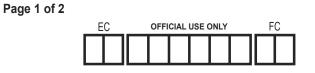
# PA-40 - 2023 Pennsylvania Income Tax Return ENTER ONE LETTER OR NUMBER IN EACH BOX (04-23)

APT 5	, Married/Filing <b>J</b> oint ed/Filing Separately, <b>J</b> sed ver Date of Death e Date of Death		
N Farmer	Farmers. School District Name <b>NOT IN PA</b>		
732-629-3422 99999 I			
<ul> <li>1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions.</li> <li>1b Unreimbursed Employee Business Expenses.</li> <li>1c Net Compensation. Subtract Line 1b from Line 1a.</li> </ul>	la lb lc	7322 0 7322	
<ol> <li>Interest Income. Complete PA Schedule A if required.</li> <li>Dividend and Capital Gains Distributions Income. Complete PA Schedule B if required.</li> <li>Net Income or Loss from the Operation of a Business, Profession or Farm.</li> </ol>	2 3 4		
<ul> <li>Net Gain or Loss from the Sale, Exchange or Disposition of Property.</li> <li>Net Income or Loss from Rents, Royalties, Patents or Copyrights.</li> <li>Estate or Trust Income. Complete and submit PA Schedule J.</li> <li>Gambling and Lottery Winnings. Complete and submit PA Schedule T.</li> <li>Total PA Taxable Income. Add only the positive income amounts from Lines 1c, 2, 3, 4, 5, 6, 7 and 8. DO NOT ADD any losses reported on Lines 4, 5 or 6.</li> <li>Other Deductions. Enter the appropriate code for the type of deduction. N see the instructions for additional information.</li> <li>Adjusted PA Taxable Income. Subtract Line 10 from Line 9.</li> </ul>	5 6 7 8 9 10 11	0 0 7322 0 7322	





PA-40 - 2023

Social Security Number

# 712957542 Name(s) HARSHITH REDDY KUMBHAM

12 13	<b>PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).</b> Total PA Tax Withheld. See the instructions.	73 75	225 225
15	2023 Extension Payment.	14 15 16 17 18	
19a	Forgiveness Credit. Submit PA Schedule SP.Filing Status:01 Unmarried or Separated02 Married03 DeceasedDependents, Section II, Line 2, PA Schedule SPTotal 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 <b>PA Schedule(s) G-L</b> and/or <b>RK-1</b> . Total Other Credits. Submit your <b>PA Schedule OC</b> and/or <b>PA Schedule DC</b> . <b>TOTAL PAYMENTS and CREDITS.</b> Add Lines 13, 18, 21, 22 and 23. <b>USE TAX.</b> Due on internet, mail order or out-of-state purchases. See instructions. <b>TAX DUE.</b> 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. <b>N</b>	22 23 24 25 26 27	0 225 0 0 0
28 29	<b>TOTAL PAYMENT DUE.</b> See the instructions. <b>OVERPAYMENT.</b> If Line 24 is more than the total of Line 12, Line 25 and Line 27, enter the difference here.	29 29	0 0
30 31	The total of Lines 30 through 36 must equal Line 29.Refund – Amount of Line 29 you want as a check mailed to you.REFUNDCredit – Amount of Line 29 you want as a credit to your 2024 estimated account.REFUND	31 30	0 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	
accon	panying schedules and statements, and to the best of my (our) belief, they are true, correct, and complete.		
	Signature Spouse's Signature, if filing jointly		
SY	arer's Name and Telephone Number Date E-File Op AM PRIYA RAM SAGAR GUPTA TALLAM D12024 39659522 Firm FEII Preparer's	N	Y 843171965 P02082703
	1555 REV 12/21/23 PRO Page 2 of 2		

### **PA SCHEDULE E**

2301410029

Rents and Royalty Income (Loss)

#### PA-40 E (EX) 03-23 (I) PA Department of Revenue 2023 OFFICIAL USE ONLY Name of the taxpayer filing this schedule Social Security Number (shown first) or EIN 712-95-7542 HARSHITH REDDY KUMBHAM Sales Tax License Number (if applicable). See the instructions. Are rental payments made by lessees through a third party broker? See See No

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.

#### **PROPERTY DESCRIPTION SECTION I**

Enter the type and complete address of each rental real estate property, and/or each source of royalty income. If more than three properties, submit additional schedules as needed.

