PA-40 - 2022 Pennsylvania Income Tax Return ENTER ONE LETTER OR NUMBER IN EACH BOX (05-22)

746258828 R Residency Status. PAVANI Residency Status. PAVANI Occupation SOFTWARE D Single. Marited/Filing Jointly. Married/Filing Separately. Final Return APT 2111 Occupation N Deceased APT 2111 Occupation N Spouse Date of Death Support 2000 CREEKVIEW CIR N Spouse Date of Death Support 237-2378 O2060 N Taxpayer Date of Death 1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions. 1a 103044 1b Unreimbursed Employce Business Expenses. 1b 1a 103044 2 Interest Income. Complete PA Schedule A if required. 3 0103044 3 Dividend Capital Gain Subitation Income. Somplete PA Schedule B if required. 2 1 5 Net Gain or Loss from the Sale. Exchange or Disposition of Property. 4 1 6 Net Income Complete ad submit PA Schedule F. 0 2 7 Total PA Taxable Income. Add only the positive income announts from Lines 1c, 2, 3, 4, 5, 6, 7 and 8. DO NOT ADD any losses reported on Lines 4, 5 or 6. 10 0 8 Gambling and Lottery W				l N	Extens	ion.	N	Amended Return.
B00SA PA Resident/Nonesiden/Part Year Resident from to PAVANI Occupation SOFTWARE D Single, Married/Filing Jointly, Married/Filing Separately, Final Return. APT 2JJJ Occupation N Deceased APT 2JJJ Taxpayer Date of Death N 2000 CREEKVIEW CIR Filmers. School District Name ALLEGHENY_VAL. Star=237-2398 02060 Filmers. 1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions. 1a 103044 1b Unreinhursed Employee Business Expenses. 1b 103044 2 Interest Income. Complete PA Schedule A if required. 1 1 3 Dividend and Capital Gains Distributions Income. Complete PA Schedule B if required. 2 1 4 Net Income or Loss from the Operation of a Business, Profession or Farm. 5 -31 5 Net Gain or Loss from Reits, Royaltics, Patents or Copyrights. 1 1 7 Etail or Complete and Submit PA Schedule I. 1 1 8 Gambling and Lottery Winnings. Complete and submit PA Schedule I. 1 1 5 Net Gain or Loss from Reits, Ro	746258828			R	Reside	ncv Status.		
PAVANI Occupation SOFT UARE D Single. Married/Filing Separately, Final Return Occupation N Deceased APT 2111 N Spouse Date of Death 20000 CREEKVIEU CIR N Spouse Date of Death CRANBERRY TOUNSHIP PA 16066 513-237-239A 02060 Farmers. School District Name ALLEGHENY_VAL. 1a 103044 1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions. 1b 1a 103044 2 Interest Income. Complete PA Schedule A if required. 1b 103044 3 Dividend and Capital Gains Distributions Income. Complete PA Schedule B if required. 14 103044 4 Net Income or Loss from the Sale, Exchange or Disposition of Property. 5 Net Gain or Loss from the Sale, Exchange or Disposition of Property. 5 6 Net Income. Complete and submit PA Schedule T. 9 1030445 1030445 7 0 Gambling and Lottery Winnings. Complete and submit PA Schedule T. 16 17 0 7 0 Gambling and Lottery Winnings. Complete and submit PA Schedule T.	ASOOR				PA Res		resident/	
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See the instructions for additional information.	 6 Net Income or Loss from Rents, Roya 7 Estate or Trust Income. Complete and 8 Gambling and Lottery Winnings. Com 9 Total PA Taxable Income. Add only 	1c,		6 7 8				
	See the instructions for additional inf	formation.		Ν				0 103045

