PA-40 - 2023

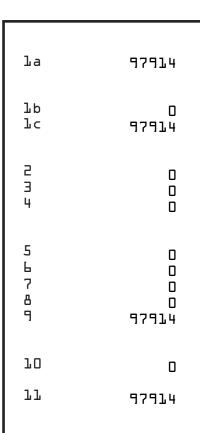
Pennsylvania Income Tax Return

ENTER ONE LETTER OR NUMBER IN EACH BOX (04-23)

						N	Extension.	N	Amended Ret	urn.
846934731	984980289						Residency State			
SUNDARESWARAN	PILLAI					R	PA Resident/No		Part-Year Reside	nt
AJEESH KUMAR	Oc	ccupation	SOFTW	IARE	E	J	from Single, Married Married/Filing		•	
SOORIYA PRABHA	Oc	ecupation	HOME	MAKE	:R	N	Deceased	Separate 1	, 2 1100 1100011	
SOORIYA MOORTH	IY					N	Taxpayer Date	of Death		
APT WlOl						N	Spouse Date of	Death		
111 PROVIDENCE	ROAD					N	Farmers.			
MORTON	Р	A 1	9070				School District	Name 50	TZABHTU	DEL
215-60	19-2059	2	3840		·					

- 1a Gross Compensation. Do not include exempt income, such as combat zone pay and qualifying retirement benefits. See the instructions.
- 1b Unreimbursed Employee Business Expenses.
- $1c \quad \ \ Net \ Compensation. \ Subtract \ Line \ 1b \ from \ Line \ 1a.$
- 2 Interest Income. Complete **PA Schedule A** if required.
- 3 Dividend and Capital Gains Distributions Income. Complete **PA Schedule B** if required.
- 4 Net Income or Loss from the Operation of a Business, Profession or Farm.
- 5 Net Gain or Loss from the Sale, Exchange or Disposition of Property.
- 6 Net Income or Loss from Rents, Royalties, Patents or Copyrights.
- 7 Estate or Trust Income. Complete and submit **PA Schedule J.**
- 8 Gambling and Lottery Winnings. Complete and submit **PA Schedule T**.
- 9 **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.
- 10 **Other Deductions.** Enter the appropriate code for the type of deduction. **N** See the instructions for additional information.
- 11 **Adjusted PA Taxable Income.** Subtract Line 10 from Line 9.

1555 REV 02/01/24 PRO









Social Security Number

Name(s) AJEESH KUMAR SUNDARESWARAN PIL 846934731

12 13	PA Tax Liability. Multiply Line 11 by 3. Total PA Tax Withheld. See the instruction				73 75		300P 300P
15 16	Credit from your 2022 PA Income Tax re 2023 Estimated Installment Payments. F 2023 Extension Payment. Nonresident Tax Withheld from your PA Total Estimated Payments and Credits	REV-459B included. Schedule(s) NRK-1. (Nonresidents only)	N	14 15 16 17 18		0 0 0 0
19a 19b	Forgiveness Credit. Submit PA Schedu Filing Status: 01 Unmarried or Sep Dependents, Section II, Line 2, PA Sche Total Eligibility Income from Section III Tax Forgiveness Credit from Section IV	parated 02 Married odule SP I, Line 11, PA Schedule	SP.		19a 19b 20 21	00 00	0
25	Resident Credit. Submit your PA Schedu Total Other Credits. Submit your PA Sch TOTAL PAYMENTS and CREDITS. USE TAX. Due on internet, mail order of TAX DUE. If the total of Line 12 and Li Penalties and Interest. See the instruction If including form REV-	hedule OC and/or PAS Add Lines 13, 18, 21, 2 or out-of-state purchases ine 25 is more than line ns. Enter Co	chedule DC. 2 and 23. 3. See instructions. 24, enter the differede:	nce here.	22 23 24 25 26 27		0 300F 0 0
28 29	TOTAL PAYMENT DUE. See the instr OVERPAYMENT. If Line 24 is more the the difference here.	han the total of Line 12,	Line 25 and Line 27	7, enter	28 29		0
30 31	The total of Lines 30 through 36 must Refund – Amount of Line 29 you want a Credit – Amount of Line 29 you want as	as a check mailed to you		REFUND	31 ⁷ 30		0
33 34 35	Refund donation line. Enter the organizate Refund donation line.	ation code and donation ation code and donation ation code and donation	amount. See instruction amount. See instruction amount. See instruction amount.	tions. tions. tions.	32 33 34 35 36		
	ature(s). Under penalties of perjury, I (we) declare the panying schedules and statements, and to the best of r						
		pouse's Signature, if fili	ing jointly				
•	arer's Name and Telephone Number	PTA TALLAM	Date 022724	E-File Op		N	l
578	89659522			Firm FEIN Preparer's			143171965 102082703

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Page 2 of 2





PA-8879 (EX) 03-23 (I)

