Form **PA-8453**

PENNSYLVANIA INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

2013

For the year Jan. 1 - Dec. 31, 2013

	Pı	Primary Taxpayer's Social Security Number						Secondary Taxpayer's Social Security Number							
Print	t Last Name Primary Taxpayer's Name, Initial; Secondary Taxpayer's First Name, Initial; Secondary Taxpayer's Last Name									payer's Last Name (only if different)					
or Type	Н	Home Address (Number and Street including Rural Route or P.O. Box)													
	Ci	ity, Town	or Post Office							Sta	te			ZIP Code	
Check	T	ne abov	re information must match	that on the e	lectr	onic r	eturn	exact	tly.						
Proper Filing Status	s)	S \(\simeg \) S \(\mathbf{M} \(\simeg \) M	ingle larried, Filing Separately	J □ Marr	ied, F	iling J	ointly			Decea Final		ı		Daytime Telephone Number ()	
Part I			Return Information (Er												
	2 3 4	. PA ta . Total . Amou	x liability (Form PA-40, Lin- PA tax withheld (Form PA-	e 12) 40, Line 13) A-40, Line 30)		 	 			 		2. 3. 4.		
Part II		Dire	ct Deposit of Refund o	r Electronic	Fun	ds W	ithd	rawa	l of 1	ax D	ue (Option	nal – S	See instructions.)	
STAPLE COPY OF STATE W-2(s), W-2G and 1099(s) HERE	6	. Routi	ng transit number (RTN)									ımbers 2 or 21		RTN must gh 32.	
	7	. Depo	sitor account number (DAN	1)											
	8	. Туре	of account:		Chec	king		☐ Sa	vings		•				
ST/ ST/	9	. Debit	date												
Part I	I	Decl	aration of Taxpayers	Sign only aft	er Pa	art I is	com	olete.))						
10.												withdrawal entry to my designated the financial institutions involved in ries and resolve issues related to . I may revoke this authorization by date. I understand notification must will remain liable for the tax and all			
I declare ur PA Tax Retu Service (IR	ider pe irn (PA S) by	enalties of -40). To the my electr	f perjury compared the information one best of my knowledge, my return is	on my return with true and complete	the inf	ormatio	n I prov return	ided to and acc	my elec	tronic re	eturn or edules a	iginator ind state	and the ments r	e amounts match those on my 2013 may be sent to the Internal Revenue outer, I understand I am required to	
Sign	À .					_ •	_								
Here	_		Taxpayer	Date	7				Secondary Taxpayer Date						
this form be of Revenue Returns (Ta	ave refore s and for	eceived th ubmitting ollowed al r 2013). If	this return to the PA Department of II other requirements specified by the	nd the entries on Revenue. I provid e PA Department f perjury I declare	this for ed the of Rev I exan	m are of taxpaye enue ar nined th	omplet er with a d desc e abov	e and co a copy o ribed in e-name	orrect to of all forr the IRS d taxpay	the besms and in Publication	st of my informa ation 13 curn and	knowled tion to b 45, Hand accom	dge. I o e filed v dbook f panying	btained the taxpayer's signature on with the IRS and the PA Department for Electronic Filers of Individual Tax g schedules and statements, and to	
ERO's Use Only	E	ERO's signature						k if als prepar		Chec self-e	k if employ	ed \square	EIN/S	SSN or PTIN	
	i	Firm's name (or yours, if self-employed) and address					Davt	me Tel	lephone	e Numi	ber ()			
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Prepare Use Onl	v i	Firm's name (or yours, if self-employed) and address		l			Day	ime Te	lephon	ie Num	ber (,)		

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, 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

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.

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 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, 2014.

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, "2013 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, 2014.

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 emailed to **ra-achrevok@state.pa.us**.

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.

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."