

PA-40 - 2000

(09-00)

0000110023

Pennsylvania Income Tax Return

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

Extension. See instructions.

Last Name

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

Your First Name

MI

Fiscal Year Filers. Fill in this oval.

FY beginning & ending

Spouse's First Name

MI

Residency Status. Fill in only one oval.

R Resident

N Nonresident

P Part-Year Resident from to

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

Type Filer. Fill in only one oval.

S Single

J Married, Filing Jointly

M Married, Filing Separately

F Final Return. Indicate reason:

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

Second line of address - Street Address

City or Post Office

State

ZIP Code

D Deceased. Date of death→

School Code

Daytime Telephone Number

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.

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

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

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

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

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

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

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

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

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

8. Gambling and Lottery Winnings. 8.

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. 9.

10. Contributions To Your Medical Savings Account. See the instructions. 10.

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

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

Side 1

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13.	PA Tax Liability. Enter your tax liability from Line 12 on Side 1.	13.
14.	Total PA Tax Withheld, from PA Schedule W-2S, or your Form(s) W-2, or other statements.	14.
15.	Credit from your 1999 PA Income Tax Return.	15.
16.	2000 Estimated Installment Payments.	16.
17.	2000 Extension Payment.	17.
18.	Nonresident Tax Withheld on your PA Schedule(s) NRK-1.	18.
19.	Total Estimated Payments and Credits. Add Lines 15, 16, 17, and 18.	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.
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21.	Total Eligibility Income from Part C, Line 11, PA Schedule SP.	
22.	Tax Forgiveness Credit from Part D, Line 16, PA Schedule SP.	22.
23.	Total Credit for Taxes Paid to Other States or Countries. Enclose your PA Schedule G or RK-1. ...	23.
24.	PA Employment Incentive Payments Credit. Enclose your PA Schedule W, RK-1 or NRK-1.	24.
25.	PA Jobs Creation Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1.	25.
26.	PA Waste Tire Recycling Investment Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1. ...	26.
27.	PA Research and Development Tax Credit, from enclosed certificate or PA Schedule RK-1 or NRK-1.	27.
28.	TOTAL PAYMENTS and CREDITS. Add Lines 14, 19, and 22 through 27.	28.
29.	TAX DUE. If Line 13 is more than Line 28, enter the difference here.	29.
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.	30.
31.	Refund -- Amount of Line 30 you want as a check mailed to you. Refund	31.
32.	Credit -- Amount of Line 30 you want as a credit to your 2001 estimated tax account.	32.
33.	Donation -- Amount of Line 30 you want to donate to the Wild Resource Conservation Fund	33.
34.	Donation -- Amount of Line 30 you want to donate to the United States Olympic Committee, PA Division	34.
35.	Donation -- Amount of Line 30 you want to donate to the Organ Donor Awareness Trust Fund	35.
36.	Donation -- Amount of Line 30 you want to donate to the Korea/Vietnam Memorial Inc.	36.
37.	Donation -- Amount of Line 30 you want to donate to the Breast and Cervical Cancer Research Fund	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.

↓ Your Signature: _____

↓ Spouse's Signature, if filing jointly: _____

↓ Signature of the Preparer (Optional): _____