

#### PA-8453F (EX) 04-23

## PENNSYLVANIA FIDUCIARY INCOME TAX DECLARATION FOR ELECTRONIC FILING

2023

For Calendar	Calendar Year 2023, or Fiscal Year Beginning,, 2023 and Endir			Declaration Control				Number/Submission ID	
Name of Esta	te or Trust		Employer Id	entification Num	nber				
Name and Tit	e of Fiduciary								
Address (Nun	nber and Street including Rural Route or P.C	D. Box)							
City							State	ZIP Code	
	The she	ve information must n	notab that an the	lootronio rotur	n ovooth				
SECTION				electronic retur	п ехаспу.				
	ble income (Form PA-41, Line 9)	•				1			
	ity (Form PA-41, Line 12)								
	ents and Credits (Form PA-41, Line 18)								
	nt (Form PA-41, Line 23)								
	ent (tax due) (Form PA-41, Line 22)								
SECTION	DIRECT DEPOSIT OF	REFUND OR ELE	CTRONIC FUNI	DS WITHDRA	AWAL O	F TAX DUE (op	tional - s	see instructions)	
STAPLE COP STATE W-2(s) and 1099(s) I		7. Depositor account i	number (DAN)	8. Type of acc		Savings		. Debit date	
SECTION III DECLARATION OF FIDUCIARY (sign only after Section I is complete)									
(	consent for the refund from the 2023 PA-41 on Lines 6 through 8 is correct. I certify the uniform the estate or trust is not receiving a refund of	lltimate destination of th	ne funds is within the	e U.S or one of	designate	ed in Section II and es.	l declare	all information shown	
in I I I I I I I I I I I I I I I I I I I	authorize the PA Department of Revenue nstitution account indicated for payment of the also authorize the financial institutions involved in resolve issues related to the payment outsiness days prior to the payment (settlements of perjury, I declare that the amounts abounded also examined a copy of the return being and belief, they are true, correct and constitution accounts are true, correct and constitution accounts accounts and constitution accounts account accounts account accounts account account accounts account accounts account accounts account account accounts account accounts account accounts account account accounts account account accounts account account accounts account accounts account ac	ne estate's or trust's tax yed in the processing of To revoke a payment, I ent) date. I understand n we match the amounts s ig filed electronically wit	tes owed on this return the electronic paym.  I may revoke this a notification must be a shown on the correst the PA Department.	urn, and I author ent of taxes to re uthorization by made in writing b sponding lines of nt of Revenue ar	rize the fin eceive con notifying to by e-mail to f the electrond all acco	ancial institution to fidential information to PA Department to ra-achrevok@partment or achrevok@partment of the impanying schedul	debit the n necessa of Rever a.gov. 2023 PA- es and st	entry to this account. ary to answer inquires nue no later than two  -41, Fiduciary Income catements. To the best	
	t of Revenue by the transmitter. I also conse ion of whether or not the return is accepted,				or transmi	tter an acknowledg	ment of re	eceipt of transmission	
SIGN HERE Signature of Fiduciary or Officer							Date		
SECTION	N IV DECLARATION OF EL	ECTRONIC RETU	IRN ORIGINATO	OR (ERO) AN	ID PAID	PREPARER (s	ee instru	ctions)	
collector, I am fiduciary will h PA Departmen penalties of pe	have reviewed the above-referenced estate not responsible for reviewing the return, a ave signed this form before I submit the ret at of Revenue, and I have followed all other briury, I declare that I have examined the aby are true, correct and complete. Declaration	nd only declare that th urn. I will give the fiduc requirements describe ove-referenced estate	is form accurately r iary or officer represed in REV-993, Pen or trust return and a	eflects the data senting the fiduc nsylvania Fed/S ccompanying so	on the rectary a coperate E-file chedules a	turn. The fiduciary by of all forms and Handbook. If I am and statements, an	or an offi information also the	ficer representing the on to be filed with the paid preparer, under	
ERO'S USE ONLY	ERO's Signature		Date	Mark if a paid prep		Mark if self-employed EIN/SSN or		SSN or PTIN	
	Firm's Name (or yours if self-employed)								
	Address		City		State	ZIP Code	Phone	e Number	
PAID	Preparer's Signature			Date		Mark if self-employed		SSN or PTIN	
PREPARER'S USE	Firm's Name (or yours if self-employed)								
ONLY	Address		City	Stat		ZIP Code	Phone	e Number	
			•				_		





### **Instructions for PA-8453F**

Individual Income Tax Declaration for Electronic Filing

PA-8453F IN (EX) 04-23

#### **FILING OF FORM PA-8453F**

If an estate or trust elects not to use the federal self-select PIN or a return is filed without a federal return, electronic return originators (EROs) and transmitters must retain completed Forms PA-8453F and supporting documents for three years after the due date of the return or the date the return was filed electronically, whichever is later. EROs and transmitters must make the documents available to the PA Department of Revenue upon request. Do not mail Form PA-8453F and attachments to the PA Department of Revenue unless requested.

