PA-40ESR (F/C) (05-09)  TAX YEAR  M M D D Y Y Y  DATE FILED:	DECLARATION OF ESTIMATED TAX OR ESTIMATED WITHHOLDING TAX FOR FIDUCIARIES & PARTNERSHIPS	
EMPLOYER IDENTIFICATION NUMBER  DAYTIME TELEPHONE NUMBER	READ INSTRUCTIONS BEFORE ENTERING DOLLAR AMOUNTS.  MAKE CHECKS PAYABLE TO PA DEPARTMENT OF REVENUE  MAIL THIS FORM WITH YOUR PAYMENT TO:	FISCAL FILERS ONLY   M M D D Y Y Y Y   Y   SEGINNING   M M D D Y Y Y Y   Y   Y   Y   Y   Y   Y   Y
FIDUCIARY / PARTNERSHIP NAME  NAME continued	PA DEPARTMENT OF REVENUE PO BOX 280403 HARRISBURG PA 17128-0403 MUST MARK (FILL IN OVAL) TYPE OF ACCOUNT:	AMOUNT OF PAYMENT
O. BOX, APT. NO., SUITE, FLOOR, RR NO., ETC.	F – FIDUCIARY (ESTATE or TRUST)  C – (PARTNERSHIP, ASSOCIATION or PAS CORPORATION)	DECLARATION OF ESTIMATED TAX OR ESTIMATED WITHHOLDING TAX
CITY STATE	ZIP CODE	DEPARTMENT USE ONLY