

Date Accepted \_\_\_\_\_

TAXABLE YEAR \_\_\_\_\_ FORM \_\_\_\_\_

2019 California e-file Return Authorization for Partnerships 8453-P

Partnership name \_\_\_\_\_ California Secretary of State (SOS) file number or FEIN \_\_\_\_\_

Part I Tax Return Information (whole dollars only)

Table with 2 columns: Line number and Amount. Lines 1-4: Total income, Ordinary income, Tax due, Refund.

Part II Settle Your Account Electronically

5 [ ] Electronic funds withdrawal 5a Amount \_\_\_\_\_ 5b Withdrawal date (mm/dd/yyyy) \_\_\_\_\_

Part III Banking Information (Have you verified the partnership's banking information?)

6 Routing number \_\_\_\_\_ 7 Account number \_\_\_\_\_ 8 Type of account: [ ] Checking [ ] Savings

Part IV Declaration of Officer

I authorize the partnership's account to be settled as designated in Part II. Under penalties of perjury, I declare that I am an officer of the above partnership...

Sign Here Signature of officer \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

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

I declare that I have reviewed the above partnership's return and that the entries on form FTB 8453-P are complete and correct to the best of my knowledge.

ERO Must Sign ERO's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if also paid preparer [ ] Check if self-employed [ ] ERO's PTIN \_\_\_\_\_ Firm's name (or yours if self-employed) and address \_\_\_\_\_ FEIN \_\_\_\_\_ ZIP code \_\_\_\_\_

Under penalties of perjury, I declare that I have examined the above partnership's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

Paid Preparer Must Sign Paid preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed [ ] Paid preparer's PTIN \_\_\_\_\_ Firm's name (or yours if self-employed) and address \_\_\_\_\_ FEIN \_\_\_\_\_ ZIP code \_\_\_\_\_