1555 REV 03/01/23 PRO





PA-40 - 2022

Social Security Number

746258828 Name(s) PAVANI BOOSA

12 13	PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307). Total PA Tax Withheld. See the instructions.	73 75	3163 3163
15	Credit from your 2021 PA Income Tax return. 2022 Estimated Installment Payments. REV-459B included. N 2022 Extension Payment. Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only) Total Estimated Payments and Credits. Add Lines 14, 15, 16 and 17.	14 15 16 17 18	
Tax	Forgiveness Credit. Submit PA Schedule SP.		
19a	Filing Status: 01 Unmarried or Separated 02 Married 03 Deceased Dependents, Section II, Line 2, PA Schedule SP Total Eligibility Income from Section III, Line 11, PA Schedule SP. Tax Forgiveness Credit from Section IV, Line 16, PA Schedule SP.	19a 19b 20 21	00 00 0
22 23 24 25 26 27	Resident Credit. Submit your PA Schedule(s) G-L and/or RK-1 . Total Other Credits. Submit your PA Schedule OC and/or PA Schedule DC . TOTAL PAYMENTS and CREDITS. Add Lines 13, 18, 21, 22 and 23. USE TAX. Due on internet, mail order or out-of-state purchases. See instructions. TAX DUE. If the total of Line 12 and Line 25 is more than line 24, enter the difference here. Penalties and Interest. See the instructions. Enter Code: If including form REV-1630/REV-1630A, mark the box. N	22 23 24 25 26 27	0 3163 0 0
28 29	TOTAL PAYMENT DUE. See the instructions. OVERPAYMENT. If Line 24 is more than the total of Line 12, Line 25 and Line 27, enter the difference here.	28 29	0
30	The total of Lines 30 through 36 must equal Line 29. Refund – Amount of Line 29 you want as a check mailed to you. REFUND	30	0
31	Credit – Amount of Line 29 you want as a credit to your 2023 estimated account.	31	0
32 33 34 35 36	Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions.	32 33 34 35 36	
Sign	ature(s). Under penalties of perjury, I (we) declare that I (we) have examined this return, including all		
	panying schedules and statements, and to the best of my (our) belief, they are true, correct, and complete.		
roui	Signature Spouse's Signature, if filing jointly		
~	arer's Name and Telephone Number Date E-File Op	t Out	Ν
	MM PRIYA RAM SAGAR GUPTA TALLAM D3L023 S9659522 Firm FEIN Preparer's Preparer's		843171965 P02082703
	1555 REV 03/01/23 PRO		

Page 2 of 2

2200213359



2201510027

PA-40 B (EX) 06-22 (I) PA Department of Revenue **2022**

Name (if filing jointly, use name shown first on the PA-40)

Social Security Number (shown first) 746-25-8828

OFFICIAL USE ONLY

PAVANI BOOSA

CAUTION: Federal and PA rules for dividend income are different. Read the instructions.

If your total PA-taxable dividend and capital gains distributions income (taxpayer, spouse and/or joint) is equal to the amount reported on your federal return and does not include any amounts for Lines 2 through 11 (not including subtotal Line 6) of PA Schedule B, you must report your income on Line 3 of the PA-40, but you do not have to submit PA Schedule B. If there are any amounts (taxpayer, spouse and/or joint) for any of the Lines 2 through 11 (not including subtotal Line 6), you must complete and submit PA Schedule B with your PA-40. A taxpayer and spouse must complete separate schedules to report their income if any amounts are reported on Lines 2 through 11 (not including subtotal Line 6) of Schedule B. However, if all the income is earned on a joint basis, one schedule may be completed. Complete the oval to indicate whether the income included on the schedule is from the taxpayer, spouse or joint. If a separate PA Schedule B is prepared for a taxpayer and spouse, include only the taxpayer or spouse share of the income for each line.

PA SCHEDULE B - PA-Taxable Dividend and Capital Gains Distributions Income (See the instructions.)

