

STATE OF ARKANSAS Estimated Tax Declaration Vouchers and Instructions for Tax Year 2017

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 third (3rd) month after the close of the income year.

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

- 1. Calendar year 2017 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, 2018

Included with Vouchers 1 through 4 is Voucher 5 for making your payment with an extension (if needed) for tax year 2017. 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 2017. You must make an actual estimate of your income, deductions, and credits for 2017. 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 2017.
- 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 2017. The overpayment will be credited to the primary Social Security Number on Form AR1000F/AR1000NR.
- 4. 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
- 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.

2017 ESTIMATED TAX WORKSHEET (FOR YOUR RECORDS ONLY)

· · · · · · · · · · · · · · · · · · ·	PRIN	IARY	SPO	USE
Enter Adjusted Gross Income expected in 20171		00		00
If you expect to itemize deductions, enter the estimated total of those deductions. If you do not				
expect to itemize deductions, enter the standard deduction of \$2,200 per taxpayer		00		00
Subtract Line 2 from Line 1 (Net Taxable Income)		00		00
Tax (Compute tax on the amount on Line 3 by using Tax Rate Schedule on following page.)4		00		00
Total Tax (Add entries on Line 4)	5		00	
Tax Credits (See below for amount of each credit.)	6		00	
Estimated amount of income tax to be withheld during 2017 from salaries, wages, commissions, etc	7		00	
Estimated Tax (Subtract Lines 6 and 7 from Line 5)	8		00	
	If you expect to itemize deductions, enter the estimated total of those deductions. If you do not expect to itemize deductions, enter the standard deduction of \$2,200 per taxpayer	Enter Adjusted Gross Income expected in 2017	If you expect to itemize deductions, enter the estimated total of those deductions. If you do not 00 expect to itemize deductions, enter the standard deduction of \$2,200 per taxpayer. 2 Subtract Line 2 from Line 1 (Net Taxable Income) 3 Tax (Compute tax on the amount on Line 3 by using Tax Rate Schedule on following page.) 4 Total Tax (Add entries on Line 4) 5 Tax Credits (See below for amount of each credit.) 6 Estimated amount of income tax to be withheld during 2017 from salaries, wages, commissions, etc. 7	Enter Adjusted Gross Income expected in 2017. 1 00 If you expect to itemize deductions, enter the estimated total of those deductions. If you do not 00 expect to itemize deductions, enter the standard deduction of \$2,200 per taxpayer. 2 00 Subtract Line 2 from Line 1 (Net Taxable Income) 3 00 Tax (Compute tax on the amount on Line 3 by using Tax Rate Schedule on following page.) 4 00 Total Tax (Add entries on Line 4) 5 00 Tax Credits (See below for amount of each credit.) 6 00 Estimated amount of income tax to be withheld during 2017 from salaries, wages, commissions, etc. 7 00

If \$1,000 or more, file the Declaration Voucher.

If less than \$1,000 no Declaration Voucher is required.

If you first become liable to file a declaration on April 15, 2017: Enter on voucher one-fourth (1/4) of Line 8. (Make four (4) installments.)

If you first become liable to file a declaration on June 15, 2017: Enter on voucher one-third (1/3) of Line 8. (Make three (3) installments.)

If you first become liable to file a declaration on September 15, 2017: Enter on voucher one-half (1/2) of Line 8. (Make two (2) installments.)

If you first become liable to file a declaration on January 15, 2018: Enter total tax due on voucher. (*Line 8 must be paid in full.*)

TAX CREDITS

1.	Single or Married Filing Separate Forms	\$26
2.	Married Filing Joint Return, Head of Household, Married Filing Separately	
	on the Same Return, or Qualifying Widow(er) with Dependent Child	\$52
3.	Dependent	.\$26 each
4.	Blind, Deaf, Over 65 and/or 65 Special	.\$26 each
5.	Developmentally Disabled Individual	\$500 each

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 which is not a Saturday, Sunday, or legal holiday.

AR1000ES Instructions (R 6/29/2016)

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

AR1000ES (R 8/26/2016)	STATE of AF	2017		
oftware ID	Calendar Yea Fiscal Year Ending	Voucher 1	Г	
Your Social Security Number	Spouse's Social Security Number (if applicable)	Due Date 04/15/2017		
First Primary Name Spouse Name Address City, State, Zip Telephone #	MI Last	Amount of this Payment	Include Cents (ex. 1,234,567.00)	

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					
ПЕКЕ	DATE PAID					

AR1000ES Tax Table (R 12/10/15)

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

$igsymbol{\downarrow}$ You must cut along the dotted line or the processing of your payment will be delayed. $igsymbol{\downarrow}$

AR1000ES (R 8/26/2016)		STATE of ARK		duals		2017	
Software ID		Calendar Year 2 Fiscal Year Ending (M	2017 or IM/DD/YYYY	()		Voucher 2	Г
Your Social Security Nu	mber	Spouse's Social Security Number (if applicable)	Di	ue Date			
			06/1	5/2017			
First	MI	Last					
Primary Name							
Spouse Name							
Address				Amount of this	\$		
City, State, Zip				Payment	Ť L		
Telephone #						Include Cents (ex. 1,234,567.00)	

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

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

R1000ES STATE of ARKANSAS (R 8/26/2016) Estimated Tax for Individ				iduals	 2017	
oftware ID		Calendar Year 2 Fiscal Year Ending (Mi	017 or M/DD/YYY	Y)	Voucher 3	Г
Your Social Security Number		Spouse's Social Security Number (if applicable)		Due Date		
First	MI	Last				
Primary Name Spouse Name						
Address				Amount of this	\$	
City, State, Zip Telephone #				Payment	Include Cents (ex. 1,234,567.00)	

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

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

R1000ES (R 8/26/2016)	STATE of ARK Estimated Tax fo		2017
ftware ID	Calendar Year Fiscal Year Ending(I	2017 or /IM/DD/YYYY)	Voucher
Your Social Security Number	Spouse's Social Security Number (if applicable)	Due Date 01/15/2018	
First Primary Name Spouse Name Address City, State, Zip	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. \mathbf{v}	ᡟ

	R1000ES	S Estin	nated	STATE of ARK Tax for Individuals (ent With Exter	2017 nsion)	
Softv	vare ID			Calendar Year Fiscal Year Ending(N	2017 or 1M/DD/YYY	Y)	Voucher _	٦
	Your Socia	al Security Number		Spouse's Social Security Number (if applicable)	C	Due Date		
					04 /*	15/2018		
		First	MI	Last				
	Primary Name							
	Spouse Name							
	Address					Amount of this \$		
	City, State, Zip					Payment		
	Telephone #						Include Cents (ex. 1,234,567.00)	