	STATE OF WEST VIRGINIA INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING							
WV-8453 Rev. 09/2020	Period beginning (N	Period beginning (MM/DD/YYYY)			g (MM/DD/YYYY)			
1164.00/2020	Your first name and	d middle Initial	L	ast Name	Yo	ur Soc	ial Security Number	
	If a joint return, spo	ouse's first name and middle initial	L	ast name, if	different Sp	ouse's	Social Security Number	
	Home Address (nu	mber and street)				Daytime telephone number		
	City, town or post office, state and ZIP code							
Part I	ļ.	Tax Return Informatio	n (wh	ole dolla	rs only)			
<ol> <li>West Virginia Inc</li> <li>Balance Due</li> </ol>	ome Tax				2			
Part II		Direct Deposit or Electr	onic l	Funds Wi	ithdrawal			
5. Routing transit nu	umber (RTN)		The first two numbers of the RTN must be 01 through 12 or 21 through 32					
<ol> <li>6. Depositor accourt</li> <li>7. Electronic Fu</li> <li>8. Type of account:</li> </ol>	nds Withdrawal (Checkin	g only; No Partial Payments) Savings (Direct Deposit Only)						
Part III		Declaration	of Ta	xpayer				
for any entries in error into my Ch is an irrevocable appointment of t Under penalties of perjury, I decla the corresponding lines of my We to the West Virginia State Tax Dep	ecking or Savings account as indicated a ne other spouse as an agent to receive th re that I have compared the information or st Virginia income tax return. To the best wartment, upon request by the Department	drawn by electronic debit as designated in Part II. I further au bove in Part II and the Financial Institution indicated above in he refund or authorize the electronic debit. contained on my return with the information I have provided the of my knowledge and belief, my return is true, correct, and co L if I have filed a joint federal and state return, I understand O and /or the transmitter the reason(s) for the delay, or w	o my Electro omplete. I co that, if there	redit the same any a onic Return Originat onsent that my retur is an error on eithe	amount(s) owed to me by or and that the amount de n, including this declaratio	the State of scribed in F on and acco	West Virginia. If I have filed a joint return, this Part I above agree with the amounts shown or impanying schedules and statements, be sen	
Please								
Sign Here	Your signature	Date		Spouse's	signature		Date	
Part IV	Declaration	& Signature of Electronic F	Return	originat	or (ERO) &	Paid	Preparer	
must ensure that Form WV-8453 information to filed with the West perjury I declare that I have exam which preparer has any knowledg	accurately reflects the data on the return Virginia State Tax Department, and have ined the above taxpayer's return and ac	s on Form WV-8453 are complete and correct to the best of n.) I have obtained the taxpayer's signature on Form WV-84 followed all other requirements described in the West Virgini companying schedules and statements, and to the best of m	53 before su a Handbook y knowledge	ubmitting this return for Electronic Filer and belief they are	to the State Tax Departn s of Individual Income Tax e true, correct, and comple	nent, have Returns. If	provided the taxpayer a copy of all forms and I am also the Paid Preparer, under penalty o ation of preparer is based on all information o	
ERO's Signature Firm Name				Date	Check if: Paid Prepa Self-Employ		Your PTIN/SSN	
(or yours, if s employed) a					Phone #		El No.	
address							Zip Code	
ERO's are in	nstructed to retain	the WV-8453 and all suppor	ting d	ocument	s for not les	s tha	n three (3) years.	
Under penalties of perjury, I decla which preparer has any knowledg		ccompanying schedules and statements and to the best of n	ny knowledg	e and belief, they a	re true, correct and compl	ete. Declara	ation of preparer is based on all information o	
Paid Preparer's	Preparer's Signature			Date	Check if:	oyed	Your PTIN/SSN	
Use Only	Firm Name (or yours, if				Phone #		El No.	
	self-employed) and address				•		Zip Code	

NOTE: Part IV of this form MUST be completed in full as required. ERO's are required to file and hold this document and all attachments for three (3) years from date filed.