

IRS e-file Signature Authorization

▶ **ERO must obtain and retain completed Form 8879.**
▶ **Go to www.irs.gov/Form8879 for the latest information.**

Submission Identification Number (SID) ▶

Taxpayer's name SAI CHARAN REDDY CHIMARLA	Social security number 385-39-3633
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1 Adjusted gross income	1	51,028.
2 Total tax	2	4,382.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	5,642.
4 Amount you want refunded to you	4	2,660.
5 Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

9	3	6	3	3
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 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize _____ to enter or generate my PIN

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 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

5	8	7	2	7	8	6	1	9	8	9
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial SAI CHARAN REDDY	Last name CHIMARLA	Your social security number 385-39-3633
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 1123 ESTERS RD		Apt. no. 2609	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. IRVING	State TX	ZIP code 75061	
Foreign country name	Foreign province/state/county	Foreign postal code	

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent
 Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1957 Are blind **Spouse:** Was born before January 2, 1957 Is blind

	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions): Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.	1	Wages, salaries, tips, etc. Attach Form(s) W-2			1	56,128.
	2a	Tax-exempt interest	2a		2b	
	3a	Qualified dividends	3a		3b	
	4a	IRA distributions	4a		4b	
	5a	Pensions and annuities	5a		5b	
	6a	Social security benefits	6a		6b	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>			7	
	8	Other income from Schedule 1, line 10			8	-5,100.
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶			9	51,028.
	10	Adjustments to income from Schedule 1, line 26			10	
	11	Subtract line 10 from line 9. This is your adjusted gross income ▶			11	51,028.
Standard Deduction for— • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under <i>Standard Deduction</i> , see instructions.	12a	Standard deduction or itemized deductions (from Schedule A)	12a	12,550.		
	b	Charitable contributions if you take the standard deduction (see instructions)	12b	300.		
	c	Add lines 12a and 12b	12c		12,850.	
	13	Qualified business income deduction from Form 8995 or Form 8995-A			13	
	14	Add lines 12c and 13			14	12,850.
	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-			15	38,178.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	4,382.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	4,382.
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	4,382.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your total tax	24	4,382.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	5,642.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	5,642.
26	2021 estimated tax payments and amount applied from 2020 return	26	
27a	Earned income credit (EIC) No	27a	
	Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>		
b	Nontaxable combat pay election	27b	
c	Prior year (2019) earned income	27c	
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	1,400.
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	1,400.
33	Add lines 25d, 26, and 32. These are your total payments	33	7,042.
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,660.
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	2,660.
Direct deposit? See instructions.	b Routing number 1 0 1 1 0 0 0 4 5 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d Account number 5 1 8 0 0 9 4 0 2 2 6 9		
	36 Amount of line 34 you want applied to your 2022 estimated tax	36	
Amount You Owe	37 Amount you owe . Subtract line 33 from line 24. For details on how to pay, see instructions	37	
	38 Estimated tax penalty (see instructions)	38	

If you have a qualifying child, attach Sch. EIC.

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		BUSINESS CONSULTANT	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (630) 853-8513 Email address SAICHARANCHIMARLA@GMAIL.COM

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
SYAM PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA RAM SAGAR GUPTA TALLAM	01/27/2022	P02082703	<input type="checkbox"/> Self-employed
Firm's name	Firm's address		Phone no.	Firm's EIN
GLOBAL TAXES LLC	2530 Pebble Creek Ln Cumming GA 30041		(678) 965-9522	30-1017196

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

▶ Attach to Form 1040, 1040-SR, or 1040-NR.
▶ Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2021
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SAI CHARAN REDDY CHIMARLA

Your social security number
385-39-3633

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶ _____		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5,100.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling income	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Taxable Health Savings Account distribution	8e	
f	Alaska Permanent Fund dividends	8f	
g	Jury duty pay	8g	
h	Prizes and awards	8h	
i	Activity not engaged in for profit income	8i	
j	Stock options	8j	
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k	
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l	
m	Section 951(a) inclusion (see instructions)	8m	
n	Section 951A(a) inclusion (see instructions)	8n	
o	Section 461(l) excess business loss adjustment	8o	
p	Taxable distributions from an ABLE account (see instructions)	8p	
z	Other income. List type and amount ▶ _____	8z	
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-5,100.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2021

