

# E-FILE DECLARATION FOR BUSINESS & FIDUCIARY ELECTRONIC FILING



2025

| OR FISCAL YEAR BEGINNING 2025, ENDING |   |  |                            |                             |                  |                  |  |
|---------------------------------------|---|--|----------------------------|-----------------------------|------------------|------------------|--|
| Keep tl                               | nis for your reco                               | rds. Do not send this form to the Re   | venue Administration Divis | ion unless specifically red | quested to d     | do so. See instr | uctions.                                   |
| Name of                               | corporation, pass thro                          | ugh entity, estate or trust  |                            | Federal Employer            | Identification N | lumber           |  |
| Name and                              | d Title of Fiduciary                            |  |                            |                             |                  | _                |  |
| Street Ad                             | ldress  |  | City or town               |                             | State            | ZIP Code         | <del></del>                                |
|                                       |   |  | ŕ                          |                             |                  |                  |  |
| PART                                  | I Tax Ret                                       | urn Information (whole dolla   | rs only)                   |                             | 5                |                  |  |
| :                                     | 1. Amount                                       | of overpayment to be applied to  | o 2026 estimated tax .     |                             |                  | 1                | 00   |
| 2                                     | 2. Amount                                       | of overpayment to be refunded  |                            |                             | REFUND           | 2                | 00   |
| :                                     | 3. Total am                                     | ount due   |                            |                             |                  | 3.               | 00   |
| sched<br>return                       |   |  |                            |                             |                  |                  |  |
| I                                     | I authorize——<br>ERO firm name<br>as my signatu | re on my tax year 2025 electro   |                            | o enter or generate my      | y PIN            |                  | Enter five digits. Do not enter all zeros. |
| i                                     |   | PIN as my signature on the ta<br>rring your own PIN and your re                              |                            |                             |                  |                  |  |
| 3                                     | Signature                                       |  | Date                       |                             | _                |                  |  |
| PART                                  | III Certific                                    | ation and Authentication - I   | Practitioner PIN Met       | hod Only                    |                  |                  |  |
| ERO's                                 | EFIN/PIN  | Enter your six digit EFIN follow   | ved by your five-digit s   | elf-selected PIN            |                  |                  | Do not enter all zeros.                    |
| I conf                                | irm that I am                                   | c entry is my PIN, which is my<br>submitting this return in accor<br>rized e-File Providers. |                            |                             |                  |                  |  |
| Ī                                     | EROs signature                                  |  | Date                       |                             |                  |                  |  |



## E-FILE DECLARATION FOR BUSINESS & FIDUCIARY ELECTRONIC FILING

#### **Purpose of Form**

Form EL101B is the declaration document and signature authorization for an electronically filed return by an Electronic Return Originator (ERO). Complete Form EL101B when the Practitioner PIN method is used or when the business authorizes the ERO to enter or generate their personal identification number (PIN) on their e-filed corporate, pass-through entity, or fiduciary income tax return. The ERO must retain Form EL101B for 3 years from the return due date.

Note: The return will not be transmitted until the ERO receives the signed EL101B. Do not send this form to the State of Maryland unless specifically requested to do so.

### When and How to Complete

| <u> </u>  |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| IF the ERO is   | Then  |  |  |  |  |  |
| Not using the Practitioner PIN method and the business enters their own PIN                     | Do not complete<br>Form EL101B.             |  |  |  |  |  |
| Using the Practitioner PIN method and is authorized to enter or generate the business's PIN     | Complete Form EL101B, Parts I, II, and III. |  |  |  |  |  |
| Using the Practitioner PIN method and the taxpayer enters his or her own PIN                    | Complete Form EL101B, Parts I, II and III.  |  |  |  |  |  |
| Not using the Practitioner PIN method and is authorized to enter or generate the business's PIN | Complete Form<br>EL101B, Parts I and<br>II. |  |  |  |  |  |

### **ERO** Responsibilities

#### The ERO will:

- Enter the name(s) and Federal Identification number of the business at the top of the form.
- Complete Part I using the amounts from the 2025 Corporate, Pass-Through Entity, or Fiduciary tax return.
- Enter or generate, if the business authorizes, the PIN of the business and enter it in the boxes provided in Part II.
- Enter on the authorization line on Part II the ERO firm name (not the name of the person who prepared the return), if the ERO is authorized to enter the e-file PIN of the business.
- After completing (1) through (4), give the business Form EL101B for completion and review. The acceptable delivery methods include hand delivery, US mail, private delivery service, email and fax.
- EROs may sign Part III of the form using a rubber stamp, mechanical device (such as a signature pen), or computer software program. The signature must include either a facsimile of the signature of the Individual ERO or of the printed name of the ERO.

**Note:** The ERO must receive the completed and signed Form EL101B from the business before the electronic return is transmitted. **Do not send this form to the State of Maryland unless specifically requested to do so.** 

### **Business Responsibilities**

- 1. Verify the accuracy of the prepared income tax return.
- 2. Check the appropriate box in Part II to authorize the ERO to enter or generate your e-file PIN or generate it yourself.
- Indicate or verify your e-file PIN when authorizing the ERO to enter or generate it (the e-file PIN must have five digits other than all zeroes).
- 4. The EL101B must be signed by the corporate officer, general partner, managing member, or fiduciary of the entity filing this declaration and dated. It may be signed in Part II using handwritten signature, rubber stamp, mechanical device (such as signature pen) or computer software program.
- Return the completed Form EL101B to the ERO by hand delivery, US mail, email, private delivery service, or fax.