Form **PA-8453F**

(EX) 07-19

PENNSYLVANIA FIDUCIARY INCOME TAX DECLARATION FOR ELECTRONIC FILING

2019

	For Calendar Year 2019, or Fiscal Year Beginning,, 201			and Ending,, 20	
	Name of Estate or Trust		Employer Identification Number		
Print or Type	Name and Title of Fiduciary				
	Address (Number and Street including Rural Ro	oute or P.O. Box)			
	City, Town or Post Office		State		ZIP Code
	The above information must match that o		-		
Sectior	Tax Return Information (Enter v	whole dollars only.)		
	1. Net PA taxable income (Form PA-41, Line 9)				
2. PA tax liability (Form PA-41, Line 12)					
	3. Total Payments and Credits (Form PA-41, Line 18)				
	3. Total Payments and Credits (Form PA-41, Line 18) 3. 4. Overpayment (Form PA-41, Line 23) 4.				
	5. Total payment (tax due) (Form PA-41, Line 22) 5				
	Direct Deposit of Refund or Ele	ectronic Funds \	Withdrawal of Tax	Due (Optional – Se	e instructions.)
STAPLE COPY OF STATE W-2(s), W-2G and 1099(s) HERE	6. Routing transit number (RTN)			two numbers of the RTN ough 12 or 21 through 32	
	7. Depositor account number (DAN)				
	8. Type of account:	Checking	Savings		
STA STA	9. Debit date				
Sectior	III Declaration of Fiduciary (Sign of	only after Section	l is complete.)		
10. a. I consent for the refund from the 2019 PA-41, Fiduciary Income Tax Return, to be directly deposited as designated in Section II and declare all					
	information shown on Lines 6 through 8 is correct. I certify the ultimate destination of the funds is within the U.S or one of its territories. b. The estate or trust is not receiving a refund or I do not want direct deposit of the refund. c. I authorize the PA Department of Revenue and its designated financial agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the				
financial institution account indicated for payment of the estate's or trust's taxes owed on this return, and I authorize the financial institution to debit the entry to this account. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquires and resolve issues related to the payment. To revoke a payment, I may revoke this authorization by notifying the PA Department of Revenue no later than two business days prior to the payment (settlement) date. I understand notification must be made in writing by e-mail to ra-achrevok@pa.gov or by fax to 717-772-9310.					
Under penal	ies of perjury, I declare that the amounts above match	0. 0 .		electronic portion of the 20	19 PA-41. Fiduciary Income
Tax Return. best of my k sent to the P	have also examined a copy of the return being filed nowledge and belief, they are true, correct and comp A Department of Revenue by the transmitter. I also cor on and an indication of whether or not the return is ac	electronically with the F lete. If I am not the trainsent to the PA Departn	A Department of Revenue an nsmitter, I consent that the re nent of Revenue sending the I	nd all accompanying sched eturn and accompanying sc ERO and/or transmitter an a	ules and statements. To the hedules and statements be
Sign Here	Signature of Fiduciary or Officer				Date
	IV Declaration of Electronic Retur	n Origingtor (E	RO) and Paid Prep	arer (See instructio	ns.)
I declare tha a collector, I fiduciary will PA Departme penalties of p	I have reviewed the above-referenced estate or trust am not responsible for reviewing the return, and only have signed this form before I submit the return. I will ent of Revenue, and I have followed all other requirem berjury, I declare that I have examined the above-refer ley are true, correct and complete. Declaration of pre	return and that the ent declare that this form a give the fiduciary or off nents described in REV enced estate or trust re	ries on PA-8435F are complet iccurately reflects the data on icer representing the fiduciary -993, Pennsylvania Fed/State turn and accompanying sched	te and correct to the best on the return. The fiduciary of a copy of all forms and inf E-file Handbook. If I am a dules and statements, and	my knowledge. If I am only r an officer representing the ormation to be filed with the lso the paid preparer, under
ERO's Use Only	ERO's signature	Date	Check if also paid preparer Check self-e	k if employed DEIN/SSN of	or PTIN
	Firm's name (or yours, if self-employed) and address Daytime Telephone Number ()				
Paid Preparer's Use Only	Preparer's signature	Date	Check if also Checl		,
	Firm's name (or yours, if self-employed) and address			rtime Telephone Number ()



Pennsylvania Department of Revenue 2019 Instructions for PA-8453F

Fiduciary Income Tax Declaration for Electronic Filing

PA-8453F IN (EX) 07-19

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 EMPLOYEE IDENTIFICATION NUBMER

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, 2020.

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, "2019 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

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

Check the appropriate box.

LINE 9

Debit Date - Enter the date the estate or trust wants the payment electronically withdrawn, on or before April 15, 2020.

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 TAXPAYER

LINE 10

All filers must check 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 faxed to 717-772-9310 or 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 ORGINATOR (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, check the box labeled "Check if also paid preparer."