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	▶ _____		
c	Date of original divorce or separation agreement (see instructions) ▶ _____			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶ _____	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

**SCHEDULE E
(Form 1040)**

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

2021

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment
Sequence No. **13**

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return

Your social security number

SAI CHARAN REDDY CHIMARLA

385-39-3633

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Yes No
B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A	SERILINGAMPALLY HYDERABAD TELANGANA IN 500019				
B					
C					
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	3		A 365	0	<input type="checkbox"/>
B			B		<input type="checkbox"/>
C			C		<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
- 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:		A	B	C
3	Rents received	3		400.		
4	Royalties received	4				
Expenses:						
5	Advertising	5				
6	Auto and travel (see instructions)	6				
7	Cleaning and maintenance	7		800.		
8	Commissions.	8				
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11		900.		
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest.	13				
14	Repairs.	14		1,100.		
15	Supplies	15		1,200.		
16	Taxes	16				
17	Utilities.	17		1,500.		
18	Depreciation expense or depletion	18				
19	Other (list) ▶	19				
20	Total expenses. Add lines 5 through 19	20		5,500.		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		-5,100.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(5,100.)	()
23a	Total of all amounts reported on line 3 for all rental properties	23a		400.		
b	Total of all amounts reported on line 4 for all royalty properties	23b				
c	Total of all amounts reported on line 12 for all properties	23c				
d	Total of all amounts reported on line 18 for all properties	23d				
e	Total of all amounts reported on line 20 for all properties	23e		5,500.		
24	Income. Add positive amounts shown on line 21. Do not include any losses	24				
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(5,100.)		
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26				-5,100.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021



Oklahoma Individual Income Tax Declaration for Electronic Filing

**2021
Form 511-EF**

NOTE: Do not mail Oklahoma Tax Return - Form 511 or Form 511-NR.

See instructions on Page 2 to determine if you are required to send Form 511-EF to the OTC.

Your first name and middle initial SAI CHARAN REDDY	Last name CHIMARLA	Your social security number 3 8 5 3 9 3 6 3 3	
If a joint return, spouse's first name and middle initial	Last name	Spouse's social security number	
Mailing address (number and street, including apartment number, rural route or PO Box) 1123 ESTERS RD 2609		Filing status <input type="text" value="1"/>	
City, State, ZIP IRVING TX 75061		Total number of exemptions <input type="text" value="1"/>	

Part One - Tax Return Information (whole dollars only)

1	Oklahoma Adjusted Gross Income (511, Line 7) or Adjusted Gross Income: All Sources (511-NR, Line 7)	1	51028	00
2	Oklahoma Income Tax and Use Tax (511, Line 21 or 511-NR, Line 25)	2	208	00
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line 33)	3	91	00
4	Refund (511, Line 37 or 511-NR, Line 38)	4	0	00
5	Balance Due (511, Line 42 or 511-NR, Line 43)	5	117	00

For a balance due return with an electronic payment, complete line 6b below. The due date for an electronic payment is April 20th. For a balance due return with a non-electronic payment, enclose a payment with the 511-V and submit on or before the due date of April 15th. If the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payment may be made by the later due date and will be considered timely. If the due date falls on a weekend or legal holiday when OTC offices are closed, your payment is due the next business day.

Part Two - Declaration of Taxpayer

6a I consent that my refund be directly deposited as designated in the electronic portion of my 2021 Oklahoma income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

6b I authorize the Oklahoma State Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Oklahoma taxes owed on this return and/or a payment of estimated tax. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If I have filed a balance due return, I understand that if the Oklahoma Tax Commission (OTC) does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under penalties of perjury, I declare I have compared the information contained on my return, with information I have provided to my Electronic Return Originator (ERO), and the amounts described in Part One above, agree with the amounts shown on the corresponding lines of my 2021 Oklahoma income tax return. To the best of my knowledge and belief, my return is true, correct, and complete. I consent that my return, including this declaration and accompanying schedules and statements, be sent to the OTC by my ERO.

