

MAKE CHECK PAYABLE TO: PA DEPARTMENT OF REVENUE  
 MAIL TO:  
 PA DEPARTMENT OF REVENUE  
 BUREAU OF IMAGING AND DOCUMENT MANAGEMENT  
 PO BOX 280403  
 HARRISBURG, PA 17128-0403

2024 DECLARATION OF ESTIMATED INCOME TAX FOR INDIVIDUAL, FIDUCIARY OR PARTNERSHIP

DUE DATE 04-15-24  
 FISCAL FILER ONLY

364-39-6495 PA 869-86-0597

DECLARATION OF EST TAX PAYMENT AMOUNT

PATNAPU  
 SUDHAKAR  
 ANUSHA LAKSH  
 KALIKIVAYA

\$ 308.00 \$ 77.00

33 EDRIS LN  
 MECHANICSBURG  
 PA  
 17050 757-469-7656

DEPARTMENT USE ONLY

Make check or money order  
 payable to the Pennsylvania  
 Department of Revenue

2402518563

2024 ESTIMATED 2024 ESTIMATED 2024 ESTIMATED  
 PA ESTIMATED PAYMENT VOUCHER

MAKE CHECK PAYABLE TO: PA DEPARTMENT OF REVENUE  
MAIL TO:  
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BUREAU OF IMAGING AND DOCUMENT MANAGEMENT  
PO BOX 280403  
HARRISBURG, PA 17128-0403

2024 DECLARATION OF ESTIMATED INCOME TAX FOR INDIVIDUAL, FIDUCIARY OR PARTNERSHIP

DUE DATE 06-17-24  
FISCAL FILER ONLY

364-39-6495 PA 869-86-0597

DECLARATION OF EST TAX PAYMENT AMOUNT

PATNAPU  
SUDHAKAR  
ANUSHA LAKSH  
KALIKIVAYA

\$ 308.00 \$ 77.00

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MECHANICSBURG  
PA  
17050 757-469-7656

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2024 ESTIMATED 2024 ESTIMATED 2024 ESTIMATED  
PA ESTIMATED PAYMENT VOUCHER

MAKE CHECK PAYABLE TO: PA DEPARTMENT OF REVENUE  
MAIL TO:  
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BUREAU OF IMAGING AND DOCUMENT MANAGEMENT  
PO BOX 280403  
HARRISBURG, PA 17128-0403

2024 DECLARATION OF ESTIMATED INCOME TAX FOR INDIVIDUAL, FIDUCIARY OR PARTNERSHIP

DUE DATE 09-16-24  
FISCAL FILER ONLY

364-39-6495 PA 869-86-0597

DECLARATION OF EST TAX PAYMENT AMOUNT

PATNAPU  
SUDHAKAR  
ANUSHA LAKSH  
KALIKIVAYA

\$ 308.00 \$ 77.00

33 EDRIS LN  
MECHANICSBURG  
PA  
17050 757-469-7656

DEPARTMENT USE ONLY

Make check or money order  
payable to the Pennsylvania  
Department of Revenue

2402518563

2024 ESTIMATED 2024 ESTIMATED 2024 ESTIMATED  
PA ESTIMATED PAYMENT VOUCHER

MAKE CHECK PAYABLE TO: PA DEPARTMENT OF REVENUE  
MAIL TO:  
PA DEPARTMENT OF REVENUE  
BUREAU OF IMAGING AND DOCUMENT MANAGEMENT  
PO BOX 280403  
HARRISBURG, PA 17128-0403

2024 DECLARATION OF ESTIMATED INCOME TAX FOR INDIVIDUAL, FIDUCIARY OR PARTNERSHIP

DUE DATE 01-15-25  
FISCAL FILER ONLY

364-39-6495 PA 869-86-0597

DECLARATION OF EST TAX PAYMENT AMOUNT

PATNAPU  
SUDHAKAR  
ANUSHA LAKSH  
KALIKIVAYA

\$ 308.00 \$ 77.00

33 EDRIS LN  
MECHANICSBURG  
PA  
17050 757-469-7656

DEPARTMENT USE ONLY

Make check or money order  
payable to the Pennsylvania  
Department of Revenue

2402518563

2024 ESTIMATED 2024 ESTIMATED 2024 ESTIMATED  
PA ESTIMATED PAYMENT VOUCHER

MAKE CHECK PAYABLE TO:  
PENNSYLVANIA DEPARTMENT OF REVENUE  
MAIL TO:

PENNSYLVANIA DEPARTMENT OF REVENUE  
PAYMENT ENCLOSED  
1 REVENUE PLACE  
HARRISBURG, PA 17129-0001

NOTE:  
WRITE THE LAST FOUR DIGITS OF YOUR SSN (AND SPOUSE'S SSN IF FILING JOINT),  
'2023 PA-40 V' AND DAYTIME PHONE NUMBER ON YOUR CHECK.

