IRS DCN OR SUBMISSION ID							GA-8453P			
									2016	
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									PREPARER	
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Beginning		20, an			20_ ¬			6.4.1.1		
Original		Amended Return	n Final Re	eturn	Nam	ne Change	Cr	nange of Address	Composite Return	
FEI Number Name								Num Resident	nber of Partners Non-Resident	
GA Withholding Tax Acct. Number Payroll WH Number Nonresident WH Number				Business Address			Country		Telephone Number	
GA Sales Tax Reg. Number			City or Town	City or Town			State		Zip Code	
NAICS Code			Kind of Busine	Kind of Business				Location of Books for Audit (City & State)		
PART I							T	AX RETURN	INFORMATION	
1 Total Inc	ome for Geor	raia nurnoses (S	Schedule 1 Line	1)				1		
i. iotai iiio	offic for Octor	gia parposes (e	oricadic 1, Line	1)						
2. Total Ge	orgia net inco	ome (Schedule	I, Line 7)					2		
PART II							Dl	ECLARATIO	N OF PARTNER	
Under the pe	nalty of perjury	, I declare that I a	m a general partne	er or limited	liabilit	v company	member of	the above parti	nership and the information	
I have provid	led to my Elect	ronic Return Orig	ginator (ERO) and	or Online S	Service	Provider and	d/or Transn	nitter, the amoun	ts shown in Part I agree with	
									eclare that I have examined strue, correct and complete.	
			turn may be sent to							
Sign .										
D	Signature of Pa		 Date				E-mail Address			
		ON OF FLEX					ORIGINATOR AND PAID PREPARER			
PART III		DECLARAT	ON OF ELEC	CTRONIC	CRE	TURNS O	ORIGINA	ATOR AND P	AID PREPARER	
				YER'S RET	TURN A	ND THAT T	THE ENTR	RIES ON THE GA	A-8453P ARE COMPLETE	
AND CORRE		BEST OF MY KN						_		
ERO's	ERO's Signa	ture						Date		
Use	Firm's Name							Check also if paid preparer		
ONLY	Address							FEIN/PTIN		
	City, State & 2	Zip Code						SSN/TIN		
			N THE TAXPAYE	ER, THIS DE	CLAR	ATION IS B	ASED ON A	ALL THE INFO	RMATION OF WHICH	
THE TAXPA	YER HAS KNO									
PAID	Paid Prepare	er's Signature								
PREPARER'S	Firm's Name							FEIN/PTIN		
USE ONLY	Address							SSN/TIN		
	City, State & Z	Zip Code								

General Instructions

PURPOSE OF FORM

The GA-8453P is a signature form summarizing the agreement between the taxpayer and ERO or paid preparer. It may also be used by the Georgia Department of Revenue (GADOR) to authenticate the electronic portion of Form GA 700. A partner must review and sign this form. **This form should not be mailed**, but should be kept for a period of 3 years from the end of the year or which the return is filed. This is in accordance with Georgia Regulation 560-3-2-.27.

LINE INSTRUCTIONS

Enter either the DCN or Submission ID.

IRS DCN – This is the IRS's Declaration Control Number. This is a 14 digit number assigned to each return by the electronic returns originator (ERO). This number will be the same as on the Federal return.

SUBMISSION ID – This is a distinct number assigned to every electronic return that is transmitted to Georgia. This 20 character ID can be used in tracking the return.

PARTNERSHIP INFORMATION – This information must reflect and be the same as the information transmitted on the return.

PART I – TAX INFORMATION

Enter the required data from the Georgia tax return. All lines must reflect the amounts transmitted on the return.

PART II – DECLARATION OF PARTNER

After the return has been prepared and before the return is transmitted, a general partner must verify the information on the return, sign and date the completed GA-8453P. The ERO must provide the taxpayer(s) with a copy of this form.

If an ERO makes changes to the electronic return after the GA-8453P has been signed by the taxpayer, but before transmittal, the ERO must have the taxpayer complete and sign a corrected GA-8453P.

PART III – DECLARTION OF ELECTRONIC RETURNS ORIGINATOR AND PAID PREPARER

The Georgia DOR requires that the ERO sign this form and keep it with the required attachments for three (3) years. A preparer must sign the GA-8453P in the space provided for the preparer. If the preparer is also the ERO, do not complete the Preparer Section; instead, check the box labeled "Check also if paid preparer" in the ERO section.

TAXPAYER(S)' COPY: The ERO must provide a copy of the completed GA-8453P and all other relevant and required information to the taxpayer(s).

TELEPHONE ASSISTANCE:

 Questions
 1-877-423-6711

 Compliance Issues
 404-417-6391

 Secretary of State
 404-656-2817

E-MAIL ASSISTANCE:

Partnership Tax Questions <u>taxpayer.services@dor.ga.gov</u>

Electronic Filing Questions efile@dor.ga.gov

Georgia Tax Center (GTC) https://gtc.dor.ga.gov

For Rules and Regulations, Frequently Asked Questions and forms, please visit our website at http://dor.georgia.gov

REPORTING FRAUD

1-877-423-6711 or http://dor.georgia.gov/webform/fraud-referral-form

A fraud hotline has been established for practitioners and taxpayers to report tax-related activities that they believe are illegal or incorrect. The hotline can be used to report suspected illegal activity for all tax types. Persons submitting reports may remain anonymous.

KEEP THIS FORM FOR YOUR RECORDS