In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure to the Oklahoma Tax Commission of all information pertaining to my use of the system and software and to the transmission of my tax return electronically.

Sign Here: _____
Your Signature Date Spouse's Signature (if joint return, both must sign) Date

Part Three - Declaration of Electronic Return Originator (ERO) and Paid Preparer

I declare I have reviewed the above taxpayer's return and the entries on Form 511-EF are complete and correct to the best of my knowledge. (EROs who are collectors are not responsible for reviewing the taxpayer's return; however, they must ensure Form 511-EF accurately reflects the data on the return.) I have obtained the taxpayer's signature on Form 511-EF and I have provided the taxpayer with a copy of all forms and information to be filed with the OTC, and have followed all other requirements described in Pub. 1345, Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2021). If I am also a Paid Preparer, under penalties of perjury I declare I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO Use Only	01/27/2022	
ERO or Paid Preparer's Signature	Date	PTIN
Paid Preparer Use Only	01/27/2022	P02082703
Paid Preparer Signature	Date	PTIN
Firm name (or yours if self-employed), SYAM PRIYA RAM SAGAR GUPTA TALLAM		
address and ZIP 2530 PEBBLE CREEK LN CUMMING GA 30041		
Phone number (678) 965-9522		

State of Oklahoma Individual Income Tax Payment Voucher Instructions

What is Form 511-V and Do You Have to Use It?

If you have already filed your return, either electronically or by paper, send this voucher with your check or money order for any balance due on your 2021 Form 511 or 511NR. Using Form 511-V allows us to process your payment more accurately and efficiently. We strongly encourage you to use Form 511-V, but there is no penalty if you do not.

Due Date

Generally, your Oklahoma income tax is due April 15th. However:

- If you electronically file your return and pay electronically, your due date is extended until April 20th. To make a payment online, visit oktap.tax.ok.gov and click on the "Make a Payment" link.
- If the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payment may be made by the later due date and will be considered timely.
- If the due date falls on a weekend or legal holiday when the Oklahoma Tax Commission offices are closed, your payment is due the next business day.

How To Prepare Your Payment

- Remit only one check or money order per voucher.
- Make your check or money order payable to the "Oklahoma Tax Commission". Do not send cash.
- Make sure your name and address appear on your check or money order.

How To Send In Your 2021 Tax Payment, and Form 511-V

- Cut Form 511-V along the dotted line and submit the bottom portion of the Individual Income Tax Payment Voucher.
- Do not staple or otherwise attach your payment to Form 511-V. Instead, just put them loose in the envelope.
- **Do not include a copy of your income tax return.** To use this form, your income tax return (either paper or electronic) should already be filed with the Oklahoma Tax Commission.
- Mail your 2021 tax payment and Form 511-V to:

