### PA-40 - 2023

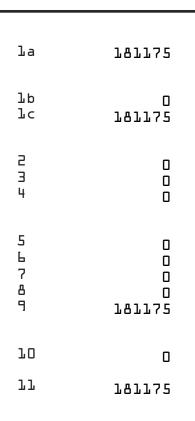
### Pennsylvania Income Tax Return

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

Extension. Amended Return. Ν N 701574317 018739837 Residency Status. R PA Resident/Nonresident/Part-Year Resident BHOGADI PAUL Occupation Single, Married/Filing Jointly, SOFTWARE D Married/Filing Separately, Final Return Occupation SAI SINDURI BUZINEZZ A Deceased RAYANI Taxpayer Date of Death Ν Spouse Date of Death 331 BRIAR RIDGE CIR Farmers. N РΑ ENOLA 17025 School District Name **SOUTH MIDDLET** 817-773-8819 57930 lа Gross Compensation. Do not include exempt income, such as combat zone pay and 181175 qualifying retirement benefits. See the instructions. 1<sub>b</sub> Unreimbursed Employee Business Expenses. lс 181175 Net Compensation. Subtract Line 1b from Line 1a. 2 Interest Income. Complete PA Schedule A if required. 2 3 3 Dividend and Capital Gains Distributions Income. Complete PA Schedule B if required. 0 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.
  See the instructions for additional information.
- 11 **Adjusted PA Taxable Income.** Subtract Line 10 from Line 9.

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Social Security Number

# 701574317 Name(s) PAUL BHOGADI

<ul> <li>PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).</li> <li>Total PA Tax Withheld. See the instructions.</li> </ul>		73 75		5562 5459	
Credit from your 2022 PA Income Tax return.  2023 Estimated Installment Payments. REV-459B included.  Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only)  Total Estimated Payments and Credits. Add Lines 14, 15, 16 and 17.	N	14 15 16 17 18		0 0 0 0	
Tax Forgiveness Credit. Submit PA Schedule SP.  19a Filing Status: 01 Unmarried or Separated 02 Married 03 Deceased  19b Dependents, Section II, Line 2, PA Schedule SP  20 Total Eligibility Income from Section III, Line 11, PA Schedule SP.  21 Tax Forgiveness Credit from Section IV, Line 16, PA Schedule SP.		19a 19b 20 21	00 00	0	
22 Resident Credit. Submit your <b>PA Schedule(s) G-L</b> and/or <b>RK-1.</b> 23 Total Other Credits. Submit your <b>PA Schedule OC</b> and/or <b>PA Schedule DC.</b> 24 <b>TOTAL PAYMENTS and CREDITS.</b> Add Lines 13, 18, 21, 22 and 23. 25 <b>USE TAX.</b> Due on internet, mail order or out-of-state purchases. See instructions. 26 <b>TAX DUE.</b> If the total of Line 12 and Line 25 is more than line 24, enter the difference Penalties and Interest. See the instructions. 27 Enter Code: 28 If including form REV-1630/REV-1630A, mark the box.		22 23 24 25 26 27		0 2000 7459 0 0	
<ul> <li>TOTAL PAYMENT DUE. See the instructions.</li> <li>OVERPAYMENT. If Line 24 is more than the total of Line 12, Line 25 and Line 27, the difference here.</li> <li>The total of Lines 30 through 36 must equal Line 29.</li> </ul>	, enter	28 29		0 1897	
	REFUND	37 30		1897 O	
Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line. Enter the organization code and donation amount. See instruction Refund donation line.	ons. ons.	32 33 34 35 36			
Signature(s). Under penalties of perjury, I (we) declare that I (we) have examined this return, including all accompanying schedules and statements, and to the best of my (our) belief, they are true, correct, and complete.					
Your Signature Spouse's Signature, if filing jointly  Preparer's Name and Telephone Number  SYAM PRIYA RAM SAGAR GUPTA  DATE  DATE	E-File Op Firm FEIN		N		

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P02082703

Preparer's PTIN

### **PA SCHEDULE E**

Rents and Royalty Income (Loss)