Taxpayer 🝙 Spouse 🧰 Joint 🧰						
1. Dividend income from Line 3b of your federal return. See instructions.	1. \$ 1					
2. Dividend income from federal Schedule K-1(s). See instructions	s. 2. \$					
3. Pennsylvania exempt-interest dividend income. See instruction	is. 3. ^{\$}					
 Other reduction adjustments. See instructions. Description: 	4. \$					
5. Add the amounts on Lines 2, 3 and 4.	5. \$					
6. Subtract Line 5 from Line 1.	6. \$ 1					
7. Total exempt-interest dividends. See instructions.	7. \$					
8. Other addition adjustments. See instructions.						
Description:	8. \$					
9. Repatriation of foreign income. See instructions.						
a. Total earnings and profits included on Line 1 of IRC Section 965 Transition Tax Statement. 9a						
 b. Total payments of earnings and profits included in Line 9a received in prior years. 9b 						
c. Payments of earnings and profits included in Line 9a received	d in current year. 9c. ^{\$}					
10. Capital Gains Distributions - See instructions.	10. \$					
 Dividend income from PA S corporation(s) and partnerships, reported PA Schedule(s) RK-1 or federal Schedule(s) K-1. 	d on your 11. \$					
12. Total PA-Taxable Dividend Income. Add Lines 6, 7, 8, 9c, 10 and 11. Enter on Line 3 of your PA-40.	12. \$1					

1555 REV 03/01/23 PRO



2201510027

PA SCHEDULE D

5507370055

Sale, Exchange or Disposition of Property

PA-40 D (EX) 06-22 (I) PA Department of Revenue

2022

If you need more space, you may photocopy.	
Name of the taxpayer filing this schedule	Social Security Number (shown first)
PAVANI BOOSA	746-25-8828

Taxpayer 🕒 Spouse 🔵 Joint 🥏

Important: A taxpayer and spouse must complete separate schedules to report their gains or losses or if any amounts are reported on Lines 3 through 10 of PA Schedule D. However, if all the gains and losses were realized on a joint basis, one schedule may be completed. Complete the oval to indicate whether the gains and losses included on the schedule are from the taxpayer, spouse or joint. One spouse may not use a loss to reduce the other spouse's gains. When reporting the sale of jointly owned property that is not reported on a joint PA Schedule D, each must show their share of the sale on their separate PA Schedule D. **Read the instructions.** Enter all sales, exchanges or other dispositions of real or personal tangible and intangible property, including inherited property. Amounts from Federal Schedule D may not be correct for PA income tax purposes. Nonresidents should read carefully the instructions concerning intangible property. If the result is a loss, fill in the oval next to the line.

Describe th	a) ne property: XYZ stock, or auphin County	(b) Date acquired: Month/day/year	(c) Date sold: Month/day/year	(d) Gross sales price less expenses of sale	(e) Cost or adjusted basis of the property sold	(f) Gain or loss: (d) minus (e) (If a loss, fill in the oval).
1.ROBINHOOD	SECURITIES	01/01/22	12/31/22	437.	441.	4.
ROBINHOOD	CRYPTO LLC	01/01/22	12/31/22	279.	306.	LOSS 27.
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
						LOSS
2 Net gain (loss) from a	above sales.				LOSS 2.	31.
	t sales from PA Schedule [
	from C corporations					
					= 4.	
	he sale of 6-1-71 property					<u> </u>
• • • •	and partnership gain (loss					

Taxable gain from selling a principal residence. Complete and submit PA Schedule 19. Complete Columns (a) through (e) and enter your total gain on Line 7.

	(a) Address of	(b) Date acquired:	(c) Date sold:	(d) Gross sales price	(e) Cost or adjusted basis of	
	residence	Month/day/year	Month/day/year	less expenses of sale	the property sold	(d) minus (e)
7.	Taxable gain from the sale of your principal residence. If y If you realized a gain/loss on the sale of the nonresidential					
8. Taxable distributions from partnerships from REV-999						
9.	Taxable distributions from PA S corporations from REV-S	998			9.	
10.	Taxable gain from exchange of insurance contracts				10.	
11.	Total PA Taxable Gain (Loss). Add Lines 2 through 10.	Enter on Line 5	of your PA-40. (If a net loss, fill in the c	oval) 📕 11.	31.