2023 PA-40 V PA PAYMENT VOUCHER

1555  
REV 02/01/24 PRO

364-39-6495

PA

869-86-0597

2300917792

PAYMENT AMOUNT

PATNAPU  
SUDHAKAR  
KALIKIVAYA  
ANUSHA LAKSH

757-469-7656

₹

306.00

33 EDRIS LN  
MECHANICSBURG  
PA  
17050

DEPARTMENT USE ONLY

Make check or money order  
payable to the Pennsylvania  
Department of Revenue

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

364396495 869860597
PATNAPU
SUDHAKAR Occupation SOFTWARE D
ANUSHA LAKSHMI Occupation SOFTWARE D
KALIKIVAYA
33 EDRIS LN
MECHANICSBURG PA 17050
757-469-7656 21650

N Extension. N Amended Return.
R Residency Status.
PA Resident/Nonresident/Part-Year Resident
from to
J Single, Married/Filing Jointly,
Married/Filing Separately, Final Return
N Deceased
N Taxpayer Date of Death
N Spouse Date of Death
N Farmers.
School District Name MECHANICSBURG

- 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 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.
See the instructions for additional information.
11 Adjusted PA Taxable Income. Subtract Line 10 from Line 9.

Table with 2 columns: Line Number, Amount. Rows 1a-11 with values: 1a: 180765, 1b: 0, 1c: 180765, 2: 0, 3: 0, 4: 0, 5: 0, 6: 0, 7: 0, 8: 0, 9: 180765, 10: 0, 11: 180765.



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[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

PA-40 - 2023

Social Security Number

364396495

Name(s) SUDHAKAR PATNAPU

12 PA Tax Liability. Multiply Line 11 by 3.07 percent (0.0307).

13 Total PA Tax Withheld. See the instructions.

14 Credit from your 2022 PA Income Tax return.

15 2023 Estimated Installment Payments. REV-459B included.

16 2023 Extension Payment.

17 Nonresident Tax Withheld from your PA Schedule(s) NRK-1. (Nonresidents only)

18 Total Estimated Payments and Credits. Add Lines 14, 15, 16 and 17.

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.

22 Resident Credit. Submit your PA Schedule(s) G-L and/or RK-1.

23 Total Other Credits. Submit your PA Schedule OC and/or PA Schedule DC.

24 TOTAL PAYMENTS and CREDITS. Add Lines 13, 18, 21, 22 and 23.

25 USE TAX. Due on internet, mail order or out-of-state purchases. See instructions.

26 TAX DUE. If the total of Line 12 and Line 25 is more than line 24, enter the difference here.

27 Penalties and Interest. See the instructions. Enter Code:

If including form REV-1630/REV-1630A, mark the box.

28 TOTAL PAYMENT DUE. See the instructions.

29 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 29.

30 Refund - Amount of Line 29 you want as a check mailed to you.

31 Credit - Amount of Line 29 you want as a credit to your 2024 estimated account.

32 Refund donation line. Enter the organization code and donation amount. See instructions.

33 Refund donation line. Enter the organization code and donation amount. See instructions.

34 Refund donation line. Enter the organization code and donation amount. See instructions.

35 Refund donation line. Enter the organization code and donation amount. See instructions.

36 Refund donation line. Enter the organization code and donation amount. See instructions.

12		5549
13		5243
14		0
15		0
16		0
17		0
18		0
19a	00	
19b	00	
20		0
21		0
22		0
23		0
24		5243
25		0
26		306
27		0
28		306
29		0
30		0
31		0
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 TALLAM 6789659522	Date 022624

E-File Opt Out

N

Firm FEIN

843171965

Preparer's PTIN

P02082703



**PA SCHEDULE E**  
Rents and Royalty Income (Loss)

2301410029

PA-40 E (EX) 03-23 (I)  
PA Department of Revenue

**2023**

OFFICIAL USE ONLY

Name of the taxpayer filing this schedule: **SUDHAKAR PATNAPU** Social Security Number (shown first) or EIN: **364-39-6495**

Sales Tax License Number (if applicable). See the instructions. Are rental payments made by lessees through a third party broker?  Yes  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.

**SECTION I PROPERTY DESCRIPTION**

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.