			PA-40 E (EX) 03-23 (I) PA Department of Revenue 2023			OFFICIAL USE ONLY
			axpayer filing this schedule		Social Security 701-57	Number (shown first) or EIN
Sales	s Tax L	icer	nse Number (if applicable). See the instructions.	Are rental payments ma	de by lessees through a third	party broker? Yes No
of o	il, gas	ar	ructions. Report the income and expenses for the use of your per- nd other minerals from your property, and the use of your pater nerals from your property or producing products from your patent	its and copyrights. Note: I	f you are in the busine	
S	ECT	0	PROPERTY DESCRIPTION			
Enter	r the typ	oe a	nd complete address of each rental real estate property, and/or each source of roy	yalty income. If more than three pr	operties, submit additional so	hedules as needed.
	Туре		Description of Property For Profit Prope	erty Complete Addr	ess (street, city, state ar	d ZIP code)
Α			YES			
	3		NO _	, India		
В			YES			
			NO O			
С			YES			
Prop	perty	typ	NO NO  e: 1. Single family residence 3. Vacation/short-term rental 5. La	and 7. Self-rental		
0	FOT	-	•	oyalties 8. Other, desc	ribe:	
5	ECT	O	NII INCOME & EXPENSES			
			11 (T/Q/)	Property A	Property B	Property C
			Identify the property from Section I and indicate ownership (T/S/J)	T S J		J O T O S O J
			Is the property rental location in PA?  Is the property rented for any period less than 30 days?	YES NO	YES NO	YES NO
				612	O YES O NO	TES NO
Inco	me:		Rent received	012		
			Royalties received 2. Advertising 3.			
⊏xp	enses		Automobile and travel 4.			
			Cleaning and maintenance 5.	2,413		
			Commissions 6.	27113		
			Insurance 7.			
			Legal and professional fees			
			Management fees 9.	1,825		
			Mortgage interest	,		
			Other interest			
		12.	Repairs	4,231		
		13.	Supplies	4,522		
			Taxes - not based on net income			
		15.	Utilities	4,103		
		16.	Depreciation expense - See the instructions	5,297		
		17.	Other expenses (itemize):			
		18	Total Expenses - Add Lines 3 through 17	22,391		
Inco			Income – Subtract Line 18 from Line 1 or 2	22,371		
			Loss – Subtract Line 1 or 2 from Line 18. (fill in the oval, if a net loss) 20.	O		
			Net Income or Loss - Total Lines 19 and 20 for short-term rentals. See the in	l l	oval, if a net loss) 2	1.
			Net Income or Loss - Total Lines 19 and 20 for non short-term rentals. See the Rent or royalty income (loss) from PAS corporation(s) and partnerships from your	ne instructions (fill in the	oval, if a net loss) 2	2. 0
			PA Schedule(s) RK-1 or NRK-1.	•	oval, if a net loss) 2	3.
		24.	Net Rent and Royalty Income (Loss). Add Lines 22 and 23. If submitting more the total all Line 22 and 23 amounts and include on Line 6 of your PA-40.	nan one schedule, (fill in the REV 02/24/24 PRO	oval, if a net loss) 2	4. 0



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## PA SCHEDULE OC - 2023 Other Credits

PA-40/PA-41 OC (04–23)
PA Department of Revenue

IMPORTANT: This Schedule is for tax year 2023 only. If you are filing this form for a different tax year, please refer to the department's website.

PAUL BHOGADI

701574317

If you received more than one type of other (restricted) credit as an owner of a pass-through entity, that entity should have provided you with a breakdown by credit type of the amounts of credits you are eligible to claim. Enter the amount from the breakdown statement on the appropriate lines of this schedule. If all tax credits listed on this schedule are passed through to you from pass-through entities and the amount on that schedule does not include a resident credit from another state, the total on Line 24 should equal the sum of the amounts of Total Other Credits from Line 9 of your RK-1(s) or Line 7 of your NRK-1(s).

