

Declaration Control Number (DCN)

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PA DEPARTMENT OF REVENUE USE ONLY - DO NOT WRITE OR STAPLE IN THIS SPACE

Form PA-8453 Internet

PENNSYLVANIA INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

1999

For the year January 1 - December 31, 1999

Print or Type

Your Social Security Number, Spouse's Social Security Number, Last Name, First Name, Initial & Spouse's First Name & Initial - Spouse's last name (only if different), Home Address (Number and Street including Rural Route or P.O. Box), City, Town or Post Office, State, Zip Code

The above information must be an exact duplicate of that on the electronic return.

Check Proper Filing Status

S [] Single, M [] Married, Filing Separate, J [] Married, Filing Joint, F [] Deceased or Final, Daytime Telephone Number ()

Part I Tax Return Information (Whole dollars only)

- 1. Net PA Taxable Income (Form PA-40, line 11)
2. Total PA Tax Liability (Form PA-40, line 12)
3. Total PA Taxes Withheld (Form PA-40, line 14)
4. Amount to be Refunded (Form PA-40, line 31)
5. Amount You Owe, Tax Due (Form PA-40, line 29)

Part II Direct Deposit of Refund or ACH Debit Payment of Tax Due (Optional - See instructions.)

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

Part III Declaration of Taxpayer (Sign only after Part I is Complete)

- 10. a. I consent that my refund be directly deposited as designated in Part II...
b. I do not want direct deposit of my refund or am not receiving a refund.
c. I authorize (1) the Pennsylvania Department of Revenue and its designated Financial Agents to initiate an ACH debit...

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 liability and all applicable interest and penalties.

I declare that under penalties of perjury, I have compared the information on my return with the information I have provided to my electronic return originator and the amounts agree with the amounts on my 1999 PA Tax Return (Form PA-40).

Sign Here Your signature Date Spouse's signature. If a joint return, BOTH must sign. Date

Part IV Declaration of Electronic Return Originator (ERO) and Paid Preparer (See Instructions.)

I declare that I have received the above taxpayer's return and that the entries on this form are complete and correct to the best of my knowledge. I have 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, Check if also paid preparer, Check if self-employed, EIN, Firm's name (or yours if self-employed) and address, Daytime Telephone Number
Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed, EIN, Firm's name (or yours if self-employed) and address, Daytime Telephone Number

ELECTRONIC RETURN ORIGINATORS (EROs) AND TAXPAYERS FILING FROM HOME PCs

KEEP THIS FORM (and the required attachments) FOR THREE YEARS. Please DO NOT mail this form.

PENNSYLVANIA