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5507370055

OFFICIAL USE ONLY

PA SCHEDULE E

Rents and Royalty Income (Loss)

2201410020

PA-40 E (EX) 06-22 (I) PA Department of Revenue

e	2	0	2	2

PA Department of Revenue	OFFICIAL USE ONLY
Name of the taxpayer filing this schedule	Social Security Number (shown first) or EIN
PAVANI BOOSA	746-25-8828
Sales Tax License Number (if applicable). See the instructions.	Are rental payments made by lessees through a third party broker?

See the instructions. Report the income and expenses for the use of your personal property by others. Also, report the income you received for the extraction of oil, gas and other minerals from your property, and the use of your patents and copyrights. Note: If you are in the business of renting your property, extracting minerals from your property or producing products from your patents and copyrights – use PA Schedule C.

SECTION I PROPERTY DESCRIPTION

Enter the type and complete address of each rental real estate property, and/or each source of royalty income. See the instructions.

	Туре	D	escription	of Property	F	or Profi	it Prope	rty Complete Ad	dress (street, city, state a	nd ZIP code)	
•						YES		2-4-118/89,	UPPAL		
A	3	2-4-118/89	SOUTH	SWAROOP	NAGAR	NO		HYDERABAD ,	TELANGANA,	45039,	India
в						YES	\bigcirc				
D						NO	\bigcirc				
С						YES	\bigcirc				
U						NO	\bigcirc				
Date		human d. Olmala fam									

 Property type:
 1. Single family residence
 3. Vacation/short-term rental
 5. Land
 7. Self-rental

 2. Multi-family residence
 4. Commercial
 6. Royalties
 8. Other, describe: _

SECTION II INCOME & EXPENSES			
	Property A	Property B	Property C
Line a: Identify the property from Section I and indicate ownership (T/S/J)	🖿 T 🔵 S 🔵 J	□ T □ S □ J	─ T ─ S ─ J
Line b: Is the property rental location in PA?	YES NO	YES NO	YES NO
Line c: Is the property rented for any period less than 30 days?	YES NO	YES NO	YES NO
Income: 1. Rent received 1.	450		
2. Royalties received 2.			
Expenses: 3. Advertising 3.			
4. Automobile and travel 4.			
5. Cleaning and maintenance 5.	1,250		
6. Commissions 6.			
7. Insurance 7.			
8. Legal and professional fees8.			
9. Management fees 9.	1,550		
10. Mortgage interest 10.			
11. Other interest			
12. Repairs	2,950		
13. Supplies	2,350		
14. Taxes - not based on net income14.			
15. Utilities	1,950		
16. Depreciation expense - See the instructions			
17. Other expenses (itemize):			
18. Total Expenses - Add Lines 3 through 17	10,050		
Income 19. Income – Subtract Line 18 from Line 1 or 2			
or Loss: 20. Loss – Subtract Line 1 or 2 from Line 18. (fill in the oval, if a net loss) 20.	0 0		\bigcirc
21. Net Income or Loss - Total Lines 19 and 20 for short-term rentals. See the in	structions(fill in the	oval, if a net loss) 21.	
22. Net Income or Loss - Total Lines 19 and 20 for non short-term rentals. See the	ne instructions (fill in the	oval, if a net loss) 22.	0
23. Rent or royalty income (loss) from PA S corporation(s) and partnerships from your	, , , , , , , , , , , , , , , , , , ,	. ,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
PA Schedule(s) RK-1 or NRK-1. 24. Net Rent and Royalty Income (Loss). Add Lines 22 and 23. If submitting more t		oval, if a net loss) 23.	
total all Line 22 and 23 amounts and include on Line 6 of your PA-40.	(fill in the	oval, if a net loss) 🔵 24.	0
	REV 03/01/23 PRO		1555





