

PA-40 - 2000

(09-00)

0000110023

Pennsylvania Income Tax Return (I)

PA Department of Revenue, Harrisburg, PA 17129-0006

OFFICIAL USE ONLY

PLEASE PRINT IN BLACK INK. ENTER ONE LETTER OR NUMBER IN EACH BOX. FILL IN OVALS COMPLETELY.

Your Social Security Number

Spouse's Social Security Number

Grid for Social Security Number

Grid for Spouse's Social Security Number

Last Name

Grid for Last Name

Your First Name

MI

Grid for Your First Name

MI box

Spouse's First Name

MI

Grid for Spouse's First Name

MI box

Spouse's Last Name - Only if different from Last Name above

Grid for Spouse's Last Name

First line of address - P.O. Box; Apartment Number; Suite; RR No. - if applicable

Grid for First line of address

Second line of address - Street Address

Grid for Second line of address

City or Post Office

State

ZIP Code

Grid for City or Post Office

Grid for State

Grid for ZIP Code

School Code

Daytime Telephone Number

Grid for School Code

Grid for Daytime Telephone Number

OVERSEAS MAIL - Use full return address to include city, country and Zip Codes in local formats.

Extension. See instructions.

Amended Return. Fill in this oval if you are amending your 2000 PA return.

Fiscal Year Filers. Fill in this oval. FY beginning ___/___/00 & ending ___/___/00

Residency Status. Fill in only one oval.

R Resident

N Nonresident

P Part-Year Resident from ___/___/00 to ___/___/00.

Type Filer. Fill in only one oval.

S Single

J Married, Filing Jointly

M Married, Filing Separately

F Final Return. Indicate reason:

D Deceased. Date of death ___/___/00

Identification Label Change.

Fill in this oval if the label you received with this booklet is not completely correct, or if you did not file a 1999 PA tax return. Do not make corrections on the label -- DISCARD IT.

Name of school district where you lived on 12/31/00.

County where you lived on 12/31/00.

Municipality where you lived on 12/31/00.

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Do not use cents. Enter whole dollars.

1a. Gross Compensation, from PA Schedule W-2S, or your Form(s) W-2, or other statements.

1b. Unreimbursed Employee Business Expenses, from PA Schedule UE.

1c. Net Compensation. Subtract Line 1b from Line 1a.

2. Interest Income. Complete and enclose PA Schedule A, if over \$2,500.

3. Dividend Income. Complete and enclose PA Schedule B, if over \$2,500.

4. Net Income or Loss from the Operation of a Business, Profession, or Farm.

LOSS

5. Net Gain or Loss from the Sale, Exchange, or Disposition of Property.

LOSS

6. Net Income or Loss from Rents, Royalties, Patents, or Copyrights.

LOSS

7. Estate or Trust Income. Complete and enclose PA Schedule J.

8. Gambling and Lottery Winnings.

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. Contributions To Your Medical Savings Account. See the instructions.

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

12. PA Tax Liability. Multiply Line 11 by 2.8% (0.028). Also enter on Line 13, Side 2.

Table with 12 rows and 10 columns for entering tax amounts.

Side 1

OFFICIAL USE ONLY

EC

EC box

FC

FC box

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PA-40 - 2000 (I)

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Social Security Number

Grid for Social Security Number

Your Name: _____

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- 13. PA Tax Liability. Enter your tax liability from Line 12 on Side 1.
14. Total PA Tax Withheld, from PA Schedule W-2S, or your Form(s) W-2, or other statements.
15. Credit from your 1999 PA Income Tax Return.
16. 2000 Estimated Installment Payments.
17. 2000 Extension Payment.
18. Nonresident Tax Withheld on your PA Schedule(s) NRK-1.
19. Total Estimated Payments and Credits. Add Lines 15, 16, 17, and 18.

Grid for tax liability and payments (lines 13-19)

Tax Forgiveness Credit. Complete Lines 20a, 20b, 21, and 22. Read instructions.

20a. Filing Status: Unmarried or Separated, Married, Deceased

20b Dependents, Part B, Line 2, PA Schedule SP.

- 21. Total Eligibility Income from Part C, Line 11, PA Schedule SP.
22. Tax Forgiveness Credit from Part D, Line 16, PA Schedule SP.
23. Total Credit for Taxes Paid to Other States or Countries. Enclose your PA Schedule G or RK-1.
24. PA Employment Incentive Payments Credit. Enclose your PA Schedule W, RK-1 or NRK-1.
25. PA Jobs Creation Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1.
26. PA Waste Tire Recycling Investment Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1.
27. PA Research and Development Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1.
28. TOTAL PAYMENTS and CREDITS. Add Lines 14, 19, and 22 through 27.

Grid for tax forgiveness credit and payments (lines 20b-28)

29. TAX DUE. If Line 13 is more than Line 28, enter the difference here.

30. OVERPAYMENT. If Line 28 is more than Line 13, enter the difference here.

The total of Lines 31 through 37 must equal Line 30.

- 31. Refund -- Amount of Line 30 you want as a check mailed to you.
32. Credit -- Amount of Line 30 you want as a credit to your 2001 estimated tax account.
33. Donation -- Amount of Line 30 you want to donate to the Wild Resource Conservation Fund.
34. Donation -- Amount of Line 30 you want to donate to the United States Olympic Committee, PA Division.
35. Donation -- Amount of Line 30 you want to donate to the Organ Donor Awareness Trust Fund.
36. Donation -- Amount of Line 30 you want to donate to the Korea/Vietnam Memorial Inc.
37. Donation -- Amount of Line 30 you want to donate to the Breast and Cervical Cancer Research Fund.

Grid for tax due, overpayment, and donations (lines 29-37)

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.

Signature and occupation fields for taxpayer, spouse, and preparer

Signature of the Preparer (Optional):

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PLEASE DO NOT CALL ABOUT YOUR REFUND UNTIL 8 WEEKS AFTER YOU FILE.

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