**NOTE:** If an ERO or transmitter closes its business, it must mail all forms to the following address with a letter of explanation.

PA DEPARTMENT OF REVENUE BUREAU OF INDIVIDUAL TAXES ELECTRONIC FILING SECTION PO BOX 280507 HARRISBURG PA 17128-0507

Any estate or trust fiduciary filing electronically from a home computer must keep the signed Form PA-8453F and supporting documents for three years after the due date of the return or the date the return was filed electronically, whichever is later. Estates or trust fiduciaries must make the documents available to the PA Department of Revenue upon request. Do not mail Form PA-8453F and attachments to the PA Department of Revenue unless requested.

#### LINE INSTRUCTIONS

#### **SUBMISSION ID**

The Submission ID is a 20-digit number assigned by the ERO to a taxpayer's return.

# NAME OF ESTATE OR TRUST, NAME AND TITLE OF FIDUCIARY, ADDRESS AND EMPLOYER IDENTIFICATION NUMBER

Print or type the name of the estate or trust, the name and title of the fiduciary and the complete address including ZIP code. In the spaces provided, enter the employer identification number of the estate or trust.

The address on this form must match the address on the electronically filed PA-41.

#### SECTION I

#### TAX RETURN INFORMATION

#### LINE 1

Enter adjusted PA taxable income from Line 9, Form PA-41.

#### LINE 2

Enter PA tax liability from Line 12, Form PA-41.

#### LINE 3

Enter total payments and credits from Line 18, Form PA-41.

#### LINE 4

Enter the overpayment from Line 23, Form PA-41.

#### LINE 5

Enter total payment (tax due), from Line 22, Form PA-41.

Estates or trusts are responsible for submitting payment due to the PA Department of Revenue by April 15, 2024.

Payment may be sent along with Form PA-41 V. If Form PA-41 V was not received, it may be completed online, printed and mailed to the department with payment. Check or money order should be made payable to the PA Dept. of Revenue. The estate or trust's employer identification number, "2023 PA Tax" and fiduciary's daytime telephone number should be written on the payment.

PA DEPT. OF REVENUE
PAYMENT ENCLOSED
1 REVENUE PLACE
HARRISBURG PA 17129-0001

#### **SECTION II**

### DIRECT DEPOSIT OF REFUND OR ELECTRONIC FUNDS WITHDRAWAL

Estates or trusts may elect to have refunds directly deposited or payments made by electronic funds withdrawal by completing Section II.

#### LINE 6

The routing transit number (RTN) must contain nine digits. If the RTN does not begin with 01 through 12, or 21 through

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32, the direct deposit or electronic funds withdrawal request will be rejected.

#### LINE 7

The depositor account number (DAN) may contain up to 17 alphanumeric characters. Include hyphens but omit spaces and special symbols. If fewer than 17 characters, enter the number from left to right and leave the unused boxes blank.

#### LINE 8

Mark the appropriate box.

#### LINE 9

Debit date – Enter the date the estate or trust wants the payment electronically withdrawn, on or before April 15, 2024.

To be eligible for direct deposit or electronic funds withdrawal, estate or trust fiduciaries must provide proof of account ownership to the ERO. An acceptable proof of account ownership is a check, form, report or other statement generated by the financial institution that has the estate or trust's name, RTN and DAN preprinted on it.

For accounts payable through a financial institution other than the one at which the account is located, the estate or trust must provide a document, such as an account statement or identification card, showing the RTN of the bank or institution where the account is located. A deposit slip should not be used to verify RTN or DAN because it can contain internal routing numbers that are not part of the RTN.

If there is any doubt about the correct RTN, the estate or trust fiduciary should contact the financial institution for assistance.

**NOTE:** Some financial institutions may not accept direct deposits into accounts payable through another bank or financial institution, including credit unions.

#### **SECTION III**

#### **DECLARATION OF FIDUCIARY**

#### **LINE 10**

All filers must mark one of the boxes.

NOTE: Estates or trusts may revoke the electronic funds withdrawal authorization by notifying the PA Department of Revenue in writing no later than two business days prior to the debit date. Written requests to revoke the electronic funds withdrawal must include the estate or trust's name, the name and title of the fiduciary, the address, the employer identification number, RTN, DAN and payment amount. Written requests can be emailed to ra-achrevok@pa.gov.

After a return has been prepared and before the return is transmitted, the estate or trust fiduciary must verify the information on the return and sign and date the completed Form PA-8453F. The ERO must provide the estate or trust fiduciary with a copy of this form.

If the ERO makes changes to the electronic return after the Form PA-8453F has been signed by the estate or trust fiduciary, but before it is transmitted, the ERO must have the estate or trust fiduciary complete and sign a corrected Form PA-8453F.

#### **SECTION IV**

### DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PREPARER

The ERO must sign this form and keep it with the required attachments for three years.

A preparer must sign the Form PA-8453F in the space for Preparer. If the preparer is also the ERO, do not complete the Preparer Section; instead, mark the box labeled "Mark if also paid preparer."

PA-8453F www.revenue.pa.gov

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