PA-8879 (EX) 11-22

Declaration Control Number/Submission ID

Primary Taxpayer's Name	Social Security Number
	746-25-8828
Secondary Taxpayer's Name	Social Security Number

SECTION I	TAX RETURN INFORMATION – TAX YEAR ENDING DEC. 31, 2022 (whole dollars only)	
1. Adjusted PA taxable i	ncome (Form PA-40, Line 11) 1	103,045
	PA-40, Line 12)	2 1 6 2
3. Total PA tax withheld	(Form PA-40, Line 13)	3,163
	ed (Form PA-40, Line 30)	
5. Total payment (tax du	ie) (Form PA-40, Line 28)	0

SECTION II DECLARATION AND SIGNATURE AUTHORIZATION OF TAXPAYER

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements of my 2022 PA Tax Return (Form PA-40), and to the best of my knowledge and belief, it is true, correct and complete. In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure of all information pertaining to my use of the system and software and to the transmission of my tax return electronically to the PA Department of Revenue. I further declare that the amounts in Section I above are the amounts shown on the copy of my electronic income tax return. If applicable, I authorize the PA Department of Revenue and its designated financial agents to initiate an electronic funds withdrawal (direct debit) entry to my designated account for Pennsylvania taxes owed. I also authorize my financial institution to debit the entry to my account and the financial institutions involved in the processing of my electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to payment. I certify the funds for this withdraw are originating from an account within the United States or one of its territories. I have selected a personal identification number as my signature for my electronic income tax return and, if applicable, my electronic funds withdrawal consent.

PRIMARY TAXPAYER'S PERSONAL IDENTIFICATION NUMBER (PIN) Mark one oval only.

 I authorize
 GLOBAL TAXES LLC
 to enter my PIN
 58828
 as my signature on my tax year 2022

 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2022 electronically filed income tax return.

Signature

SECONDARY TAXPAYER'S PIN Mark one oval only.

I authorize ________ to enter my PIN ______ as my signature on my tax year 2022 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2022 electronically filed income tax return.

Signature

Date

Date

SECTION III CERTIFICATION AND AUTHENTICATION – PRACTITIONER PIN PROGRAM PARTICIPANTS ONLY

ERO'S EFIN/PIN	Entor your c	iv diait EEIN	followed by you	ir fivo diait c	olf coloctod DIN
ERO 3 EFIN/FIN				a nve-uigit s	Sell-Selected Fills

222496 / 61989

As a participant in the Practitioner PIN Program, I certify the above numeric entry is my PIN, which is my signature on the tax year 2022 electronically filed income tax return for the taxpayer(s) indicated above. I confirm I am participating in the Practitioner PIN Program in accordance with the requirements established for this program.

ERO's Signature

Date

The ERO must retain this form and supporting documents for three years. DO NOT SUBMIT THIS FORM TO THE PA DEPARTMENT OF REVENUE UNLESS REQUESTED TO DO SO. Name PAVANI BOOSA Social Security Number 746-25-8828

				Federal Form	s W-2		
# of W2	* NT / TX B L	TS	ZRI	Employer Name Employer identification number from box B	Federal wages from box 1 Medicare wages from box 5	Pennsylvania (state) compensation from box 16 (See Tax Help) Pennsylvania (state) income tax tax withheld from box 17	ST ID
		H H <t< td=""><td></td><td>VOCOLLECT, INC 25-1554121 LUCAS SYSTEMS INC 23-2950771</td><td>94,178. 8,939. </td><td>94,105. 2,889. 8,939. 274. </td><td>PA PA</td></t<>		VOCOLLECT, INC 25-1554121 LUCAS SYSTEMS INC 23-2950771	94,178. 8,939. 	94,105. 2,889. 8,939. 274. 	PA PA

Pennsylvania W-2	Taxpayer 103,044.	Spouse
Pennsylvania W-2 to Schedule NRH, line 9		
Federal Form 4137, Unreported Tips, line 6		
Noncash tips		
Non-Pennsylvania W-2 to Schedule SP, line 6		
Withholding	3,163.	

