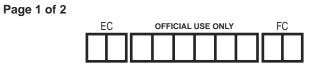
PA-40 - 2023 Pennsylvania Income Tax Return ENTER ONE LETTER OR NUMBER IN EACH BOX (04-23)

				N	Extensio	on.	Ν	Amended Return.
661	1959630				Pasidan	cy Status.		
K 0	1PELLY		P				Part-Year Resident	
AK:	SHAY KUMAR	Occupatio	on SOFTWARE E	Z		D7D Married/F I/Filing Se	Filing ${f J}$ o	to 123123 intly, , F inal Return
		Occupatio	on				1 ,	,
				N	Decease	a		
				N	Тахрауе	er Date of	Death	
				N	Spouse l	Date of D	eath	
29.	54 TRUSTING WAY			N	Farmers			
AUI	BREY	ТΧ	76227				ame ME	CHANICSBURG
	409-937-1811		21620	l				
					Г			
1a	Gross Compensation. Do not include e qualifying retirement benefits. See the			and		la		77760
1b 1c	Unreimbursed Employee Business Exp Net Compensation. Subtract Line 1b fr		a.			Ţр		777PO D
2 3 4	Interest Income. Complete PA Schedu Dividend and Capital Gains Distributio Net Income or Loss from the Operation	ns Income.	. Complete PA Schedule B if red	quired.		2 3 4		0 0 0
5 6 7 8 9	Net Gain or Loss from the Sale, Excha Net Income or Loss from Rents, Roya Estate or Trust Income. Complete and Gambling and Lottery Winnings. Com Total PA Taxable Income. Add only 2, 3, 4, 5, 6, 7 and 8. DO NOT ADD a	lties, Paten submit PA plete and s the positiv	tts or Copyrights. Schedule J. submit PA Schedule T . e income amounts from Lines	lc,		5 6 7 8 9		77760 0 0 0 0
10	Other Deductions. Enter the appropr	iate code f	-	Ν		10		٥
11	See the instructions for additional info Adjusted PA Taxable Income. Subtra		from Line 9.			ן ד		77760
1555	REV 02/24/24 PRO				L			





PA-40 - 2023

Social Security Number

664959630 Name(s) AKSHAY KUMAR KOMPELLY

12	PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).	15		
	Total PA Tax Withheld. See the instructions.	13		343 343
14	Credit from your 2022 PA Income Tax return.	ጔ4		Ο
15		15		0
10 17	2023 Extension Payment. Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only)	16 17		0
18	Total Estimated Payments and Credits. Add Lines 14, 15, 16 and 17.	18		0
	Forgiveness Credit. Submit PA Schedule SP.Filing Status:01 Unmarried or Separated02 Married03 Deceased	19a	00	
	Dependents, Section II, Line 2, PA Schedule SP	19b	00	
20	Total Eligibility Income from Section III, Line 11, PA Schedule SP.	20		0
21	Tax Forgiveness Credit from Section IV, Line 16, PA Schedule SP.	57		0
22	Resident Credit. Submit your PA Schedule(s) G-L and/or RK-1 .	22		0
23 24	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.	23 24		0
24 25	USE TAX. Due on internet, mail order or out-of-state purchases. See instructions.	25		343 0
26	TAX DUE. If the total of Line 12 and Line 25 is more than line 24, enter the difference here.	26		Ō
27	Penalties and Interest. See the instructions. Enter Code:	27		0
	If including form REV-1630/REV-1630A, mark the box. N			
28	TOTAL PAYMENT DUE. See the instructions.	28		0
29	OVERPAYMENT. If Line 24 is more than the total of Line 12, Line 25 and Line 27, enter	29		0
	the difference here. The total of Lines 30 through 36 must equal Line 29.			
30	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 2024 estimated account.	31		Ō
	Refund donation line. Enter the organization code and donation amount. See instructions.	32		
	Refund donation line. Enter the organization code and donation amount. See instructions.	33		
34 35	Refund donation line. Enter the organization code and donation amount. See instructions. Refund donation line. Enter the organization code and donation amount. See instructions.	34 35		
36	Refund donation line. Enter the organization code and donation amount. See instructions.	36		
-	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.			
	Signature Spouse's Signature, if filing jointly	L		
Prep	arer's Name and Telephone Number Date E-File Op	t Out	N	
~	AM PRIYA RAM SAGAR GUPTA 033124			
678	S9659522 Firm FEI			
	Preparer'	S PTIN	P02	2082703
	1555 REV 02/24/24 PRO Page 2 of 2			



