000.00	34,999.99	1,316.00	5.0	33,999.99	82,001.00	83,000.99	4,748.00	6.9	82,000.99
35,000.00	35,099.99	1,366.00	5.0	34,999.99	83,001.00	84,000.99	4,817.00	6.9	83,000.99
35,100.00	49,999.99	1,371.00	6.0	35,099.99	84,001.00	85,000.99	4,886.00	6.9	84,000.99
50,000.00	68,000.99	2,265.00	6.0	49,999.99	85,001.00	AND OVER	4,955.00	6.9	85,000.99

RECORD	VOUCHER	1	2	3	4	TOTAL
ESTIMATED	DATE					
TAX	AMOUNT					
PAYMENT	OVERPAYMENT					
HERE	TOTAL DUE					
IILKL	DATE PAID					

AR1000ES Tax Table (R 12/10/15)

NOTE: Please cut each voucher as straight as possible along the dotted line.

igvee You must cut along the dotted line or the processing of your payment will be delayed. igvee

R1000ES (R 7/22/15)	STATE of ARKA Estimated Tax for	2016	
AIRS	Calendar Year 20 Fiscal Year Ending (MN	016 or //DD/YYYY)	Voucher 2
Your Social Security Number	Spouse's Social Security Number (if applicable)	Due Date <b>06/15/2016</b>	
First MI Primary Name	Last		
Spouse Name Address		Amount	
City, State, Zip Telephone #		of this Payment	\$ Include Cents

NOTE: Please cut each voucher as straight as possible along the dotted line.

**♦** You must cut along the dotted line or the processing of your payment will be delayed. **♦** 

	000ES			STATE of ARK		2016			
A	AIRS			Calendar Year 2016 or Fiscal Year Ending(MM/DD/YYYY)				Voucher 3	コ
	Your Social S	ecurity Number		Spouse's Social Security Number (if applicable)		Due Date 15/2016			
Pri	imary Name	First	MI	Last					
Ad	ddress ty, State, Zip					Amount of this	\$		
	elephone #					Paymen	Ţ	Include Cents (ex. 1,234,567.00)	

NOTE: Please cut each voucher as straight as possible along the dotted line.

igspace You must cut along the dotted line or the processing of your payment will be delayed. igspace

AF	R1000E (R 7/22/15)	S		STATE of ARK Estimated Tax fo	2016			
	AIRS			Calendar Year 2 Fiscal Year Ending(N	<u>Y)</u>	Voucher 4	$\neg$	
	Your S	ocial Security Number		Spouse's Social Security Number (if applicable)		Due Date		
	Primary Name Spouse Name Address City, State, Zip	First	MI	Last		Amount of this Payment	\$	
	Telephone #						Include Cents (ex. 1,234,567.00)	

NOTE: Please cut each voucher as straight as possible along the dotted line.

▼ You must cut along the dotted line or the processing of your payment will be delayed. ▼

						. — —		
AR1000ES	Estimat	ed Tax	STATE of ARK for Individuals (		t With Ex	tens	2016 ion)	
AIRS			Calendar Year 2 Fiscal Year Ending(M	2016 or IM/DD/YYYY)	-		<b>Voucher</b> 5	_
Your Social Sec	urity Number	Spo	use's Social Security Number (if applicable)	Due	Date			
				04/15	/2017			
	First M	II	Last					
Primary Name								
Spouse Name								
Address					Amount of this	\$		
City, State, Zip					Payment	, r		
Telephone #							Include Cents (ex. 1,234,567.00)	