

**FORM 1120ES-VI****VIRGIN ISLANDS  
BUREAU OF INTERNAL REVENUE****CORPORATE ESTIMATED TAX  
PLUS 10% V. I. SURTAX**

(PLEASE PRINT)

TAX PERIOD: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

EIN/TIN: \_\_\_\_\_

NAME OF CORPORATION: \_\_\_\_\_

D/B/A: \_\_\_\_\_

ADDRESS (INCLUDE ISLAND & ZIP CODE): \_\_\_\_\_  
\_\_\_\_\_

DUE DATE (FILL IN DATE) Payments Due: 15 <sup>th</sup> day of the 4 <sup>th</sup> , 6 <sup>th</sup> , 9 <sup>th</sup> , 12 <sup>th</sup> months of the tax period	QUARTER	AMOUNT OF PAYMENT
_____	1 <sup>ST</sup> QUARTER	\$ _____
_____	2 <sup>ND</sup> QUARTER	\$ _____
_____	3 <sup>RD</sup> QUARTER	\$ _____
_____	4 <sup>TH</sup> QUARTER	\$ _____

**REMIT TO: V. I. BUREAU OF INTERNAL REVENUE****ST. THOMAS OFFICE:**6115 Estate Smith Bay, Suite 225  
St. Thomas VI 00802**ST. CROIX OFFICE:**4008 Estate Diamond, Plot 7B,  
Christiansted VI 00820-4421