Type	Description of Property	For Profit Property	Complete Address (street, city, state and ZIP code)
A	3 2-261/1 SUNDARAI AH ROAD MULAGUN	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SINGARAYAKONDA PRAKASAM, ANDHRA PRADESH, 523101, India
B		YES <input type="checkbox"/> NO <input type="checkbox"/>	
C		YES <input type="checkbox"/> NO <input type="checkbox"/>	

**Property type:** 1. Single family residence 3. Vacation/short-term rental 5. Land 7. Self-rental  
2. Multi-family residence 4. Commercial 6. Royalties 8. Other, describe: \_\_\_\_\_

**SECTION II INCOME & EXPENSES**

	Property A	Property B	Property C
<b>Line a:</b> Identify the property from Section I and indicate ownership (T/S/J)	<input checked="" type="checkbox"/> T <input type="checkbox"/> S <input type="checkbox"/> J	<input type="checkbox"/> T <input type="checkbox"/> S <input type="checkbox"/> J	<input type="checkbox"/> T <input type="checkbox"/> S <input type="checkbox"/> J
<b>Line b:</b> Is the property rental location in PA?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Line c:</b> Is the property rented for any period less than 30 days?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Income:</b> 1. Rent received	890		
2. Royalties received			
<b>Expenses:</b> 3. Advertising			
4. Automobile and travel			
5. Cleaning and maintenance	2,879		
6. Commissions			
7. Insurance			
8. Legal and professional fees			
9. Management fees	2,768		
10. Mortgage interest			
11. Other interest			
12. Repairs	4,197		
13. Supplies	4,099		
14. Taxes - not based on net income			
15. Utilities	4,388		
16. Depreciation expense - See the instructions			
17. Other expenses (itemize):			
18. Total Expenses - Add Lines 3 through 17	18,331		
<b>Income or Loss:</b> 19. Income – Subtract Line 18 from Line 1 or 2			
20. Loss – Subtract Line 1 or 2 from Line 18. (fill in the oval, if a net loss)	<input type="checkbox"/> 0 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Net Income or Loss - Total Lines 19 and 20 for short-term rentals. See the instructions. (fill in the oval, if a net loss)			
22. Net Income or Loss - Total Lines 19 and 20 for non short-term rentals. See the instructions. (fill in the oval, if a net loss)			0
23. Rent or royalty income (loss) from PA S corporation(s) and partnerships from your PA Schedule(s) RK-1 or NRK-1. (fill in the oval, if a net loss)			
24. Net Rent and Royalty Income (Loss). Add Lines 22 and 23. If submitting more than one schedule, total all Line 22 and 23 amounts and include on Line 6 of your PA-40. (fill in the oval, if a net loss)			0

REV 02/01/24 PRO

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2301410029

2301410029





PENNSYLVANIA E-FILE SIGNATURE AUTHORIZATION

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

2023

Declaration Control Number/Submission ID

Table with 2 columns: Taxpayer Name and Social Security Number. Rows for Primary Taxpayer (SUDHAKAR PATNAPU) and Secondary Taxpayer (ANUSHA LAKSHMI KALIKIVAYA).

SECTION I TAX RETURN INFORMATION – TAX YEAR ENDING DEC. 31, 2023 (whole dollars only)

Table with 2 columns: Description and Amount. Rows for Adjusted PA taxable income, PA tax liability, Total PA tax withheld, Amount to be refunded, and Total payment (tax due).

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.

PRIMARY TAXPAYER'S PERSONAL IDENTIFICATION NUMBER (PIN) Mark one oval only.
[X] I authorize GLOBAL TAXES LLC to enter my PIN 96495 as my signature on my tax year 2023 electronically filed income tax return.

Signature \_\_\_\_\_ Date \_\_\_\_\_

SECONDARY TAXPAYER'S PIN Mark one oval only.
[X] I authorize GLOBAL TAXES LLC to enter my PIN 60597 as my signature on my tax year 2023 electronically filed income tax return.

Signature \_\_\_\_\_ 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.

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  
SUDHAKAR PATNAPU

Social Security Number  
364-39-6495

**Federal Forms 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 withheld from box 17	ST ID
1		T		AKVARR INC 26-1173693	101,509. 97,876.	101,509. 2,810.	PA
2		S		PANNSYLVANIA TREASURY 23-6003133	74,107. 79,256.	79,256. 2,433.	PA

	Taxpayer	Spouse
Pennsylvania W-2 . . . . .	101,509.	79,256.
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 . . . . .	2,810.	2,433.