Oklahoma Tax Commission
PO Box 26890
Oklahoma City, OK 73126-0890

● Do not fold, staple, or paper clip

Detach Here and Return Voucher with Payment

● Do not tear or cut below line

#1555#

ITI-I

State of Oklahoma Individual Income Tax Payment Voucher

FORM **511-V** 2021

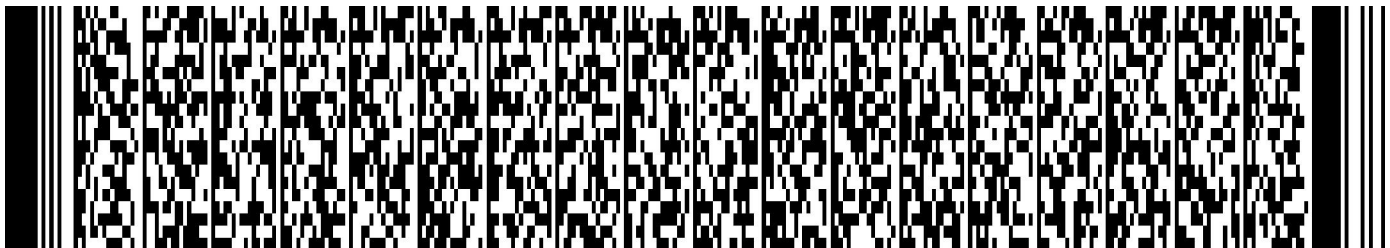
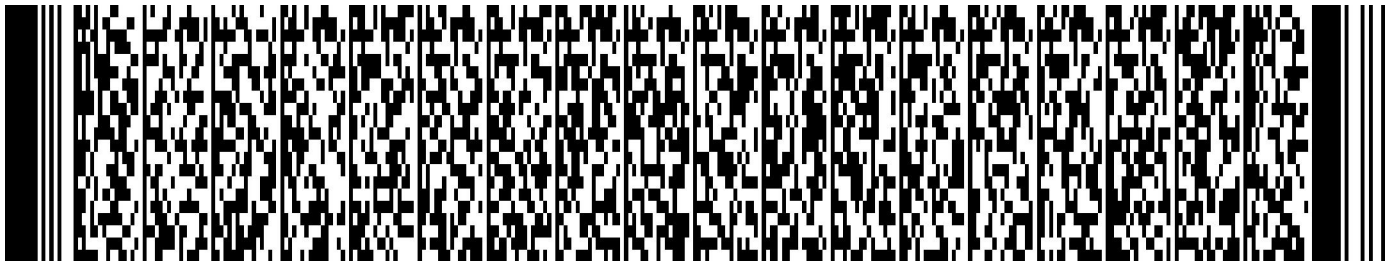
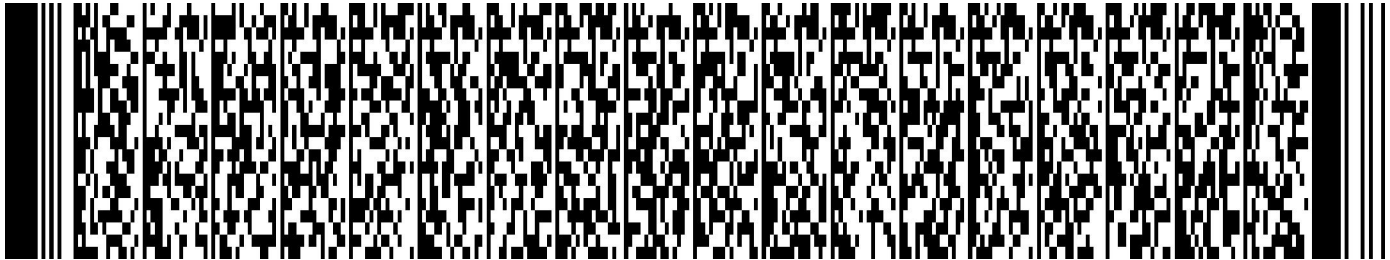
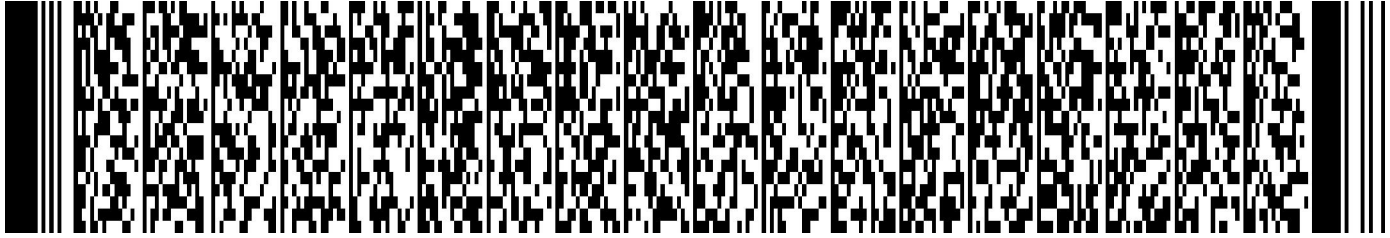


Reporting Period 01-01-2021 to 12-31-2021	Due Date (Penalty and interest may be assessed if payment is not sent by the due date) 04-15-2022
Your first name, middle initial and last name SAI CHARAN REDDY CHIMARLA	Your Social Security Number (if filing a joint return, enter the SSN shown first on your return) 385-39-3633
If joint return, spouse's first name, middle initial and last name	Spouse's Social Security Number (if filing a joint return)
Mailing address (number and street, including apartment number, rural route or PO Box) 1123 ESTERS RD APT 2609	Daytime phone number (optional)
City, State, ZIP IRVING TX 75061	Do not enclose a copy of your Oklahoma tax return.

