

# 1999 Pennsylvania *TeleFile* Worksheet

## Part 1. Identification Information from the preprinted label. Your PIN(s) is (are) above your label.

First Social Security Number

First Personal Identification Number

Second (Spouse's) Social Security Number, if married.

Second (Spouse's) Personal Identification Number, if married.

If married and filing jointly, the first SSN is the Social Security Number entered first on your 1998 PA tax return.

## Part 2. Information from each Form W-2, Wage and Tax Statement.

Enter amounts in **whole** dollars only. Round by eliminating any amount less than **\$0.50** and increasing any amount that is **\$0.50** or more to the next highest dollar.

Number of Form W-2(s)

If more than 7, you **may not** use *TeleFile*.

| (a) Employer Identification Number<br>from Form W-2, box B | (b) PA compensation<br>from Form W-2, box 17 | (c) PA income tax withheld<br>from Form W-2, box 18 | (d) Employee expenses<br>from PA Schedule UE |
|------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------|----------------------------------------------|
| 1 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 2 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 3 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 4 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 5 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 6 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |
| 7 <input type="text"/>                                     | \$ <input type="text"/> .00                  | \$ <input type="text"/> .00                         | \$ <input type="text"/> .00                  |

## Part 3. Amounts You Must Enter. When instructed by *TeleFile*, you:

- Enter your Interest Income. See the instructions. . . . . \$  .00
- Enter your Dividend Income. See the instructions. . . . . \$  .00
- Enter your Total Nontaxable Income from Line 8 of your PA *TeleFile* Schedule SP. . . . . \$  .00

If you did not receive Tax Forgiveness last year, *TeleFile* will skip this line. **If you do not have income for these lines, enter zero.**

You are now ready to *TeleFile*. Call 1-888-4PA-FILE (1-888-472-3453).

## Part 4. Your *TeleFile* Tax Return. *TeleFile* will tell you the amounts to enter below after you enter the above information.

- |                                                     |                                |
|-----------------------------------------------------|--------------------------------|
| 1. Gross Compensation. . . . .                      | 1. \$ <input type="text"/> .00 |
| 2. Unreimbursed Employee Business Expenses. . . . . | 2. \$ <input type="text"/> .00 |
| 3. Net Compensation. . . . .                        | 3. \$ <input type="text"/> .00 |
| 4. PA Taxable Income. . . . .                       | 4. \$ <input type="text"/> .00 |
| 5. PA Tax Liability. . . . .                        | 5. \$ <input type="text"/> .00 |
| 6. Total PA Tax Withheld. . . . .                   | 6. \$ <input type="text"/> .00 |
| 7. Tax Forgiveness Credit. . . . .                  | 7. \$ <input type="text"/> .00 |

**Caution.** If you believe you qualified for Tax Forgiveness last year and qualify again this year, but *TeleFile* does not ask for your information, hang up the phone before completing your *TeleFile* return. You must file using another electronic option, or file a paper tax return to claim Tax Forgiveness.

## Part 5. Tax Due or Overpayment.

- |                                                     |                                |
|-----------------------------------------------------|--------------------------------|
| 8. Tax Due. You must pay by April 17, 2000. . . . . | 8. \$ <input type="text"/> .00 |
|-----------------------------------------------------|--------------------------------|

**Follow the instructions on your PA-V form on the insert. If you owe \$1.00 or less, do not send a payment.**

- |                         |                                |
|-------------------------|--------------------------------|
| 9. Overpayment. . . . . | 9. \$ <input type="text"/> .00 |
|-------------------------|--------------------------------|

If you want to donate all or a portion of your overpayment, listen carefully to the instructions for Lines 10 through 14. You must enter these amounts; otherwise you will receive a refund for the full amount on Line 9.

- |                                                                                        |                                 |
|----------------------------------------------------------------------------------------|---------------------------------|
| 10. Donation to the Wild Resource Conservation Fund. . . . .                           | 10. \$ <input type="text"/> .00 |
| 11. Donation to the U. S. Olympic Committee, PA Division. . . . .                      | 11. \$ <input type="text"/> .00 |
| 12. Donation to the Organ Donor Awareness Trust Fund. . . . .                          | 12. \$ <input type="text"/> .00 |
| 13. Donation to the Korea/Vietnam Memorial, Inc., a National Education Center. . . . . | 13. \$ <input type="text"/> .00 |
| 14. Donation to Breast and Cervical Cancer Research. . . . .                           | 14. \$ <input type="text"/> .00 |
| 15. Refund Check mailed directly to you. . . . .                                       | 15. \$ <input type="text"/> .00 |

The Total of lines 10 through 15 must equal line 9.

## Part 6. Direct Deposit.

If you want your overpayment deposited directly to your checking or savings account, complete the information below. When *TeleFile* asks if you want direct deposit, answer **YES** and enter this information:

- |                                                                                           |                                         |
|-------------------------------------------------------------------------------------------|-----------------------------------------|
| 16. Do you want your overpayment deposited to your: Checking Account <input type="text"/> | Savings Account <input type="text"/>    |
| 17. Routing Number <input type="text"/>                                                   | 18. Account Number <input type="text"/> |

If you do not want direct deposit, answer **NO**. If you do not answer, you will receive your refund check through the mail.

## Part 7. Signature(s) and *TeleFile* Confirmation Information.

After you (and your spouse) listen to the taxpayer's oath, you (both) must sign your *TeleFile* return. Enter your Personal Identification Number(s) when prompted by the *TeleFile* system. *This is your lawful signature that the PA Department of Revenue will retain for future verification.*

Your *TeleFile* Confirmation Number

Date