Decla	ration Control Number (DC	N)												
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Form P	A-8453	PENNSYLVA DECLARAT	NIA INDI\ ION FOR I								2009	>		
	For the year Jan. 1 – Dec. 31, 2009													
	Your Social Security Numb	Your Social Security Number				Spouse's Social Security Number								
Print or	Last Name First Name, Initial; Spouse's First Name, Initial; Spouse's Last Name (only if different)											_		
Туре	Home Address (Number an	nd Street including Rural I	Route or P.O. Box)											
	City, Town or Post Office State ZIP Code										_			
Check Proper Filing Status	The above informatio	J	<i>n the electronic</i> Married, Filing		D [Dec Fina	eased Il Retui	m		Daytime Te ()	elephone Numbe	_		
Part I	Tax Return In	formation (Enter	whole dollars o	nly.)								_ P		
	 Adjusted PA taxab PA tax liability (Fo Total PA tax withh 	orm PA-40, Line 12)							2	2.		Ξ		
	 Amount to be refu Total payment (tax 	nded (Form PA-40, I	_ine 29)						4	ł		N		
Part I	Direct Deposi	t of Refund or I	Electronic Fu	nds Wi	hdra	val a	of Tax	x Du	e (0	ptional – Se	ee instructions	<u>.</u> N		
STAPLE COPY OF STATE W-2(s), W-2G and 1099(s) HERE	6. Routing transit nu	mber (RTN)								e RTN must ough 32.		S		
	7. Depositor account													
	8. Type of account:											Y		
	9. Debit date	6 -			- 4 -)							- L		
Part I	 Declaration of Taxpayer (Sign only after Part I is complete.) 10. a. I consent for my refund to be directly deposited as designated in Part 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. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund. 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. I also authorize my financial institution to debit the entry to my account and the financial institutions involved in 											ed A		
applicable inf I declare und PA Tax Return Revenue Ser	my payment. I notifying the Pe	led a joint federal and state ed the information on my re my knowledge, my return is irn originator, and subseque	hdraw are originating Revenue no later thar k@state.pa.us or fax ent of Revenue does that return and there turn with the informati true and complete. I c	from an acco n two busines to 717-772-9 not receive f is an error of ion I provider onsent my re	ount withir as days pr 310. ull and tim my state d to my el- turn and a	n the U.S rior to the nely pays e return, ectronic accompa	5. or one e payme ment of l unders return c anying so	e of its to ent (sett my tax l stand my priginato chedules	erritorie tlement liability, ly feder or and t s and s	es. I may revoke t) date. I unders , I will remain lia ral return will be he amounts may tatements may	e this authorization tand notification mutual able for the tax and rejected. tch those on my 20 be sent to the Interr	by N all 09 hal A		
Sign 🔒				.								_		
Here ,	Your signature		Date	· ·	-		-			TH must sign		_		
this form before of Revenue a Returns (Tax	Ave received the above-named ore submitting this return to the and followed all other requirement (Year 2009). If I am the prepare hy knowledge, they are true and	PA Department of Revenue ents specified by the PA Dep er, under penalty of perjury	ntries on this form are a. I provided the taxpa partment of Revenue a I declare I examined	complete ar yer with a co and describe the above-na	d correct py of all fo d in the IF amed taxp	to the b orms and RS Public oayer's r	est of m d inform cation 1 eturn ar	y knowle ation to 345, Hai nd accor	ledge. I be fileo Indbool mpanyi	l obtained the ta d with the IRS a k for Electronic I	axpayer's signature nd the PA Departme Filers of Individual T	ent ax		
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	Firm's name (or yours, if self-employed) and			Dautin	Tolort	no No	nhar ()			_		
Paid Preparer' Use Only	address Preparer's signature	7	Date	Daytime Check in paid pre	also _r	_ Che	nber (eck if -emplo	yed 🗌		I/SSN or PTIN	١	_		
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Daytime Telephone Number (

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INSTRUCTIONS FOR PA-8453

Filing of Form PA-8453

If a taxpayer elects not to use the federal selfselect PIN or a return is filed without a federal return, the PA Department of Revenue requires electronic return originators (EROs) and transmitters to 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, whichever 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 – Form PA-8453

Declaration Control Number (DCN) - The DCN is a 14-digit number assigned by the ERO to a taxpayer's return. For the PA Tax Return, it will be the same number as on the federal 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.

Part 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 29, Form PA-40.

Line 5 - Enter total payment (tax due), from Line 27, Form PA-40.

Taxpayers are responsible for submitting payment due to the PA Department of Revenue by April 15, 2010.

Payment may be sent along with Form PA-V. If Form PA-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, "2009 PA Tax" and daytime telephone number should be written on the payment.

> PA Dept. of Revenue Payment Enclosed 1 Revenue Place Harrisburg, PA 17129-0001

Part 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 Part 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 taxpayer wants the payment electronically withdrawn, on or before April 15, 2010.

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.

Part III - Declaration of Taxpayer

Line 10 - All filers must check 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 e-mailed to **ra-achrevok@state.pa.us**.

After a return has been prepared and before the return is transmitted, the taxpayer (and spouse, if filing jointly) must verify the information on the return and sign and date the completed Form PA-8453. 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.

Part IV - Declaration of Electronic Return Originator (ERO) and Preparer

The PA Department of Revenue requires the ERO to 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, check the box labeled "Check if also paid preparer."