

Date Accepted _____

TAXABLE YEAR

2021

California e-file Return Authorization for Limited Liability Companies

FORM

8453-LLC

Limited liability company name

California Secretary of State (SOS) file number or FEIN

Part I Tax Return Information (whole dollars only)

Table with 5 rows: 1 Total income, 2 Ordinary income, 3 Tax and fee due, 4 Overpayment, 5 Total amount due.

Part II Settle Your Account Electronically for Taxable Year 2021.

6 [] Electronic funds withdrawal 6a Amount 6b Withdrawal date (mm/dd/yyyy)

Part III Make Annual Tax or Estimated Fee Payment for Taxable Year 2022 This is NOT an installment payment for the current amount the LLC owes.

Table with 2 columns: Annual Tax Payment, Estimated Fee Payment. Rows for 7 Amount and 8 Withdrawal date.

Part IV Banking Information (Have you verified the LLC's banking information?)

9 Routing number 10 Account number 11 Type of account: [] Checking [] Savings

Part V Declaration of Authorized Member or Manager

I authorize the limited liability company account to be settled as designated in Parts II, III, and IV. If I check box 6, I authorize an electronic funds withdrawal for the amount listed on line 6a and for the 2022 annual tax or estimated fee payment amount listed on line 7 from the bank account specified in Part IV.

Under penalties of perjury, I declare that I am an authorized member or manager of the above limited liability company and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the limited liability company's 2021 California income tax return.

Sign Here Signature of authorized member or manager Date Title

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

I declare that I have reviewed the above limited liability company's return and that the entries on form FTB 8453-LLC are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the limited liability company's return.)

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 Firm's FEIN ZIP code

Under penalties of perjury, I declare that I have examined the above limited liability company's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

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 Firm's FEIN ZIP code