

STATE OF ARKANSAS

Estimated Tax Declaration Vouchers and Instructions for Tax Year 2015

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)

- Calendar year 2015 filers must file their Declaration of Estimated Tax on or before April 15 of the income year.
- 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, 2016

Included with Vouchers 1 through 4 is Voucher 5 for making your payment with an extension (if needed) for tax year 2015. 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 2015. You must make an actual estimate of your income, deductions, and credits for 2015. 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 2015.
- 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 2015. 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, 7th and Wolfe, Little Rock, AR, or
- 3. Write us at P.O. Box 3628, Little Rock, AR 72203-3628.

20	15 ESTIMATED TAX WOR	KSHEET (FOR YOUR RECO	RDS ONLY)	PRIMARY	SPOUSE
	Enter Adjusted Gross Income expect	ed in 2015	1	00	0 00
	•	enter the estimated total of those deduction	- t		
	•	he standard deduction of \$2,200 per taxp	, i	00	00
		able Income)		00	0(
	,	Line 3 by using Tax Rate Schedule on fo	L	00	0
				5	00
	•	f each credit.)			00
	,	e withheld during 2015 from salaries, wa			00
•		7 from Line 5)			00
	If \$1,000 or more, file the Decla	ration Voucher.			
	If less than \$1,000 no Declaration	on Voucher is required.			
	If you first become liable to file a Enter on voucher one-four	a declaration on April 15, 2015: th (1/4) of Line 8. <i>(Make four (4) installme</i>	ents.)		
	If you first become liable to file a Enter on voucher one-third	a declaration on June 15, 2015: I (1/3) of Line 8. <i>(Make three (3) installme</i>	ents.)		
		a declaration on September 15, 2015: (1/2) of Line 8. (Make two (2) installment	s.)		
		a declaration on January 15, 2016: cher. (Line 8 must be paid in full.)			
A	X CREDITS				
	Single or Married Filing Separate For	ms		\$26	
	Married Filing Joint Return, Head of I	Household, Married Filing Separately			
	_	idow(er) with Dependent Child		\$52	
	•	al			
	·				
R10	You must cut along t	he dotted line or the proce	essing of your paymo	ent will be d	elayed.
•	(R 10/3/14)	stimated Tax for Individ	uals (Declaration))	
	AIRS	Calendar Year 20 Fiscal Year Ending	15 or	Vouche	_
		(MM	/DD/YYYY)	1	
	Your Social Security Number	Spouse's Social Security Number (if applicable)	Due Date		
	First Mi	Last			
	Primary Name				
	Spouse Name				
	Address		Amount of this	2	
	City, State, Zip		Payment		
	Telephone #			Include (ex. 1,234	

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	\$ 4,999.00	\$ 39.00	2.5	\$ 4,299.00	\$ 19,000.00	\$ 19,999.00	\$ 576.00	4.5	\$ 18,999.00
5,000.00	5,999.00	56.00	2.5	4,999.00	20,000.00	20,999.00	621.00	4.5	19,999.00
6,000.00	6,999.00	81.00	2.5	5,999.00	21,000.00	21,999.00	666.00	6.0	20,999.00
7,000.00	7,999.00	106.00	2.5	6,999.00	22,000.00	22,999.00	726.00	6.0	21,999.00
8,000.00	8,399.00	131.00	2.5	7,999.00	23,000.00	23,999.00	786.00	6.0	22,999.00
8,400.00	8,999.00	141.00	3.5	8,399.00	24,000.00	24,999.00	846.00	6.0	23,999.00
9,000.00	9,999.00	162.00	3.5	8,999.00	25,000.00	25,999.00	906.00	6.0	24,999.00
10,000.00	10,999.00	197.00	3.5	9,999.00	26,000.00	26,999.00	966.00	6.0	25,999.00
11,000.00	11,999.00	232.00	3.5	10,999.00	27,000.00	27,999.00	1,026.00	6.0	26,999.00
12,000.00	12,599.00	267.00	3.5	11,999.00	28,000.00	28,999.00	1,086.00	6.0	27,999.00
12,600.00	12,999.00	288.00	4.5	12,599.00	29,000.00	29,999.00	1,146.00	6.0	28,999.00
13,000.00	13,999.00	306.00	4.5	12,999.00	30,000.00	30,999.00	1,206.00	6.0	29,999.00
14,000.00	14,999.00	351.00	4.5	13,999.00	31,000.00	31,999.00	1,266.00	6.0	30,999.00
15,000.00	15,999.00	396.00	4.5	14,999.00	32,000.00	32,999.00	1,326.00	6.0	31,999.00
16,000.00	16,999.00	441.00	4.5	15,999.00	33,000.00	33,999.00	1,386.00	6.0	32,999.00
17,000.00	17,999.00	486.00	4.5	16,999.00	34,000.00	34,999.00	1,446.00	6.0	33,999.00
18,000.00	18,999.00	531.00	4.5	17,999.00	35,000.00	35,099.00	1,506.00	6.0	34,999.00
					35,100.00	and over	1,512.00	7.0	35,099.00

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

AR1000ES Tax Table (R 10/23/14)

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

AR1000ES (R 10/3/14)		STATE of ARKA Estimated Tax for		duals	2015	
AIRS		Calendar Year 20 Fiscal Year Ending (MN)15 or 1/DD/YYY	<u>Y)</u>	Voucher 2	٦
Your Social Security Number		Spouse's Social Security Number (if applicable)	D	ue Date		
First Primary Name Spouse Name	MI	Last				
Address City, State, Zip Telephone #				Amount of this \$ Payment	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	STATE of ARKA Estimated Tax for		duals	2015 s			
AIRS		Calendar Year 20 Fiscal Year Ending (MM	15 or /DD/YYYY)		Voucher 3	٦
Your Social Security Number First	Sp	oouse's Social Security Number (if applicable)	Du	e Date			
Primary Name Spouse Name Address City, State, Zip Telephone #				Amount of this Payment	\$	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

AR1000ES (R 10/3/14)		STATE of ARKA Estimated Tax for		2015	
AIRS		Calendar Year 20 Fiscal Year Ending(MN	15 or I/DD/YYYY)	Voucher 4	
Your Social Security Number		Spouse's Social Security Number (if applicable)	Due Date		
First Primary Name Spouse Name Address	MI	Last	Amou		
City, State, Zip Telephone #			of th Paym	Include Cents (ex. 1,234,567.00)	

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

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

AR1000ES (R 10/3/14)	Estim	ated T	STATE of ARI ax for Individuals		ent With Ext	ension	2015	
AIRS			Calendar Year Fiscal Year Ending (I	2015 or MM/DD/YYY	Y)		Voucher 5	_
Your Social Sec	curity Number	MI	Spouse's Social Security Number (if applicable)		due Date			
Primary Name Spouse Name Address						\$		
City, State, Zip Telephone #					Payment		Include Cents (ex. 1,234,567.00)	