

TAXABLE YEAR

2025

California e-file Return Authorization for Individuals

FORM

8453

Form fields for personal information: Your first name and initial, Last name, Suffix, Your SSN or ITIN, etc.

Part I Tax Return Information (whole dollars only)

Part I fields: 1 California adjusted gross income, 2 Refund or no amount due, 3 Amount you owe.

Part II Settle Your Account Electronically for Taxable Year 2025 (Pay by 4/15/2026)

Part II fields: 4 Direct deposit of refund, 5 Electronic funds withdrawal, 5a Amount, 5b Withdrawal date.

Part III Make Estimated Tax Payments for Taxable Year 2026 (These are NOT installment payments for the current amount you owe.)

Table with 5 columns: Amount, First Payment 4/15/2026, Second Payment 6/15/2026, Third Payment 9/15/2026, Fourth Payment 1/15/2027.

Part IV Banking Information (Have you verified your banking information?)

Part IV fields: 8 Amount of refund to be directly deposited, 9 Routing number, 10 Account number, 11 Type of account, etc.

Part V Declaration of Taxpayer(s)

I authorize my account to be settled as designated in Part II. If I check Part II, box 4, I declare that the direct deposit refund information in Part IV agrees with the authorization stated on my return.

Under penalties of perjury, I declare that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider, including my name, address, and social security number (SSN) or individual taxpayer identification number (ITIN), and the amounts shown in Part I above agrees with the information and amounts shown on the corresponding lines of my 2025 California income tax return.

Signature lines: Sign Here, Your signature, Date, Spouse's/RDP's signature, Date.

Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above taxpayer's return and that the entries on form FTB 8453 are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the taxpayer's return.)

ERO Must Sign fields: ERO's signature, Date, Check if also paid preparer, Check if self-employed, ERO's PTIN, Firm's name, Firm's FEIN, ZIP code.

Under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign fields: Paid preparer's signature, Date, Check if self-employed, Paid preparer's PTIN, Firm's name, Firm's FEIN, ZIP code.