**Federal Forms W-2: Local Tax**

# of W2	* N T / T X B L	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		T	26-1173693	210501	101,509.	1,592.	PA
2		S	23-6003133	210404	79,256.	1,347.	PA

	Taxpayer	Spouse
Pennsylvania Local W-2 . . . . .	101,509.	79,256.
Federal Form 4137, Unreported Tips, line 6 . . . . .		
Noncash tips . . . . .		
Withholding . . . . .	1,592.	1,347.

**Excess Reimbursements**

*	Description	Employer's EIN	T/S	Amount

	Taxpayer	Spouse
Excess Reimbursements . . . . .		

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

*	Payer Name	Payer EIN	T/S	Code	PA Taxable Comp.	PA Tax Withheld	Fed. Income
<input type="checkbox"/>							
<input type="checkbox"/>							
<input type="checkbox"/>							

**Pennsylvania Payment type:**

- |   |  |
|---|--|
| <b>A</b> Executor fee   | <b>H</b> Other nonemployee compensation.<br>Describe: _____                  |
| <b>B</b> Jury duty pay  | <b>I</b> Employer sponsored retirement/pension/deferred compensation plan    |
| <b>C</b> Director's fee   | <b>J</b> Distribution from IRA (Traditional or Roth)                         |
| <b>D</b> Expert witness fee   | <b>K</b> Distribution from Life Insurance, Annuity or Endowment Contracts    |
| <b>E</b> Honorarium   | <b>L</b> Distribution from Charitable Gift Annuities                         |
| <b>F</b> Covenant not to compete  | <b>M</b> Distribution from Employee Stock Ownership Plan.<br>Describe: _____ |
| <b>G</b> Damages or settlement for lost wages, other than personal injury | <b>N</b> Fiduciary fees from a trust   |
|   | <b>O</b> Other income not listed above<br>Describe: _____                    |

	<b>Taxpayer</b>	<b>Spouse</b>
Miscellaneous Compensation from Form 1099MISC/1099K/1099NEC.	_____	_____
Withholding . . . . .	_____	_____

**Compensation from Federal Forms 1099R**

*	Payer's EIN Payer's Name	T S	Fed #	PA Type	Gross Distribution	Basis	PA Taxable	PA Tax Withheld
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								

\* Enter an 'X' if this income is **Not** subject to Pennsylvania tax - PA Part-Year and Nonresidents Only.

**Pennsylvania Distribution type:**

- |   |   |
|---|---|
| <b>N</b> No entry   | <b>I22</b> I'm not eligible yet; plan is eligible in PA |
| <b>I31</b> PA school, state, or municipal employee plan                                       | <b>J1</b> Traditional or Roth IRA; I'm over 59.5        |
| <b>I11</b> United Mine Workers pension  | <b>J2</b> Traditional or Roth IRA; I'm under 59.5       |
| <b>I32</b> Military pension   | <b>K2</b> Non-qualified deferred compensation plan      |
| <b>I33</b> U.S. Civil service retirement/disability/annuity                                   | <b>K3</b> Life insurance or endowment                   |
| <b>K1</b> Annuity or Non-civil service disability (including Qual Joint Survivorship Annuity) | <b>L</b> Distribution from Charitable Gift Annuities    |
| <b>I21</b> Early distribution from a retirement plan  | <b>M1</b> ESOP: Allocated ESOP Stock Dividend           |
| <b>I12</b> Rollover   | <b>M2</b> ESOP: Non-Allocated ESOP Stock Dividend       |
| <b>I13</b> I'm eligible; plan is eligible (no PA tax)   | <b>M3</b> KSOP: Taxable ESOP within a 401(k)            |
|   | <b>M4</b> KSOP: Nontaxable ESOP within a 401(k)         |

	<b>Taxpayer</b>	<b>Spouse</b>
Distribution from Life Insurance, Annuity, Endowment Contracts or . . . . . ineligible retirement plans (see Tax Help FAQ's for more info) . . . . .	_____	_____
Distribution from Charitable Gift Annuities . . . . .	_____	_____
Compensation from Form 1099R (eligible retirement plans) . . . . .	_____	_____
Withholding . . . . .	_____	_____

**Total Gross Compensation**

	<b>Taxpayer</b>	<b>Spouse</b>
Total gross compensation to Form PA-40 line 1a . . . . .	101,509.	79,256.
Total Schedule NRH gross compensation to PA-40, line 12 . . . . .	_____	_____
Withholding to Form PA-40 line 13 . . . . .	2,810.	2,433.

Total gross compensation to Form PA-40 line 1a . . . . .	180,765.
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\* Enter an 'X' if this income is **Not** subject to Pennsylvania tax.