DO NOT USE THIS COUPON IF YOUR PAYMENT EXCEEDS \$1,000

INSTRUCTIONS FOR CT-V PA CORPORATION TAXES FED/STATE PAYMENT VOUCHER

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

- 1. **Enter account information** including file period begin, file period end, Revenue ID, entity name, EIN, state of incorporation and complete mailing address.
- 2. **Enter payments** required for capital stock/foreign franchise (CS/FF), loans and corporate net income (CNI) taxes. Also enter the total payment on Line 4. If no payment is being made for a tax, enter zero.

NOTE: The electronic funds transfer requirement was reduced from \$10,000 to \$1,000. All payments of \$1,000 or more made after Dec. 31, 2013, must be made electronically. For information on electronic filing options, visit the e-Services Center at www.revenue.state.pa.us.

3. If less than \$1,000 mail the payment voucher and a check made payable to the PA Department of Revenue.

PA DEPARTMENT OF REVENUE PO BOX 280427 HARRISBURG, PA 17128-0427

- 4. **Signature, title, date, email address and telephone number** must be provided by a representative of the entity.
- 5. Must use mmddyyyy format in all date fields.

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PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THIS COUPON. DETACH HERE BEFORE MAILING

pennsylvania DEPARTMENT OF REVENUE	CT-V (11-13)	PA CORPORA	TION TAXES		DEPT USE ONLY	
DEPARTMENT OF REVENUE BUREAU OF CORPORAT	ION TAXES	FED/STA	TE PAYMENT VOL	JCHER F		
FILE PERIOD BEGIN	FILE PER	IOD END	REVENUE ID			
				1. CS/FF TAX PAYMENT	• 0	0
ENTITY NAME			EIN			
				2. LOANS TAX PAYMENT	• 0	
STATE OF INCORPORATION					• U	
	400	2566		3. CNI TAX PAYMENT	.0	
STREET	ADDI	KESS			• 0	
				4. TOTAL PAYMENT		
				4. TOTAL PAYMENT (Add Lines 1, 2 and 3.)	• 0	0
CITY		STATE	ZIP			_
				Make check payable to "PA DEPT	OF REVENUE."	
				Do not mail this coupon if the	above payment is	
				being made electronically.		

SIGNATURE	TITLE	DATE	EMAIL	TELEPHONE