Oklahoma Tax Commission
PO Box 26890
Oklahoma City, OK 73126-0890

Balance Due	\$ 117
Amount of Payment	\$ 0

**FAILURE TO SUBMIT THIS PAGE
WILL DELAY PROCESSING OF YOUR RETURN**



Note: This is to be mailed with original return. Please DO NOT attach this sheet when filing the payment voucher, Form 511V.



Oklahoma Nonresident/Part-Year Income Tax Return

Your Social Security Number <input type="text" value="385393633"/>	Place an 'X' in this box if this taxpayer is deceased → <input type="checkbox"/>	Spouse's Social Security Number (joint return only) <input type="text"/>	Place an 'X' in this box if this taxpayer is deceased → <input type="checkbox"/>	AMENDED RETURN! Place an 'X' in this box if this is an amended 511-NR. See Schedule 511-NR-H. → <input type="checkbox"/>
--	--	---	--	--

Name and Address - Please Print or Type

Your first name	Middle initial	Last name	If a joint return, spouse's first name	Middle initial	Last name	
SAI CHARAN REDDY		CHIMARLA				
Mailing address (number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
1123 ESTERS RD APT 2609			IRVING	TX	75061	

Filing Status	1 <input checked="" type="checkbox"/> Single
	2 <input type="checkbox"/> Married filing joint return (even if only one had income)
	3 <input type="checkbox"/> Married filing separate • If spouse is also filing, list Name: _____ name and SSN in the boxes: SSN: _____
	4 <input type="checkbox"/> Head of household with qualifying person
	5 <input type="checkbox"/> Qualifying widow(er) with dependent child • Please list the year spouse died in box at right: _____

* Note: If claiming **Special Exemption**, see instructions on page 10 of 511NR Packet.

Exemptions	Regular	* Special	Blind	= <input type="text" value="1"/> (a) = <input type="text" value="0"/> (b) = <input type="text" value="1"/> (c) = <input type="text" value="1"/>	
	Yourselves	1	+		+
	Spouse	0	+		+
	Number of dependents				
Add the Totals from boxes (a), (b) and (c). Enter the TOTAL here:				= <input type="text" value="1"/>	

Note: If you may be claimed as a dependent on another return, enter "0" in the Total box for your regular exemption.

Residency Status	<input checked="" type="checkbox"/> Nonresident(s) State of Residence: TX _____
	<input type="checkbox"/> Part-Year Resident(s) From _____ to _____
	<input type="checkbox"/> Resident/Part-Year Resident/Nonresident State of Residence: Yourself _____ Spouse _____

Age 65 or Older? (Please see instructions) Yourself Spouse

Not Required to File - Place an 'X' in this box if you are a nonresident whose gross income from Oklahoma sources is less than \$1,000. (see instructions)

Complete Schedule 511-NR-1 "Income Allocation for Nonresidents and Part-Year Residents" to arrive at Oklahoma Source Income (line 1) and Federal adjusted gross income (line 2). Round to nearest whole dollar.

	Federal Amount	Oklahoma Amount
1 Oklahoma source income (Schedule 511-NR-1, line 18)		5328.00
2 Federal adjusted gross income (Schedule 511-NR-1, line 19)	51028.00	
3 Oklahoma additions: Schedule 511-NR-A, line 800	.00
4 Add lines (Federal 2 and 3) and then (Oklahoma 1 and 3)	51028.00	5328.00
5 Oklahoma subtractions: Schedule 511-NR-B, line 1700	.00
6 Adjusted gross income: Oklahoma Source (line 4 minus line 5)		5328.00
7 Adjusted gross income: All Sources (line 4 minus line 5) Also enter on line 8	51028.00	
8 Adjusted gross income: All Sources (from line 7)		51028.00
9 Oklahoma Adjustments (Schedule 511-NR-C, line 7)00
10 Income after adjustments (line 8 minus line 9)		51028.00



Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385393633

Amount from line 10 on page 1

Table with 17 rows for deductions and exemptions. Line 11: Oklahoma itemized deductions (6350.00). Line 12: Exemptions (1000.00). Line 13: Total deductions (7350.00). Line 14: Oklahoma Taxable Income (43678.00). Line 15a: Oklahoma Income Tax (1995.00). Line 15b: Health Savings Account tax (.00). Line 16: Oklahoma child care/child tax credit (.00). Line 17: Subtract line 16 from line 15 (1995.00).

