

PA-8453

(EX) 09-19 (FI)

PENNSYLVANIA INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

2019

For the year Jan. 1 - Dec. 31, 2019

Print or Type

Primary Taxpayer's Social Security Number, Secondary Taxpayer's Social Security Number, Last Name, Home Address, City, Town or Post Office, State, ZIP Code

The above information must match that on the electronic return exactly.

Mark Proper Filing Status: S Single, M Married, Filing Separately, J Married, Filing Jointly, D Deceased, F Final Return, Daytime Telephone Number

SECTION I TAX RETURN INFORMATION (whole dollars only)

1. Adjusted PA taxable income (Form PA-40, Line 11)
2. PA tax liability (Form PA-40, Line 12)
3. Total PA tax withheld (Form PA-40, Line 13)
4. Amount to be refunded (Form PA-40, Line 30)
5. Total payment (tax due) (Form PA-40, Line 28)

SECTION II DIRECT DEPOSIT OF REFUND OR ELECTRONIC FUNDS WITHDRAWAL OF TAX DUE (optional - see instructions)

STAPLE COPY OF STATE W-2(s), W-2G and 1099(s) HERE

6. Routing transit number (RTN)
7. Depositor account number (DAN)
8. Type of account: Checking, Savings
9. Debit date

The first two numbers of the RTN must be 01 through 12 or 21 through 32.

SECTION III DECLARATION OF TAXPAYERS (sign only after Section I is complete)

- 10. a. I consent for my refund to be directly deposited as designated in Section II...
b. I am not receiving a refund or I do not want direct deposit of my refund.
c. I authorize the Pennsylvania Department of Revenue and its designated financial agents to initiate an electronic funds withdrawal entry to my designated account for Pennsylvania taxes owed.

If I have filed a balance-due return, I understand that if the PA Department of Revenue does not receive full and timely payment of my tax liability, I will remain liable for the tax and all applicable interest and penalties.

I declare under penalties of perjury that I have compared the information on my return with the information I provided to my electronic return originator and the amounts match those on my 2019 PA Tax Return (PA-40).

Sign Here: Primary Taxpayer, Date, Secondary Taxpayer, Date

SECTION IV DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER (see instructions)


I declare that I have received the above-named taxpayer's return and that the entries on this form are complete and correct to the best of my knowledge. I obtained the taxpayer's signature on this form before submitting this return to the PA Department of Revenue.

ERO's Use Only: ERO's signature, Date, Mark if also paid preparer, Mark if self-employed, EIN/SSN or PTIN, Firm's name, Daytime Telephone Number
Paid Preparer's Use Only: Preparer's signature, Date, Mark if also paid preparer, Mark if self-employed, EIN/SSN or PTIN, Firm's name, Daytime Telephone Number

PENNSYLVANIA

FILING OF FORM PA-8453

If a taxpayer elects not to use the federal self-select PIN or a return is filed without a federal return, electronic return originators (EROs) and trans-mitters must retain completed Forms PA-8453 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-8453 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 taxpayer filing electronically from a home computer must keep the signed Form PA-8453 and supporting documents for three years after the due date of the return or the date the return was filed electronically, which-ever is later. Taxpayers must make the documents available to the PA Department of Revenue upon request. Do not mail Form PA-8453 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, ADDRESS AND SOCIAL SECURITY NUMBER

Print or type the taxpayer's name (last name first) and complete address including ZIP code. In the spaces provided, enter the taxpayer's Social Security number and that of the spouse, if applicable. If a husband and wife use different last names, please separate the names. For example, Paul A. Smith and Joan A. Weston would be Smith, Paul A. and Joan A. Weston.

The address on this form must match the address on the electronically filed PA-40.

SECTION I

TAX RETURN INFORMATION

LINE 1

Enter adjusted PA taxable income from Line 11, Form PA-40.

LINE 2

Enter PA tax liability from Line 12, Form PA-40.

LINE 3

Enter total PA tax withheld from Line 13, Form PA-40.

LINE 4

Enter the amount to be refunded from Line 30, Form PA-40.

LINE 5

Enter total payment (tax due), from Line 28, Form PA-40.

Taxpayers are responsible for submitting payment due to the PA Department of Revenue by April 15, 2020.

Payment may be sent along with Form PA-40 V. If Form PA-40 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 last four digits of the taxpayer's Social Security number, "2019 PA-40 V" and 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

Taxpayers 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

Mark the appropriate box.

LINE 9

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

 **NOTE:** The account cannot include the name of any other person unless the taxpayer's filing status on the return is "married filing jointly" or "married filing separately," and the taxpayer's spouse is the other name listed on the account.

Some financial institutions do not permit the deposit of a joint refund in an individual account. The PA Department of Revenue is not responsible when a financial institution refuses a direct deposit.

To be eligible for direct deposit or electronic funds withdrawal, taxpayers 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 taxpayer'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 taxpayer 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 taxpayer 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 mark one of the boxes.



NOTE: Taxpayers 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 taxpayer's name, address, Social Security 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 taxpayer (or both taxpayers, if filing jointly) must verify the information on the return and sign and date the completed Form PA-8453. If you are responsible for the affairs of a minor, disabled person, or a decedent who could not prepare his or her own PA tax return, you must sign to file a valid tax return. The ERO must provide the taxpayer with a copy of this form.

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

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-8453 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."