

**INSTRUCTIONS FOR REV-857
PA CORPORATION TAXES ESTIMATED TAX PAYMENT COUPON**

Do not mail this coupon if payment is being made electronically.

- 1. Enter account information** including file period begin, file period end, Revenue ID, quarter for which payment is being made, quarter due date, corporation name, state of incorporation, EIN and complete mailing address.
- 2. Enter payments** required for capital stock/foreign franchise (CS/FF) and corporate net income (CNI) taxes. Also enter total payment. If no payment is being made for a tax, enter zero. If no payment is required for either tax, do not submit this form.
- 3. Signature, title, date, email address and telephone number** must be provided by a representative of the corporation.
- 4. Make check** payable to "PA Department of Revenue" equal to the total payment on Line 3. Mail the check and coupon to:

PA DEPARTMENT OF REVENUE
PO BOX 280422
HARRISBURG PA 17128-0422

- 5. For information on electronic filing options**, visit the e-Services Center at www.revenue.state.pa.us.
- 6. Must use mmddyyyy format** in all date fields.

DETACH HERE BEFORE MAILING



REV-857 CT (06-12)

**PA CORPORATION TAXES
REV-857 ESTIMATED TAX PAYMENT**

DEPT USE ONLY

FILE PERIOD BEGIN	FILE PERIOD END	REVENUE ID	QTR	QUARTER DUE DATE
CORPORATION NAME				
STATE OF INCORPORATION		EIN		
ADDRESS				
STREET				
CITY		STATE	ZIP	

1. CS/FF TAX PAYMENT	. 00
2. CNI TAX PAYMENT	. 00
3. TOTAL PAYMENT (Add Lines 1 and 2) \$. 00

Make checks payable to "PA DEPT OF REVENUE."
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PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THIS COUPON.

SIGNATURE	TITLE	DATE	EMAIL	TELEPHONE
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