Form 2290 Test Scenario 2 TY 2024

Originator

EFIN: as assigned

Type:

PractitionerPIN

EFIN: as assigned

PIN:

PINEnteredBy: Taxpayer

SignatureOption: PIN Number

ReturnType: 2290

FirstUsedDate: 202407

Filer

EIN: 001500011

Name: PMSN Cargo Transport

NameControl: PMSN

USAddress: 23 North Avenue Reading PA 19610

Officer

Name: James R Cook

Title: President Phone: 7035642121

EmailAddress:

DateSigned: self select TaxpayerPIN: self select

Preparer

Name: Thomas Doe PTIN: P00000006 Phone: 7035642222

EmailAddress:

DatePepared: self select

SelfEmployed: Y

TaxYear: 2024

binaryAttachmentCount: 0

Form **2290**(Rev. July 2024) Department of the Treasury Internal Revenue Service

Heavy Highway Vehicle Use Tax Return

For the period July 1, 2024, through June 30, 2025
Attach both copies of Schedule 1 to this return.
Go to www.irs.gov/Form2290 for instructions and the latest information.

Keep a copy of this return for your records.

OMB No. 1545-0143

		Name				Empl	oyer identi	fication	number (EIN	1)	
											1
		PMSN Cargo Transport				0	0 - 1	5 0	0 0	1 1	
	ре	Address (number, street, and room or suite no.)									
or F	Print	23 North Avenue									
		City or town, state or province, country, and ZIP	or foreign postal code								
		Reading PA 19610									
Check	if appl										
□ A	ddress	s Change			VIN Correc	tion					
					Check this						
□ A	menda	ed Return			identification						
		his box if reporting (a) additional tax from	m an		Schedule 1 return. Dor)
		e in taxable gross vehicle weight or (b) s			return. Doi	I CHECK II	IIIS DOX IC	or arry c	illel leas	OH.	
Ve	ehicles	s exceeding the mileage use limit. Don't			Final Retur	n					
th	nis box	for any other reason.			Check this	box if you	no longe	er have	taxable v	ehicles	s to
					report.	•	Ū				
Part		Figuring the Tax									
	_	ou purchased a used vehicle from a priva	ate seller, see instrud	ctio	ns.			ΥΥ	/ Y Y	M	M
1	Was tl	the vehicle(s) reported on this return used on public highways during July 2024? If									
		202407 in the boxes to the right. If "NO," see the table on page 3 of the instructions.						2) 2 4	0	7
		Enter the Total from Form 2290, page 2, column (4)							1	16,098	00
		onal tax from increase in taxable gross			•						
		tax. Add lines 2 and 3							1	16,098	00
		ts (Attach supporting documentation. Se	•							•	
		ce due. Subtract line 5 from line 4. Thi payment is through: EFTPS ✓ Cr	s is the amount you edit or debit card [10.000	00
Part		Statement in Support of Suspensi						nal she		16,098. Ided)	00
7	_	are that the vehicles reported on Sche								•	wavs
		k the boxes that apply): 5,000 miles			0 miles or le					,g	·ayo
		the period July 1, 2024, through June 3				_				ule 1.	
		are that the vehicles listed as suspende								2024, \	were
		bject to the tax for that period except for	or any vehicles listed	on	line 8b. Ch	eck this b	ox if app	licable	. Ш		
b	Vehicl	e identification numbers									
•	1 -11.										
		are that vehicle identification numbers _ isted as suspended on the Form 2290 fil	lad for the period lu								 Id or
		orrad ta	·	•		•					
		time of the transfer, the vehicles were s	still eliaible for the su	ıspe	ension of the	tax. Attac	h a sepa	rate list	if needed	 d.	'
Third		Do you want to allow another person to discu		_							No
Party		Designee's	Phone			F	Personal ide	entificatio	n		
Desig	jnee	name	no.				number (PIN				
		Under penalties of perjury, I declare that I have exand belief, it is true, correct, and complete. Declare									
Cian		and belief, it is true, correct, and complete. Declar-	ation of preparer (other th	an la	ixpayer) is base	u on an mioni	nation of wi	lich prep	arer nas any	KIIOWIEC	age.
Sign											
Here	-	0.									
		Signature				Date	numb				
		Type or print name below signature. Print/Type preparer's name	eparer's signature			Telephone Date			PTIN		
Paid			oparor o orginature			Date	Check self-em			nnnne	
Prepa	arer	Thomas Doe Firm's name					Firm's I		PUUL	000006	
Use C	Only∤	Firm's address					Phone		703564	2222	

Form 2290 (Rev. 7-2024)