	Credit Description Code	Awardee Tax ID Number		
<ol> <li>PA Employment Incentive Payments Credit.</li> <li>PA Job Creation Tax Credit.</li> <li>PA Research and Development Tax Credit.</li> <li>PA Film Production Tax Credit.</li> <li>PA Keystone Innovation Zone Tax Credit</li> <li>PA Resource Enhancement and Protection Tax Credit</li> <li>PA Neighborhood Assistance Program Tax Credit</li> <li>PA Opportunity Scholarship Tax Credit</li> <li>Keystone Special Development Zone Tax Credit</li> <li>Keystone Special Development Zone Tax Credit</li> <li>PA Organ and Bone Marrow Donor Tax Credit</li> <li>PA Coal Refuse Energy and Reclamation Tax Credit</li> <li>Mixed-Use Development Tax Credit</li> <li>Entertainment Economic Enhancement Program Tax Credit</li> <li>Video Game Production Tax Credit</li> <li>Waterfront Development Tax Credit</li> <li>Manufacturing and Investment Tax Credit</li> <li>PA Resource Manufacturing Tax Credit</li> <li>Airport Land Development Program</li> <li>Housing Tax Credit</li> <li>Other restricted credits not listed above. Enter type:</li> <li>Total PA Other Credits. Add Lines 1 through 23. Enter the total here</li> </ol>	CY		1 2 3 4 5 6 7 8 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5000
and on Line 23 of Form PA-40 or Line 16 of Form PA-41.				

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### PENNSYLVANIA E-FILE SIGNATURE AUTHORIZATION

2023

<b>PA-8879</b> (EX) 03-23 (I)		2023
Declaration Control Number/Submission ID	·	
Primary Taxpayer's Name PAUL BHOGADI	Social Security Number 701-57-4317	
Secondary Taxpayer's Name SAI SINDURI RAYANI	Social Security Number 018-73-9837	
SECTION I TAX RETURN INFORMATION – TAX YEAR END	DING DEC. 31, 2023 (whole dollars only)	
1. Adjusted PA taxable income (Form PA-40, Line 11)		181,175
2. PA tax liability (Form PA-40, Line 12)		5,562
3. Total PA tax withheld (Form PA-40, Line 13)		5,459
4. Amount to be refunded (Form PA-40, Line 30)		1,897
5. Total payment (tax due) (Form PA-40, Line 28)	5. <u> </u>	
SECTION II DECLARATION AND SIGNATURE AUTHORIZA	ATION OF TAXPAYER	
of my 2023 PA Tax Return (Form PA-40), and to the best of my knowledge are system and software to prepare and transmit my return electronically, I consens software and to the transmission of my tax return electronically to the PA Depart the amounts shown on the copy of my electronic income tax return. If applicate agents to initiate an electronic funds withdrawal (direct debit) entry to my designstitution to debit the entry to my account and the financial institutions involved information necessary to answer inquiries and resolve issues related to payment the United States or one of its territories. I have selected a personal identifical applicable, my electronic funds withdrawal consent.	nt to the disclosure of all information pertaining the rtment of Revenue. I further declare that the amble, I authorize the PA Department of Revenue ignated account for Pennsylvania taxes owed by the processing of my electronic payment of ent. I certify the funds for this withdraw are origin	to my use of the system and tounts in Section I above are and its designated financial I also authorize my financial taxes to receive confidential ating from an account within
PRIMARY TAXPAYER'S PERSONAL IDENTIFICATION NUMBER (PIN) Mari	k one oval only.	
(X) I authorize GLOBAL TAXES LLC to ent	ter my PIN74317_ as my signa	ature on my tax year 2023
electronically filed income tax return.	,	
I will enter my PIN as my signature on my tax year 2023 electronically file	iled income tax return.	
Signature		Date
SECONDARY TAXPAYER'S PIN Mark one oval only.		
CX I authorize GLOBAL TAXES LLC to enterelectronically filed income tax return.	ter my PIN 39837_ as my signa	ature on my tax year 2023
I will enter my PIN as my signature on my tax year 2023 electronically file	iled income tax return.	
Signature		Date
SECTION III CERTIFICATION AND AUTHENTICATION – PR	ACTITIONER PIN PROGRAM PARTICIPAN	NTS ONLY
ERO'S EFIN/PIN Enter your six-digit EFIN followed by your five-digit self-selection	cted PIN222496_ / _08271	
As a participant in the Practitioner PIN Program, I certify the above numeric entincome tax return for the taxpayer(s) indicated above. I confirm I am participa 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
PAUL BHOGADI
Social Security Number
701-57-4317

