



TENNESSEE DEPARTMENT OF REVENUE
QUARTERLY FRANCHISE, EXCISE TAX DECLARATION

FAE 172

Taxable Year Beginning/Ending, Account No.

Each taxpayer having a combined franchise and excise tax liability of \$5,000 or more for the current tax year must make four quarterly estimated tax payments...

Make your check payable to the Tennessee Department of Revenue and mail to:

Tennessee Department of Revenue
Andrew Jackson State Office Building
500 Deaderick Street
Nashville, TN 37242

For assistance, you may call in-state toll free 1-800-342-1003 or (615) 253-0600.

TAXPAYER NAME AND MAILING ADDRESS
NAME
BOX (STREET)
CITY
STATE ZIP

REMINDERS

- 1. Please read instructions on reverse side before preparing worksheet.
2. Use the prenumbered vouchers and envelopes provided by the Department of Revenue.
3. Enter the amount from Line 4 of the worksheet to the "Amount of Payment" field on the voucher.
4. If Line 4 of the worksheet is zero, please do not file the voucher.

ROUND TO NEAREST DOLLAR

Table with 4 rows: 1. Estimated Franchise, Excise tax liability; 2. Less: Franchise, Excise Tax Credits and prior year overpayments; 3. Net Estimated Franchise, Excise tax liability; 4. Estimated payment (one fourth of Line 3). Columns for amount and 00.

KEEP UPPER PORTION FOR YOUR RECORDS-RETURN COPY BELOW

FAE 172

TENNESSEE DEPARTMENT OF REVENUE
QUARTERLY FRANCHISE, EXCISE TAX DECLARATION

1

Taxable Year BEGINNING ENDING
ACCOUNT NUMBER

Due Date:

If your account number is not preprinted or unknown, enter federal identification or social security number.

(FEIN/SSN)

Grid for FEIN/SSN entry

AMOUNT OF PAYMENT

Grid for AMOUNT OF PAYMENT entry, ending in 00

FOR OFFICE USE ONLY

Grids for office use only

INSTRUCTIONS

1. **WHO MUST MAKE ESTIMATED TAX PAYMENTS:** Taxpayers who expect a franchise, excise tax liability of \$5,000 or more for the current tax year must file a declaration of their franchise, excise tax for the taxable year and make quarterly payments.
2. **WHEN TO MAKE PAYMENTS:** Quarterly payments of the estimated franchise, excise tax are to be made as follows:

1st payment - The 15th day of the 4th month of the current taxable year.
2nd payment - The 15th day of the 6th month of the current taxable year.
3rd payment - The 15th day of the 9th month of the current taxable year.
4th payment - The 15th day of the 1st month of the subsequent taxable year.
3. **REQUIRED PAYMENT:** The minimum amount of each quarterly payment shall be the lesser of: (a) 25% of the combined franchise, excise tax shown on the tax return for the preceding tax year, annualized if the preceding tax year was for less than twelve (12) months; or (b) 25% of 100% of the combined franchise, excise tax liability for the current tax year.
4. **PENALTY AND INTEREST:** Penalty at the rate of 5% per month, up to 25%, and interest at the current rate per annum are imposed upon any quarterly installment which is late or underpaid. Penalty and interest are computed from the due date of the installment to the date paid or until the fifteenth day of the fourth month following the close of the taxable year.
5. **WHICH FORM TO USE:** All franchise, excise tax payments must be accompanied by the Tennessee Estimated Franchise, Excise Tax Declaration form. If you received a preaddressed packet, please use the prenumbered vouchers and envelopes supplied with the packet. This will help expedite the processing of your estimated payments.

RECORD OF ESTIMATED TAX PAYMENTS

DUE DATE OF PAYMENT	DATE PAID	AMOUNT PAID
1.		
2.		
3.		
4.		
Total payments to be taken on completed return		

**FAE
172**

TENNESSEE DEPARTMENT OF REVENUE
QUARTERLY FRANCHISE, EXCISE TAX DECLARATION

2

Taxable Year	BEGINNING	ENDING
ACCOUNT NUMBER		

Due Date:

If your account number is not preprinted or unknown, enter federal identification or social security number.

(FEIN/SSN) ➤

AMOUNT OF PAYMENT ➤

 00

FOR OFFICE USE ONLY ➤

RV-R0011301

**FAE
172**

TENNESSEE DEPARTMENT OF REVENUE
QUARTERLY FRANCHISE, EXCISE TAX DECLARATION

3

Taxable Year	BEGINNING	ENDING
ACCOUNT NUMBER		

Due Date:

If your account number is not preprinted or unknown, enter federal identification or social security number.

(FEIN/SSN) ➤

AMOUNT OF PAYMENT ➤

 00

FOR OFFICE USE ONLY ➤

RV-R0011301

**FAE
172**

TENNESSEE DEPARTMENT OF REVENUE
QUARTERLY FRANCHISE, EXCISE TAX DECLARATION

4

Taxable Year	BEGINNING	ENDING
ACCOUNT NUMBER		

Due Date:

If your account number is not preprinted or unknown, enter federal identification or social security number.

(FEIN/SSN) ➤

AMOUNT OF PAYMENT ➤

 00

FOR OFFICE USE ONLY ➤

RV-R0011301