Tax Computation

Category		(1 Annu (vehicle during	al tax es used	Partial-p (vehicles first See the table	2) veriod tax used after July) s at the end of instructions.	(S Numb vehi	per of	(4) Amount of tax (col. (1) or (2) multiplied by col. (3))	Category
Cate	Taxable gross weight (in pounds)	(a) Vehicles except logging*	(b) Logging vehicles*	(a) Vehicles except logging*	(b) Logging vehicles*	(a) Vehicles except logging*	(b) Logging vehicles*		Cate
Α	55,000	\$100.00	\$75.00	\$	\$			\$	Α
В	55,001 – 56,000	122.00	91.50						В
С	56,001 – 57,000	144.00	108.00						C
C D E F	57,001 – 58,000	166.00	124.50						D
Е	58,001 – 59,000	188.00	141.00						E
F	59,001 – 60,000	210.00	157.50						F
G	60,001 – 61,000	232.00	174.00						G
Н	61,001 – 62,000	254.00	190.50						Н
	62,001 – 63,000	276.00	207.00			1		276.00	
J	63,001 – 64,000	298.00	223.50						J
K	64,001 – 65,000	320.00	240.00						K
L	65,001 – 66,000	342.00	256.50						L
M	66,001 – 67,000	364.00	273.00						M
N	67,001 – 68,000	386.00	289.50						N
0	68,001 – 69,000	408.00	306.00						0
Р	69,001 – 70,000	430.00	322.50						Р
Q	70,001 – 71,000	452.00	339.00						Q
R	71,001 – 72,000	474.00	355.50						R
S	72,001 – 73,000	496.00	372.00						S
Т	73,001 – 74,000	518.00	388.50			4		2,072.00	T
U	74,001 – 75,000	540.00	405.00						U
V	over 75,000	550.00	412.50			25		13,750.00	V
Tot	als. Add the number of v	ehicles in co	lumns (3)(a)	and (3)(b). Enter	the total here.				
	s should be the same tot								
c.) A	Add the amounts in colum	n (4). Enter th	ne total here	and on Form 229	90, line 2 .	3	0	\$ 16,098.00	ו
W	Tax-Suspended Vehicles (See <i>Part II</i> on page 7 of the instructions.)							·	

Complete both copies of Schedule 1 (Form 2290) and attach them to Form 2290.

Form **2290** (Rev. 7-2024)

^{*}See page 2 of the instructions for information on logging vehicles.

SCHEDULE 1 (Form 2290)

(Rev. July 2024) Department of the Treasury Internal Revenue Service

Schedule of Heavy Highway Vehicles

For the period July 1, 2024, through June 30, 2025

Complete and file both copies of Schedule 1. One copy will be stamped and returned to you for use as proof of payment when registering your vehicle(s) with a state.

OMB No. 1545-0143

	Name Employer		yer id	dentification number (EIN)					
T		DMCN O Turner of	0	0 -	1	5 0		0 1	1
		PMSN Cargo Transport Address (number, street, and room or suite no.)	اك		<u>اٺا</u>	3 0		<u> </u>	<u> </u>
,	Type or Print								
•	23 North Avenue								
		City or town, state or province, country, and ZIP or foreign postal code				(see ins	of first u struction	ns)
		Reading PA 19610				Y Y 2 0	Y	Y 1	M M 7
В	art I V					2 0	Cate	gory A t	hrough W
	V	ehicles You Are Reporting (enter VIN and category)					susp	ategory ended	vehicles)
1	1 X	P 5 D B 9 X 1 X N 4 6 3 4 9 2						V	
2	1 X	K W D 8 9 X 8 X R 8 2 8 9 8 1						V	
3	1 X	K W D B 9 X 2 Y R 8 5 2 8 3 9						V	
4	1 F	V H A H A V 0 3 D K 8 1 6 6 3						٧	
5	4 V	4 N C 9 G H 1 6 N 4 3 0 5 3 6						V	
6	2 H	S C N A E R 5 Y C 0 4 4 8 9 1						Т	
7	1 F	U Y D S E B 9 S H 6 0 5 9 2 2						Т	
8	1 H	S H B A D N X S H 6 1 2 0 0 2						ı	
9	4 V	4 N C 9 G H 1 6 N 4 3 0 5 5 3						V	
10	4 V	4 N C 9 G H 5 6 N 4 3 0 5 3 8						V	
11	1 F	U J A 6 C K 1 5 L N 3 9 5 3 4						V	
12	1 F	U J A 6 C K 5 5 L N 3 9 5 3 6						V	
13	4 V	4 N D 1 R J 3 Y N 7 8 9 1 1 4						V	
14	1 F	U Y D S E B 5 Y P B 8 2 5 8 1						V	
15	1 F	U Y D S E B 3 Y P B 8 2 5 1 5						V	
16	1 F	U Y S S E B 0 Y L G 5 6 4 2 0						V	
17	1 F	U J A 6 C V 2 5 D N 7 3 9 8 6						Т	
18	1 M	1 A A 1 3 Y 6 V W 0 7 7 8 7 3						V	
19	1 F	U Y S S Z B 2 W L 8 8 7 7 8 9						V	
20	4 V	4 N C 9 G H 9 1 N 3 0 8 6 0 0						V	
21	1 F	U J A P C G X 1 L H 7 4 4 6 4						V	
22	1 F	U J A 6 C G 7 5 L N 3 9 4 8 4						V	
23	1 F	U J A 6 C G X 5 L N 3 9 4 3 2						V	
24	1 F	U J A 6 C G 5 5 L N 4 7 5 5 2						V	
		ummary of Reported Vehicles							
		per of reported vehicles						a	30
		otal number of taxable vehicles on which the tax is suspended (category W) . ber of taxable vehicles. Subtract line b from line a		•			-	b c	30
	. o.a. Hulli	55. 5. Ladado volholos. Gabliade III o billom III o a		•				-	JU

Form 2290 Test Scenario 2 TY 2024

Form 2290, Schedule 1, Additional VINs over 24

	VIN	Category
25.	1FUY1WEB51PF77396	V
26.	1FUYDSEB9RP770935	V
27.	1FUYDCYB7SH747218	V
28.	2HSFHAMR5XC066815	V
29.	2HSFHAMR4XC066840	Т
30.	1FUY1WEB31PF77395	V