Federal Forms W-2: Local Tax

# of W2	*	TS	Employer identification number from box B	Locality name	Local wages, tips, etc. (local) from box 18	Local income tax (local) from box 19	ST ID
		T	25-1554121 23-2950771 	700102 710704-71	62,348. 8,939.	<u> 1,870.</u> <u> </u>	<u>PA</u> <u>PA</u>

Pennsylvania Local W-2	Taxpayer 71,287.	Spouse
Federal Form 4137, Unreported Tips, line 6	i	
Noncash tips		
Withholding	1,959.	

Excess Reimbursements

*	Description	Employer's EIN	T/S	Amount

	Taxpayer	Spouse
Excess Reimbursements	_	

* Payer's Name S # Type Distribution Basis PA Taxable Witholding	Fed. Icome	PA Tax Vithheld		PA Taxal Comp.	Code	T/S	yer EIN	Pa			Payer Name	*
Executor fee H Other nonemployee compensation. Jury duty pay Discribution from FRA (Traditional or Roth) Covenant not to compete Distribution from Life Insurance, Annuity or Endowment Contracts Darages or settlement for lost wages, other than personal injury N Fiduciary fees from a trust O Other income not listed above Describe: N Withholding N Fiduciary fees from a trust O O Other income not listed above Describe: Spous Withholding Trapayer Spous Withholding Trapayer Spous * Payer's EIN T Fed PA Stribution from Form 1099MISC/1099K/1099NEC. Trapayer Spous * Payer's Name T Fed PA * No entry<												
Executor fee H Other nonemployee compensation. Jury duty pay Distribution from IRA (Traditional or Roth) Honcarium Covenant not to compete J Distribution from IRA (Traditional or Roth) M Miscellaneous compensation for form to the insurance, Annuity or Endowment Contracts Distribution from Charitable Gift Annuities Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. N Fiduciary fees from a trust O Other income not listed above Describe: Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. Taxpayer Spous Withholding T Fed PA Gross PA Taxable P/ * Payer's EIN T Fed PA Gross PA Taxable Viii * Payer's Name S # Type Distribution Basis PA Taxable Viiii * Payer's Name S # P/ Type Distribution Basis PA Taxable Viiiii * Payer's Name S # P/ Type Distribution Basis PA Taxable Viiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii												
Executor fee H Other nonemployee compensation. Dury duty pay Distribution from IfA (Traditional or Roth) Expert winess fee I Employer sponsored retirement/pension/deferred compensation retirement/pension/deferred compensation from Life Insurance, Annuity or Endowment Contracts Darages or settlement for Distribution from Charitable Gift Annuities Distribution from Life Insurance, Annuity or Endowment Contracts Distribution from Form a trust O Other income not listed above Describe: N Fiduciary fees from a trust O Other income not listed above Describe: Spous Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. Taxpayer Spous Spous Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. Taxpayer * Payer's Name T * # # * Payer's Name T											:- D	
Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. Withholding Compensation from Federal Forms 1099R * Payer's EIN T Fed PA Gross PA Taxable P/ * Payer's EIN T Fed PA Gross PA Taxable P/ * Payer's Name S # Type Distribution Basis PA Taxable P/ * Payer's Name S # Type Distribution Basis PA Taxable P/ * Enter an 'X' if this income is Not subject to Pennsylvania tax - PA Part-Year and Nonresidents Onl nssylvania Distribution type: Im to eligible yet; plan is eligible in PA No entry J Traditional or Roth IRA; I'm over 59.5 Military pension J1 Traditional or Roth IRA; I'm over 59.5 Military pension J2 Traditional or Roth IRA; I'm over 59.5 Military