

**Declaration/Installment of Florida Estimated Income/Franchise and
Emergency Excise Tax for Taxable Year Beginning on or After January 1, 2008**

Installment # _____

You must write within the boxes. (example)

0	1	2	3	4	5	6	7	8	9
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 If typing, type through the boxes. (example)

0	1	2	3	4	5	6	7	8	9
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Write your numbers as shown and enter one number per box.

Name
Address
City/St/ZIP

F-1120ES

FEIN

--	--	--	--	--	--	--	--	--	--

Taxable year end

M	M	D	D	Y	Y
---	---	---	---	---	---

Estimated tax payment
(See reverse side)

US DOLLARS

--	--	--	--	--	--	--	--	--	--

 CENTS

--	--

Office use only

M	M	D	D	Y	Y
---	---	---	---	---	---

Check here if you transmitted funds electronically

Make checks payable and mail to: Florida Department of Revenue, 5050 W Tennessee St, Tallahassee FL 32399-0135

9100 0 20089999 0002005033 3 3999999999 0000 2

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Information for Filing Form F-1120ES

F-1120ES
R. 01/08

- 1. Who must make estimated tax payments** — Every domestic or foreign corporation or other entity subject to taxation under the provisions of Chapter 220 and/or Chapter 221, Florida Statutes, must make a declaration of estimated tax for the taxable year if the amount of income tax liability and the amount of emergency excise tax liability for the year is expected to be more than \$2,500.
- 2. Due Date** — Generally, estimated tax must be paid on or before the 1st day of the 5th, 7th, and 10th month of the taxable year and the 1st day of the 1st month of the following taxable year; 25 percent of the estimated tax must be paid with each installment.
- 3. Amended Declaration** — To prepare an amended declaration, write “Amended” on Florida Form F-1120ES and complete Lines 1 through 3 of the appropriate installment. An amendment may be filed during any interval between installment dates prescribed for the taxable year. Any increase in the estimated tax must be timely paid.
- 4. Interest and Penalties** — Failure to comply with the law with respect to the filing of a declaration or the payment of an estimated tax will result in the assessment of interest and penalties.

Contact person for questions _____

Phone number (_____) _____

To file online go to www.myflorida.com/dor/eservices

Estimated Tax Payment	Combined Income/Franchise and Emergency Excise Tax
1. Amount of this installment	1.
2. Amount of overpayment from last year for credit to estimated tax and applied to this installment	2.
3. Amount of this payment (Line 1 minus Line 2)	3.

Transfer the amount in Line 3 to **Estimated tax payment** box on front.

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