2300212338



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

Declaration Control Number/Submission ID

Primary Taxpayer's Name	Social Security Number
AKSHAY KUMAR KOMPELLY	664-95-9630
Secondary Taxpayer's Name	Social Security Number

SECTION I TAX RETURN INFORMATION – TAX YEAR ENDING DEC. 31, 2023 (whole dollars only)							
2. PA tax liability (Form PA-40, Line 12)							
3. Total PA tax withheld (Form PA-40, Line 13)							
4. Amount to be refunded (Form PA-40, Line 30) 4							
5. Total payment (tax d	ue) (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 2023 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.

 X
 I authorize
 GLOBAL TAXES LLC
 to enter my PIN
 59630
 as my signature on my tax year 2023

 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2023 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 2023 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return.

Signature

Date

Date

SECTION III CERTIFICATION AND AUTHENTICATION – PRACTITIONER PIN PROGRAM PARTICIPANTS ONLY

ERO'S EFIN/PIN Enter your six-digit EFIN followed by your five-digit self-selected PIN

222496 / 08271

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 2023 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 AKSHAY KUMAR KOMPELLY Social Security Number 664-95-9630

	Federal Forms W-2								
# of W2	* N T X B L	TS	N R H	Employer Name 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		
				XPERTTECH, INC 22-3862039	11,160.	<u>11,160.</u> 343. 			

Pennsylvania W-2	Taxpayer 11,160.	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	343.	

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
2		T	<u>22-3862039</u> 	<u>21</u>	11,160.		<u>PA</u>

Pennsylvania Local W-2	Taxpayer 11,160.	Spouse
Noncash tips. Withholding		

Excess Reimbursements

*	Description	Employer's EIN	T/S	Amount

	Taxpayer	Spouse
Excess Reimbursements		

Mis	cella	neous Compensation	from	Federa	I Forms 1	099N	IISC, 1	099K, 10 <mark>9</mark> 9	NEC, and ot	her statements
	*	Payer Name		Pa	ayer EIN	T/S	Code	PA Taxabl Comp.	e PA Tax Withheld	Fed. Income
A B C D E F	BJury duty payDescribe:CDirector's feeIEmployer sponsored retirement/pension/deferred compensation planDExpert witness feeJDistribution from IRA (Traditional or Roth)EHonorariumKDistribution from Life Insurance, Annuity or Endowment ContractsFCovenant not to competeL									
G Damages or settlement for lost wages, other than personal injury M Distribution from Employee Stock Ownership Plan. Describe: N Fiduciary fees from a trust Other income not listed above Describe:										
1	Aisce Vithh	llaneous Compensation	n from	Form 10	99MISC/1(099K/1	099NE	C	oayer	Spouse
			Con	npensat	ion from	Fede	ral For	ms 1099R		
	*	Payer's EIN Payer's Name	T S	Fed PA # Type	Gros Distribu			Basis	PA Taxable	PA Tax Withheld
	* E	inter an 'X' if this incom	ne is N	lot subje	ct to Penns	ylvani	a tax - F	PA Part-Year	and Nonresid	ents Only.
Pennsylvania Distribution type: NImage: NonentryImage: Image:										
Taxpayer Spouse Distribution from Life Insurance, Annuity, Endowment Contracts or										
				Tota	I Gross C	Comp	ensati	on		
	Total Gross Compensation Taxpayer Spouse Total gross compensation to Form PA-40 line 1a 11,160. 0. Total Schedule NRH gross compensation to PA-40, line 12 343. 0.									

664-95-9630

Page 2

Total gross compensation to Form PA-40 line 1a 11,160.

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

AKSHAY KUMAR KOMPELLY