

Social Security Number

Grid for Social Security Number

Your Name: _____

OFFICIAL USE ONLY

- 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 Forms W-2, or other statements.
15. Credit from your 1998 PA Income Tax Return.
16. 1999 Estimated Installment Payments.
17. 1999 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.

Grid for Total Eligibility Income

- 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 credits and total payments (lines 22-28)

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.

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

32. Credit -- Amount of Line 30 you want as a credit to your 2000 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 Fund.

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

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

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: _____ Date: _____ Your Occupation: _____

Spouse's Signature, if filing jointly: _____ Date: _____ Spouse's Occupation: _____

Preparer or Company Name, other than taxpayer(s) _____

Preparer or Company Name (Please Print): _____ Date: _____ Telephone Number: _____

Signature of the Preparer (Optional): _____

9900210023