

ELECTRONIC FUNDS TRANSFER IS RECOMMENDED FOR PAYMENTS OF \$1,000 OR MORE

REV-853 (SU) 09-22 (FI)

PA CORPORATE NET INCOME TAX ANNUAL EXTENSION REQUEST COUPON

- **1. Do not use this coupon** if electronically submitting an extension request with payment.
- Enter account information including file period begin, file period end, Revenue ID, corporation name, state of incorporation, EIN and complete mailing address.
- 3. Taxpayers granted an extension to file the federal return will automatically be granted an extension to file RCT-101, PA Corporate Net Income Tax Report. Corporate taxpayers granted a federal extension must indicate this on Page 1 of RCT-101 and include a copy of the federal extension request with the report. There is no need to file REV-853. However, if you do not request a federal extension you may file REV-853 to request a Pennsylvania extension of up to 60 days. Payment must still be made by the original due date of the report.
- **4. Enter payment** required for PA corporate net income (CNI) tax. If no tax payment is being made, enter zero.
- **5. Electronic payments** can be made through myPATH at **mypath.pa.gov** or by calling the Business Tax Telefile System at 800-748-8299.

6. Payments of \$1,000 or more must be made electronically or by certified or cashier's check remitted in person or by express mail courier. If paying by certified or cashier's check, make it payable to PA Department of Revenue and deliver check and coupon to:

> PA DEPARTMENT OF REVENUE 1854 BROOKWOOD ST HARRISBURG PA 17104

7. Payments less than \$1,000 may be made electronically or by mailing the coupon and check payable to PA Department of Revenue to:

> PA DEPARTMENT OF REVENUE PO BOX 280425 HARRISBURG PA 17128-0425

- 8. Signature, title, date, email address and telephone number must be provided by a representative of the corporation.
- 9. Must use mmddyyyy format in all date fields.

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

pennsylvania DEPARTMENT OF REVENUE REV-853 (SU) 11-2	V-853 ANNUAL EXTENSION REQUEST
File Period Begin File Period End Revenue Corporation Name	
	USE WHOLE DOLLARS ONLY
State of Incorporation EIN Street Address	1. CNI TAX PAYMENT 歬
City Stat	e ZIP
Signature	Title Date
Email	Telephone