pension M2 Life insurance or endowment I Annuity or Non-civil service disability/ (including Qual Joint Survivorship Annuity) M1 ESOP: Non-Allocated ESOP Stock Dividend Rolover M3 KSOP: Taxa		wment Cor	ı) or End s	t/pension/c al or Roth) a, Annuity c t Annuities	iremen adition urance ble Gif vee Sto	ored re IRA (T Life In Charit Emplo	be: yer sponso ution from ution from ution from be: ary fees fro income no	Descri Emplo Distrib Distrib Distrib Distrib Descri Fiducia Other	JK JK M	r	tor fee uty pay or's fee witness fee arium ant not to compete ges or settlement fo ages, other than	Exe Jury Dire Exp Hor Cov Dar lost
* Payer's EIN Payer's Name T S Fed # # PA Type Gross Distribution Basis PA Taxable P// Without · · · · · · · · · · · · · · Without ·	use	· · · · · · · · · · · · · · · · · · ·	Ilaneous Compensation from Form 1099MISC/1099K/1099NEC		iscell /ithho							
* Payer's Name S # Type Distribution Basis PA Taxable Witholding * Payer's Name S # Type Distribution Basis PA Taxable Witholding * Image: Stress			R	ns 1099R	l Forr	Feder	on from	nsati	npe	Со		
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Innsylvania Distribution type: Image: None of the second state, or municipal employee plan Image: None of the second state, or municipal employee plan 1 PA school, state, or municipal employee plan J1 Traditional or Roth IRA; I'm over 59.5 2 Military pension J2 Traditional or Roth IRA; I'm under 59.5 2 Military pension J2 Traditional or Roth IRA; I'm under 59.5 3 U.S. Civil service retirement/disability/annuity K3 Life insurance or endowment 1 Annuity or Non-civil service disability (including Qual Joint Survivorship Annuity) K3 Life insurance or endowment 1 Early distribution from a retirement plan K2 SOP: Non-Allocated ESOP Stock Dividend 2 Rollover M3 KSOP: Taxable ESOP within a 401(k) 3 I'm eligible; plan is eligible (no PA tax) M4 KSOP: Nontaxable ESOP within a 401(k) Distribution from Life Insurance, Annuity, Endowment Contracts or												
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nnsylvania Distribution type: Image: None of the second state, or municipal employee plan Image: None of the second state, or municipal employee plan 1 PA school, state, or municipal employee plan Jimage: None of the second state, or municipal employee plan 1 United Mine Workers pension Jimage: None of the second state, or municipal employee plan 2 Military pension Jimage: None-qualified deferred compensation plant structure of the second state of the second structure												
Distribution from Life Insurance, Annuity, Endowment Contracts or Taxpayer Spous Distribution from Charitable Gift Annuities.	PA 5 plan ities nd ividend	n is eligible ; I'm over 5 ; I'm under compensat wment table Gift A P Stock Div ESOP Stoc within a 40	yet; pl Roth IR Roth IR leferre or end m Cha ed ESC located e ESO	ot eligible y tional or Re tional or Re qualified de nsurance o bution fron P: Allocate P: Non-Allo P: Taxable	l'm no Tradi Tradi Non-o Life in Distri ESOI ESOI KSOI	I22 J1 J2 K2 K3 M1 M2	olan nuity	ity/anr ty annuity plan	emp sabil abili hip <i>I</i> nent	e: ipal sion nt/di e dis vors tirer	ia Distribution typ rry nool, state, or munic Mine Workers pens y pension vivil service retireme y or Non-civil servic ling Qual Joint Surv distribution from a re	No C PA Unit Unit U.S Ann (inc Earl Roll
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Total gross compensation to Form PA-40 line 1a 103,044.	use 0		axpay	Ta		-						

* Enter an 'X' if this income is **Not** subject to Pennsylvania tax.