

541-ES Form 1 at bottom of page

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TAXABLE YEAR

CALIFORNIA FORM

**2018 Estimated Tax for Fiduciaries** File and Pay by April 17, 2018 **541-ES**

Fiscal year filers, enter year ending: month \_\_\_\_\_ year \_\_\_\_\_

Name of estate or trust \_\_\_\_\_ FEIN \_\_\_\_\_

Name and title of fiduciary \_\_\_\_\_

Address (number and street, suite, PO box, or PMB no.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP code \_\_\_\_\_

**Payment  
Form  
1**

If no amount is due, do not mail this form.

Amount of payment

Using black or blue ink, make a check or money order payable to the "Franchise Tax Board." Write the FEIN and "2018 Form 541-ES" on it. Do not combine this payment with payment of your tax due for 2017. Mail this form and your check or money order to: FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0008

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# 2018 Estimated Tax for Fiduciaries

File and Pay by June 15, 2018

## 541-ES

Fiscal year filers, enter year ending: month \_\_\_\_\_ year \_\_\_\_\_

Name of estate or trust	FEIN
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Name and title of fiduciary

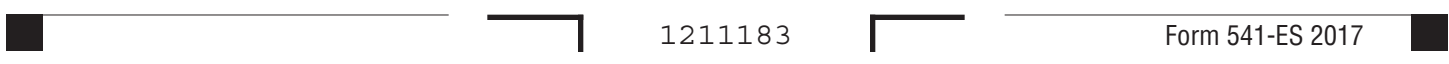
Address (number and street, suite, PO box, or PMB no.)

City	State	ZIP code	<b>Payment Form 2</b>
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**If no amount is due, do not mail this form.** Amount of payment

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# 2018 Estimated Tax for Fiduciaries

File and Pay by Sept. 17, 2018

## 541-ES

Fiscal year filers, enter year ending: month \_\_\_\_\_ year \_\_\_\_\_

Name of estate or trust	FEIN
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Name and title of fiduciary

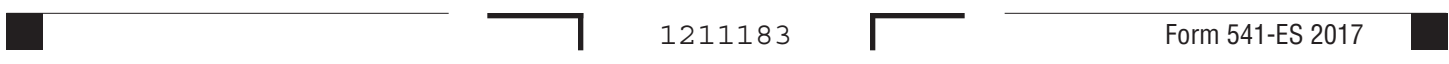
Address (number and street, suite, PO box, or PMB no.)

City	State	ZIP code	<b>Payment Form 3</b>
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**If no amount is due, do not mail this form.** Amount of payment

Using black or blue ink, make a check or money order payable to the "Franchise Tax Board." Write the FEIN and "2018 Form 541-ES" on it. **Do not combine this payment with payment of your tax due for 2017.** Mail this form and your check or money order to: **FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0008**

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# 2018 Estimated Tax for Fiduciaries

File and Pay by Jan. 15, 2019

## 541-ES

Fiscal year filers, enter year ending: month \_\_\_\_\_ year \_\_\_\_\_

Name of estate or trust	FEIN
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Name and title of fiduciary

Address (number and street, suite, PO box, or PMB no.)

City	State	ZIP code	<b>Payment Form 4</b>
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**If no amount is due, do not mail this form.** Amount of payment

Using black or blue ink, make a check or money order payable to the "Franchise Tax Board." Write the FEIN and "2018 Form 541-ES" on it. **Do not combine this payment with payment of your tax due for 2017.** Mail this form and your check or money order to: **FRANCHISE TAX BOARD, PO BOX 942867, SACRAMENTO CA 94267-0008**

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