

Underpayment of Individual Income Tax Penalty Computation 2016 Taxable Year

Resident Filers

PLEASE PRINT OR TYPE.

	Name as shown in the order on ta	v roturn				-		-	PRINT OR T	IFC.
Yours					Social Security Number Yours					
Spo	use's				Spouse'	s				
	ction 1 – Required Annual Payment Computat	ion								
1	2016 tax liability - See instructions.									00
2	2015 tax liability - See instructions.									00
3	Enter the smaller of Line 1 or Line 2									00
4	Number of payments required for year									
Se	ction 2 – Underpayment Computation	04/15/16		0	06/15/16		09/15/16		01/15/17	
5	Required payment - From Section 1, divide amount on Line 3 by amount on Line 4 . See instructions.		00					00		00
6	Amount paid for each period - See instructions.		00			00		00		00
7	Carryforward - Overpayment or underpayment from previous period shown on Line 9 of each column. Carryforward amounts from the previous period can be a positive number or a negative number. Note: No carryforward amount can be shown for the first period. See instructions.					00		00		00
8	Amount available for period. Add Lines 6 and 7.		00			00		00		00
9	Underpayment or overpayment - Subtract Line 5 from Line 8. A positive number indicates an overpayment. A negative number indicates an underpayment. Move the number on this line to Line 7 in next column.		00			00		00		00
Se	ction 3 – Exceptions									
10	Exception 1 – See worksheet on page 3. If you mee STOP – You do not need to file this form.	t this exception	on, y	ou do	not owe	e an	underpaymer	it pei	nalty.	
11	Exception 2 – Prior Year's Tax Liability		00			00		00		00
12	Exception 3 – Prior Year's Income.		00			00		00		00
13	Exception 4 – Annualized Income		00			00		00	no exceptior available	۱
14	Exception 5 – Installment Period Income		00			00		00		00
Se	ction 4 – Penalty Computation									
15	Amount of underpayment (from Line 9 above)		00			00		00		00
16	Date of Payment – See instructions.									
17	Number of days from due date of installment									
18	Penalty – See instructions.		00			00		00		00
19	Add amounts on Line 18. Enter total here and on Fo the total here and on Form IT-540, Line 48 if you hav			if you ł	nave an	ove	rpayment . Ent	er		00