



TAX YEAR

DATE
FILED:

M	M	D	D	Y	Y	Y	Y

EMPLOYER IDENTIFICATION NUMBER

DAYTIME TELEPHONE NUMBER

FIDUCIARY / PARTNERSHIP NAME

NAME continued

P.O. BOX, APT. NO., SUITE, FLOOR, RR NO., ETC.

STREET ADDRESS

CITY

STATE

ZIP CODE

DECLARATION OF ESTIMATED TAX OR ESTIMATED WITHHOLDING TAX FOR FIDUCIARIES, PARTNERSHIPS & OTHER PASS THROUGH ENTITIES

READ INSTRUCTIONS BEFORE ENTERING
DOLLAR AMOUNTS.

MAKE CHECKS PAYABLE TO
PA DEPARTMENT OF REVENUE

MAIL THIS FORM WITH YOUR PAYMENT TO:

PA DEPARTMENT OF REVENUE
PO BOX 280403
HARRISBURG PA 17128-0403

MUST MARK (FILL IN OVAL)

TYPE OF ACCOUNT:

☐ F – FIDUCIARY (ESTATE or TRUST)

☐ C – (PARTNERSHIP, ASSOCIATION or PA S CORPORATION)

FISCAL FILERS ONLY

M M D D Y Y Y Y

BEGINNING

ENDING

M	M	D	D	Y	Y	Y	Y

AMOUNT OF PAYMENT

\$

DECLARATION OF ESTIMATED TAX
OR ESTIMATED WITHHOLDING TAX

DEPARTMENT USE ONLY

Please be sure address below shows through window of enclosed envelope.



PA DEPARTMENT OF REVENUE
PO BOX 280403
HARRISBURG PA 17128-0403