	Туре		Descriptior	n of Property	F F	or Profi	it Prope	rty Comple	ete Address (st	reet, city, state	and ZIP code)	
A						YES	$\bigcirc$	RAVINDRA	NAGAR,	NACHAI	RAM	
A	2	4-7-12/76	, FLAT	NO:205,	CREATI	NO		HYDERABAI	D, TELA	NGANA,	500076,	India
В						YES	$\bigcirc$					
D						NO	$\bigcirc$					
С						YES	$\bigcirc$					
Ŭ						NO	$\bigcirc$					
Pro	nertv f	<b>vne</b> 1 Single	family resider	nce 3 Vaca	tion/short-ter	rm renta	al 5 La	ind 7 Se	lf-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	O YES O NO	O YES O NO
Income: 1. Rent received 1.	685		
2. Royalties received 2.			
Expenses: 3. Advertising 3.			
4. Automobile and travel 4.			
5. Cleaning and maintenance 5.	1,269		
6. Commissions 6.			
7. Insurance 7.			
8. Legal and professional fees 8.			
9. Management fees 9.	1,358		
10. Mortgage interest			
11. Other interest			
12. Repairs	3,514		
13. Supplies	3,169		
14. Taxes - not based on net income14.			
15. Utilities	2,516		
16. Depreciation expense - See the instructions	4,027		
17. Other expenses (itemize):			
18. Total Expenses - Add Lines 3 through 17	15,853		
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		
21. Net Income or Loss - Total Lines 19 and 20 for short-term rentals. See the ir	structions(fill in the	e oval, if a net loss) 21.	
22. Net Income or Loss - Total Lines 19 and 20 for non short-term rentals. See t	he instructions (fill in the	e 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 I		e oval, if a net loss) 23.	
total all Line 22 and 23 amounts and include on Line 6 of your PA-40.		e oval, if a net loss) 24.	0



1555

HARSHITH REDDY KUMBHAM

Name

Social Security Number 712-95-7542

				Federal Form	s W-2		
# of W2	* N T / T X B L	TS	N R H	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
				SHOOLIN INC           27-3455385           SHOOLIN INC           27-3455385	<u>84,685.</u> 84,685.	7,322. 225. 80,558. 0.	PA NJ

Pennsylvania W-2	<b>Taxpayer</b> 7,322.	Spouse
Pennsylvania W-2 to Schedule NRH, line 9		
Federal Form 4137, Unreported Tips, line 6		
Non-Pennsylvania W-2 to Schedule SP, line 6	80,558.	
Withholding	225.	

### Federal Forms W-2: Local Tax

# of W2	* 1	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

Pennsylvania Local W-2	Taxpayer	Spouse
Federal Form 4137, Unreported Tips, line 6		
Noncash tips		
Withholding		

### **Excess Reimbursements**

*	Description	Employer's EIN	T/S	Amount

IARSHIT <b>Miscella</b> i	TH REDDY KUMBHAN	í fron	n Fe	deral	Forms 1	1099N	IISC, 1	099K, 10 <mark>99N</mark>	-95-7542 EC, and ot	Page : her statement
*	Payer Name			Pa	yer EIN	T/S	Code	PA Taxable Comp.	PA Tax Withheld	Fed. Income
A Exe B Jur C Dire D Exp E Hol F Co <sup>o</sup> G Dat Iosi	vania Payment type: ecutor fee y duty pay ector's fee pert witness fee norarium venant not to compete mages or settlement fo t wages, other than 'sonal injury	I I I I	N N N	Descri Emplo Distrib Distrib Distrib Distrib Descri Fiducia	yer sponse ution from ution from ution from ution from be: ary fees fre income no	ored re IRA ( Life Ir Chari Emplo	etiremer Fraditior surance able Gi byee Sto	ation. ht/pension/defe hal or Roth) e, Annuity or E ft Annuities pck Ownership	ndowment C	·
	llaneous Compensatior olding								ayer	Spouse
		Cor	npe	nsati	on from	Fede	al For	ms 1099R		
*	Payer's EIN Payer's Name	T S	Fed #	РА Туре	Gros Distrib		1	Basis F	PA Taxable	PA Tax Withheld
* E	Enter an 'X' if this incom	e is l	Not	subjec	t to Penns	sylvani	a tax - F	PA Part-Year a	nd Nonreside	ents Only.
N No I31 PA I11 Uni I32 Mili I33 U.S K1 Ann (inc I21 Ear I12 Rol	vania Distribution typ entry school, state, or munic ited Mine Workers pens itary pension S. Civil service retireme nuity or Non-civil servic cluding Qual Joint Surv rly distribution from a re llover eligible; plan is eligible	ipal sion nt/dis e dis vors tiren	sabil abili hip <i>I</i> nent	ity/anr ty Annuity plan	nuity	J' J2 K2 I M'	I Trad I Trad Non- I Life i Distr I ESO I ESO I ESO I SO	ot eligible yet; itional or Roth qualified defer nsurance or e ibution from C P: Allocated E P: Non-Alloca P: Taxable ES P: Nontaxable	IRA; I'm ove IRA; I'm und red compens ndowment haritable Gift SOP Stock I ted ESOP Sto GOP within a	r 59.5 er 59.5 sation plan Annuities Dividend ock Dividend 401(k)
Distr Com	ibution from Life Insura ineligible retirement pla ibution from Charitable pensation from Form 1 holding	ns (s Gift 099F	see ⊺ Ann R (eli	Tax He uities igible r	elp FAQ's t	for mo  plans)	re info) · · · ·	· ·		
				Tota	Gross (	Comp	ensati	on		
Tota Tota With	l gross compensation to I Schedule NRH gross holding to Form PA-40	o For comp	m P bens	A-40 li ation t	ne 1a o PA-40, I	 ine 12		<b>Taxpa</b> 7		Spouse

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