PENNSYLVANIA E-FILE SIGNATURE AUTHORIZATION

2023

Declaration Control Number/Submission ID				
Primary Taxpayer's Name AJEESH KUMAR SUNDARESWARAN PILLAI		Social Security 846-93-47		
Secondary Taxpayer's Name SOORIYA PRABHA SOORIYA MOORTHY		Social Security 984-98-02		
SECTION I TAX RETURN INFORMATION – TAX YE	AR ENDING DEC. 31, 202	3 (whole dollar	s only)	
1. Adjusted PA taxable income (Form PA-40, Line 11)			1	97,914
2. PA tax liability (Form PA-40, Line 12)			2	3,006
3. Total PA tax withheld (Form PA-40, Line 13)			3	3,006
4. Amount to be refunded (Form PA-40, Line 30)			4	
5. Total payment (tax due) (Form PA-40, Line 28)			5	0
SECTION II DECLARATION AND SIGNATURE AUT	HORIZATION OF TAXPAYE	ER		
the amounts shown on the copy of my electronic income tax return. If agents to initiate an electronic funds withdrawal (direct debit) entry to institution to debit the entry to my account and the financial institutions information necessary to answer inquiries and resolve issues related to the United States or one of its territories. I have selected a personal applicable, my electronic funds withdrawal consent. PRIMARY TAXPAYER'S PERSONAL IDENTIFICATION NUMBER (FOR I authorize GLOBAL TAXES LLC electronically filed income tax return.	o my designated account for P is involved in the processing of to payment. I certify the funds of identification number as my PIN) Mark one oval only. to enter my PIN	Pennsylvania t. f my electronic for this withdra signature for 34731	axes owed. I payment of t aw are origina my electroni	also authorize my financial axes to receive confidential ating from an account within ic income tax return and, if
I will enter my PIN as my signature on my tax year 2023 electron	onically filed income tax return	1.		
Signature				Date
SECONDARY TAXPAYER'S PIN Mark one oval only. X I authorize GLOBAL TAXES LLC electronically filed income tax return. I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return.	to enter my PIN onically filed income tax return		as my signa	ture on my tax year 2023
Signature				Date
SECTION III CERTIFICATION AND AUTHENTICATION	ON – PRACTITIONER PIN I	PROGRAM P	ARTICIPAN	TS ONLY
		222496		
As a participant in the Practitioner PIN Program, I certify the above nuincome tax return for the taxpayer(s) indicated above. I confirm I am established for this program.	meric entry is my PIN, which i	is my signature	e on the tax y	ance with the requirements
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.

PA-40 **Gross Compensation Worksheet** 2023 Line 1a ► Keep for your records Name Social Security Number 846-93-4731 AJEESH KUMAR SUNDARESWARAN PILLAI Federal Forms W-2 # TS Federal Pennsylvania Ν Employer ST of W2 (state) compensation ID Ν R Name wages Н Τ from box 1 from box 16 Т (See Tax Help) Χ Pennsylvania В (state) Employer identification Medicare income tax L number from tax withheld wages box B from box 5 from box 17 97,914. 95,304. 1 UST GLOBAL INC PA26-1539797 98,041. 3,006. **Taxpayer Spouse** Pennsylvania W-2..... 97,914. 0. Pennsylvania W-2 to Schedule NRH, line 9. Federal Form 4137, Unreported Tips, line 6 Noncash tips..... Withholding 3,006. Federal Forms W-2: Local Tax TS Locality name Local income ST # Employer Local wages, of identification tips, etc. ID tax W2 number from (local) (local) box B from box 18 from box 19 1 Т 26-1539797 151206 97,914. 979. PΑ **Taxpayer Spouse** 97,914. Noncash tips..... 979.

Excess Reimbursements									
*	Description	Employer's EIN	T/S	Amount					

	Taxpayer	Spouse
Excess Reimbursements		

97,914.

Miscellaneous Compensation from Federal Forms 1099MISC, 1099K, 1099NEC, and other statement

Miscella	neous Compensation	Tron	ıre	ederai	FOITIS I	USSIVI	136, 1	uggn, lugg	NEC, and of	ner statements
*	Payer Name			Pa	yer EIN	T/S	Code	PA Taxable Comp.	PA Tax Withheld	Fed. Income
Pennsylvania Payment type: A Executor fee B Jury duty pay C Director's fee D Expert witness fee E Honorarium F Covenant not to compete G Damages or settlement for lost wages, other than personal injury H Other nonemployee compensation. Describe: I Employer sponsored retirement/pension/deferred compensation plan D istribution from IRA (Traditional or Roth) K Distribution from Life Insurance, Annuity or Endowment Contracts Distribution from Charitable Gift Annuities Distribution from Employee Stock Ownership Plan. Describe: N Fiduciary fees from a trust O Other income not listed above Describe:										
	Ilaneous Compensation							C	payer	Spouse
		Cor	npe	nsati	on from	Feder	al For	ms 1099R		
*	Payer's EIN Payer's Name	T S	Fed #	PA Type	Gros Distribu		I	Basis	PA Taxable	PA Tax Withheld
* [ente Only
* Enter an 'X' if this income is Not subject to Pennsylvania tax - PA Part-Year and Nonresidents Only. Pennsylvania Distribution type: N No entry 131 PA school, state, or municipal employee plan 152 United Mine Workers pension 153 U.S. Civil service retirement/disability/annuity 154 Annuity or Non-civil service disability 155 (including Qual Joint Survivorship Annuity) 156 Early distribution from a retirement plan 157 Rollover 158 Endre Annuity or Non-civil service disability 159 (including Qual Joint Survivorship Annuity) 169 ESOP: Non-Allocated ESOP Stock Dividend 170 M2 ESOP: Non-Allocated ESOP Stock Dividend 171 Non-allocated ESOP within a 401(k) 172 M3 KSOP: Taxable ESOP within a 401(k) 173 I'm eligible; plan is eligible (no PA tax) Taxpayer Spouse Distribution from Life Insurance, Annuity, Endowment Contracts or.										
Distr Com	ineligible retirement plans (see Tax Help FAQ's for more info) Distribution from Charitable Gift Annuities									
Tota Tota With	al gross compensation to al Schedule NRH gross aholding to Form PA-40	o For comp line	m P pens			•		Тахр	Payer 7,914.	Spouse 0.