## Federal Forms W-2

# of W2	* NT / TXBL	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
3		S S T		PENN STATE HEALTH 47-3769205 GLOBALGATE IT SOLUTIONS LLC 26-1719753 Domino Technologies,Inc. 25-1796494	59,497. 59,497. 35,000. 35,000. 74,800. 80,000.	62,795. 1,928. 35,000. 1,075. 80,000. 2,456.	PA PA PA

Pennsylvania W-2	<b>Taxpayer</b> 80,000.	<b>Spouse</b> 97,795.
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	2,456.	3,003.

### 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
1 3 —		S T 	47-3769205 25-1796494		62,795.	1,005.	PA PA

	Taxpayer	Spouse
Pennsylvania Local W-2	80,000.	62,795.
Federal Form 4137, Unreported Tips, line 6		
Noncash tips		
Withholding	1,280.	1,005.

#### **Excess Reimbursements**

*	Description	Employer's EIN	T/S	Amount

	Taxpayer	Spouse
Excess Reimbursements		

701-57-4317 PAUL BHOGADI Page 2 Miscellaneous Compensation from Federal Forms 1099MISC, 1099K, 1099NEC, and other statements PA Taxable PA Tax Fed. Payer Name Payer EIN T/S Code Withheld Income Comp. LIFE CENTER MINISTRIES INTL 23-2072673 S Η 3,380. 3,380. Pennsylvania Payment type: Executor fee Other nonemployee compensation. В Jury duty pay Describe: LIFE CENTER MINISTRIES INTL C Director's fee ı Employer sponsored retirement/pension/deferred compensation plan Expert witness fee Distribution from IRA (Traditional or Roth) Distribution from Life Insurance, Annuity or Endowment Contracts Ε Honorarium Covenant not to compete Distribution from Charitable Gift Annuities Damages or settlement for Distribution from Employee Stock Ownership Plan. М lost wages, other than Describe: personal injury Fiduciary fees from a trust Other income not listed above Describe: **Taxpayer Spouse** Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC. 3,380. Compensation from Federal Forms 1099R Payer's EIN Gross PA Tax Payer's Name S # Distribution Basis PA Taxable Withheld Type \* Enter an 'X' if this income is Not subject to Pennsylvania tax - PA Part-Year and Nonresidents Only. Pennsylvania Distribution type: I'm not eligible yet; plan is eligible in PATraditional or Roth IRA; I'm over 59.5 N No entry **I31** PA school, state, or municipal employee plan **I11** United Mine Workers pension J2 Traditional or Roth IRA: I'm under 59.5 **I32** Military pension **K2** Non-qualified deferred compensation plan 133 U.S. Civil service retirement/disability/annuity K3 Life insurance or endowment Distribution from Charitable Gift Annuities Annuity or Non-civil service disability (including Qual Joint Survivorship Annuity) ESOP: Allocated ESOP Stock Dividend М1 M2 ESOP: Non-Allocated ESOP Stock DividendM3 KSOP: Taxable ESOP within a 401(k) Early distribution from a retirement plan **I21 I12** Rollover M4 KSOP: Nontaxable ESOP within a 401(k) **I13** I'm eligible; plan is eligible (no PA tax) **Taxpayer Spouse** Distribution from Life Insurance, Annuity, Endowment Contracts or. . ineligible retirement plans (see Tax Help FAQ's for more info) . . Compensation from Form 1099R (eligible retirement plans) . . . . . **Total Gross Compensation** 

	Taxpayer	Spouse
Total gross compensation to Form PA-40 line 1a	80,000.	101,175.
Withholding to Form PA-40 line 13	2,456.	3,003.
		_

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