STOP AND READ: If line 7 is equal to or larger than line 2, complete line 16. If line 7 is smaller than line 2, see Schedule 511-NR-E.

Table with 18 rows for tax calculations. Line 18: Tax percentage (10.4413%). Line 19: Oklahoma Income Tax (208.00). Line 20: Oklahoma earned income credit (.00). Line 21: Credit for taxes paid to another state (.00). Line 22: Form 511-CR - Other Credits Form (.00). Line 23: Line 19 minus lines 20, 21 and 22 (208.00). Line 24: Use tax due on Internet, mail order, or other out-of-state purchases while living in Oklahoma (.00). Line 25: Balance (208.00). Line 26: Oklahoma withholding (91.00). Line 27: 2021 Oklahoma estimated tax payments (.00). Line 28: 2021 payment with extension (.00). Line 29: Credits from Form (.00). Line 30: Amount paid with original return plus additional paid after it was filed (.00). Line 31: Payments and credits (91.00).



2021 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 3

Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385393633

Amount from line 31 on page 2

Table with 2 columns: Line number and Amount. Line 31: 91.00; Line 32: .00; Line 33: 91.00; Line 34: 0.00; Line 35: .00

Schedule 511-NR-G provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Place the line number of the organization from Schedule 511-NR-G in the box. If you give to more than one organization, put a "99" in the box. Provide Schedule 511-NR-G.....

Table with 2 columns: Line number and Amount. Line 36: .00; Line 37: .00; Line 38: 0.00

Direct Deposit Note: Verify your account and routing numbers are correct. If your direct deposit fails to process or you do not choose direct deposit, you will receive a debit card. See the 511NR Packet for direct deposit and debit card information.

Is this refund going to or through an account that is located outside of the United States? Yes No
Deposit my refund in my:
checking account Routing Number:
savings account Account Number:

Table with 2 columns: Line number and Amount. Line 39: 117.00; Line 40: .00; Line 41: .00; Line 42: .00; Line 43: 117.00

Under penalty of perjury, I declare the information contained in this document, and all attachments and schedules, is true and correct to the best of my knowledge and belief.

Place an 'X' in this box if the Oklahoma Tax Commission may discuss this return with your tax preparer.....

Taxpayer's signature, Date, Taxpayer's occupation: BUSINESS CONSULTANT, Daytime Phone Number (optional)

Spouse's signature, Date, Spouse's occupation

Paid Preparer's signature, Date: SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/27/2022, Paid Preparer's address and phone number: 2530 PEBBLE CREEK LN CUMMING GA 30041, Paid Preparer's PTIN: P02082703

A COPY OF FEDERAL RETURN MUST BE PROVIDED.

Do not staple documentation to this form. To attach items, please use a paper clip. Mailing Address for this form: PO Box 26800, Oklahoma City, OK 73126-0800

Note: Provide this page with your return.



Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385-39-3633

Schedule 511-NR-1: Income Allocation for Nonresidents and Part-Year Residents

Lines 1-19: In the Federal column, enter the amounts from your Federal tax return. See the instructions to figure the amounts to report in the Oklahoma column.

