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

			N	Extension.	Ν	Amended Return.
664650877				Residency Sta	tue	
JADEJA			R	-		Part-Year Resident
	Occupati			from Single Morri	d/Eiling Is	to
ADITYA	Occupan	on BUSINESS A	Z	Single, Marrie Married/Filin		y, F inal Return
	Occupati	on		Deceased		
			N	Deceased		
			N	Taxpayer Date	e of Death	
APT LD			N	Spouse Date of	of Death	
4320 SPRUCE STREET						
PHILADELPHIA	PA	19104	N	Farmers. School Distric	t Name PI	HILADELPHIA
301-273-4472		51500				
1a Gross Compensation. Do not include qualifying retirement benefits. See th			and	Ŀa	3	57280
1b Unreimbursed Employee Business E	xpenses.			Γt)	
1c Net Compensation. Subtract Line 1b	<u>^</u>	1a.		Γ¢	2	57280
2 Interest Income. Complete PA Sched		-		2 3		0
3 Dividend and Capital Gains Distribut		-	quired.	4		
4 Net Income or Loss from the Operation	on of a Busi	ness, Profession of Farm.				0
	D.			5		
5 Net Gain or Loss from the Sale, Excl6 Net Income or Loss from Rents, Roy				6		
7 Estate or Trust Income. Complete and		A • • •		7		
8 Gambling and Lottery Winnings. Co	mplete and	submit PA Schedule T .		Å		0

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. See the instructions for additional information.

11 Adjusted PA Taxable Income. Subtract Line 10 from Line 9.

1555 REV 02/24/24 PRO





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57280

57280

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PA-40 - 2023

Social Security Number

LL4L50877 Name(s) ADITYA JADEJA

12 13	PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307). Total PA Tax Withheld. See the instructions.	73 75	1758 1759
14 15 16 17 18	Credit from your 2022 PA Income Tax return. 2023 Estimated Installment Payments. REV-459B included. N 2023 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	
19a	 Forgiveness Credit. Submit PA Schedule SP. 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	
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.	22 23 24 25 26 27	0 0 1759 0 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. The total of Lines 30 through 36 must equal Line 20.	28 29	D L
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	37 30	l D
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	
-	ature(s). Under penalties of perjury, I (we) declare that I (we) have examined this return, including all apanying 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	
ΣΎ	arer's Name and Telephone Number Date E-File Op AM PRIYA RAM SAGAR GUPTA TALLAM D31324 39659522 Firm FEII		N 843171965
	Preparer's	PTIN	P02082703
	1555 REV 02/24/24 PRO Page 2 of 2		



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

Declaration Control Number/Submission ID

Primary Taxpayer's Name	Social Security Number
ADITYA JADEJA	664-65-0877
Secondary Taxpayer's Name	Social Security Number

SECTION I	TAX RETURN INFORMATION – TAX YEAR ENDING DEC. 31, 2023 (whole dollars only)	
1. Adjusted PA taxabl	e income (Form PA-40, Line 11)	57,280
2. PA tax liability (For	m PA-40, Line 12)	1,758
	eld (Form PA-40, Line 13)	
	nded (Form PA-40, Line 30)	
	due) (Form PA-40, Line 28)	

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
 50877
 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.

2023

Name ADITYA JADEJA Social Security Number 664-65-0877

				Federal Form	s W-2		
# of W2	* NT / TX B L	TS	NRH	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
				XSUNT CORPORATION 26-0082917		57,280. 1,759.	PA

Pennsylvania W-2	Taxpayer 57,280.	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	1,759.	

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

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

Excess Reimbursements

*	Description	Employer's EIN	T/S	Amount
				·

	Taxpayer	Spouse
Excess Reimbursements		

*	Payer Name			Pa	yer EIN	T/S	Code	PA Taxable Comp.	PA Tax Withheld	Fed. Income
									_	
Ex Jui Dir Ex Ho Co Da Ios	vania Payment type: recutor fee ry duty pay rector's fee pert witness fee pororarium ovenant not to compete mages or settlement fo st wages, other than rsonal injury	I J L Dor M	J K M	Descri Emplo Distrib Distrib Distrib Distrib Descri Fiducia	yer spons ution from ution from ution from ution from be: ary fees fr income no	ored re IRA (1 Life Ir Charit Emplo	tiremer raditior surance able Gir oyee Sto	nt/pension/def nal or Roth)	erred compen Endowment C o Plan.	-
Misce Withh	Ilaneous Compensatio	n from	n Fo	rm 109	99MISC/1	099K/1	099NE	Тахр С	ayer	Spouse
	<u> </u>									
	1	Con	npe	nsati	on from	Feder	al For	ms 1099R		
*	Payer's EIN Payer's Name	T S	Fed #	РА Туре	Gro Distrib		E	Basis	PA Taxable	PA Tax Withheld
	·						-			
	·						-			
	·		—				-			
	Enter an 'X' if this incon						_			
N Ňo 1 PA 1 Un 2 Mil	vania Distribution typ o entry A school, state, or muni- nited Mine Workers pen litary pension S. Civil service retiremen nuity or Non-civil service	cipal e sion ent/dis ce disa	sabil abili	ity/anr	nuity	22 J1 J2 K2 K3	Tradi Tradi Non- Life i	itional or Roth itional or Roth qualified defe nsurance or e ibution from C	haritable Gift	⁻ 59.5 er 59.5 ation plan Annuities
1 An (in 1 Ea 2 Ro	cluding Qual Joint Surv rly distribution from a ro Ilover n eligible; plan is eligible	etirem	nent	plan	/)		ESO KSO	P: Taxable E	ted ESOP Stock D ted ESOP Stock D SOP within a 4 ESOP within	ock Dividend 401(k)
1 An (in 1 Ea 2 Ro 3 I'm Distr Distr	arly distribution from a re ollover	etirem e (no l ance, ans (s e Gift /	PA t PA t Ann see 7 Ann R (eli	plan ax) uity, E Fax He uities gible r	ndowmen Ip FAQ's etirement	M2 M3 M2 It Contri for more plans)	ESO KSO KSO racts or re info	P: Non-Alloca P: Taxable ES P: Nontaxable Taxp	ted ESOP Sto SOP within a 4 ESOP within	ock Dividend 401(k) a a 401(k) Spouse
1 An (in 1 Ea 2 Ro 3 I'm Distr Distr	Irly distribution from a rollover n eligible; plan is eligible ribution from Life Insura ineligible retirement pla ribution from Charitable npensation from Form 1	etirem e (no l ance, ans (s e Gift /	PA t PA t Ann see 7 Ann R (eli	plan ax) uity, E Fax He uities . gible r	ndowmen Ip FAQ's etirement	M2 M3 M4 It Contri for mol plans) 	E ESO KSO KSO racts or re info)	P: Non-Alloca P: Taxable ES P: Nontaxable Taxp	ted ESOP Sto SOP within a 4 ESOP within ayer	ock Dividend 401(k) a a 401(k) Spouse
1 An (ind 1 Ea 2 Ro 3 I'm Distri Distri Com With	Irly distribution from a rollover n eligible; plan is eligible ribution from Life Insura ineligible retirement pla ribution from Charitable npensation from Form 1	etirem e (no l ance, ans (s e Gift / 099R 	Ann Ann Ann (eli	plan ax) uity, E Tax He uities . gible r Tota	ndowmen Ilp FAQ's etirement	M2 M3 M4 It Contri for mol plans) 	e ESO KSO KSO racts or re info)	P: Non-Alloca P: Taxable ES P: Nontaxable Taxp	ayer	ock Dividend 401(k) s a 401(k) Spouse Spouse

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