	Federal Amount		Oklahoma Amount	
1 Wages, salaries, tips, etc.....	56128	00	1	5328 00
2 Taxable interest income.....		00	2	00
3 Dividend income.....		00	3	00
4 Taxable IRA distribution.....		00	4	00
5 Taxable pensions and annuities.....		00	5	00
6 Taxable Social Security benefits (also enter on line 2 of Sch. 511-NR-B).....		00	6	00
7 Capital gains or losses (Federal Schedule D).....		00	7	00
8 Taxable refunds (state income tax).....		00	8	00
9 Alimony received.....		00	9	00
10 Business income or (loss) (Federal Schedule C).....		00	10	00
11 Other gains or losses (Federal Form 4797).....		00	11	00
12 Rental real estate, royalties, partnerships, etc.....	-5100	00	12	0 00
13 Farm income or (loss).....		00	13	00
14 Unemployment compensation.....		00	14	00
15 Other income (identify: _____)		00	15	00
16 Add lines 1 through 15.....	51028	00	16	5328 00
17 Total Federal adjustments to income (identify: _____)		00	17	00
18 Oklahoma source income (line 16 minus line 17) Enter here and on page 1, line 1.....			18	5328 00
19 Federal adjusted gross income (line 16 minus line 17) Enter here and on page 1, line 2.....	51028	00	19	

Schedule 511-NR-A: Oklahoma Additions See instructions for details on qualifications and required documents.

	Federal Amount		Oklahoma Amount	
1 State and municipal bond interest.....		00	1	00
2 Lump sum distributions (not included in your Federal AGI).....		00	2	00
3 Federal net operating loss.....		00	3	00
4 Recapture depletion claimed on a lease bonus or add back of excess Federal depletion.....		00	4	00
5 Recapture of contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s).....		00	5	00
6 Oklahoma loss distributed by an electing PTE.....		00	6	00
7 Miscellaneous: Other additions (enter number in box for the type of addition <input type="text"/>).....		00	7	00
8 Total additions (add lines 1-7, enter total here and on line 3 of Form 511-NR)....		00	8	00



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385-39-3633

Schedule 511-NR-B: Oklahoma Subtractions See instructions for details on qualifications and required documents.

Table with columns: Federal Amount, Oklahoma Amount. Rows include Interest on U.S. government obligations, Taxable Social Security, Federal civil service retirement, Military Retirement, Oklahoma government or Federal civil service retirement, Other retirement income, U.S. Railroad Retirement Board Benefits, Additional depletion, Oklahoma net operating loss, Exempt tribal income, Gains from the sale of exempt government obligations, Nonresident military wages, Oklahoma Capital Gain Deduction, Income Tax Refund, Oklahoma income distributed by an electing PTE, Miscellaneous: Other subtractions, Total subtractions.

Schedule 511-NR-C: Oklahoma Adjustments See instructions for details on qualifications and required documents.

Table with columns: Federal Amount, Oklahoma Amount. Rows include Military pay exclusion - Active Duty, Reserve and National Guard (not retirement), Qualifying disability deduction, Qualified adoption expense, Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s), Deductions for providing foster care, Miscellaneous: Other adjustments, Total Adjustments.



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385-39-3633

Schedule 511-NR-D: Oklahoma Itemized Deductions

If you claimed itemized deductions on your Federal return, you must claim Oklahoma Itemized Deductions.

1	Federal itemized deductions from Federal Sch. A, line 17	1		00
2	State and local sales or income taxes from Federal Sch. A, line 5a (If Federal Sch A, line 5e is limited, enter that portion of Federal Sch A, line 5a included in line 5e)	2		00
3	Line 1 minus line 2.....	3		00
4	Medical and Dental expenses from Federal Sch. A, line 4	4		00
5	Gifts to Charity from Federal Sch. A, line 14	5		00
6	Line 3 minus lines 4 and 5.....	6		00
7	Is line 6 more than \$17,000? <input type="checkbox"/> YES. Your itemized deductions are limited. Complete lines 9-11. <input type="checkbox"/> NO. Your itemized deductions are not limited. Skip lines 9 and 10. Go to line 11.			
8	Maximum amount allowed for itemized deductions. (Exception, lines 9 and 10)	8	17,000	00
9	Medical and Dental expenses from Federal Sch. A, line 4	9		00
10	Gifts to Charity from Federal Sch. A, line 14	10		00
11	Oklahoma Itemized Deductions If you responded YES on line 7: Add lines 8, 9 and 10 If you responded NO on line 7: Enter the amount from line 3.....	11		00

Enter your Oklahoma Itemized Deductions on line 11 of Form 511-NR.

Schedule 511-NR-E: Child Care/Child Tax Credit See instructions for details on qualifications and required documents.

If your Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child care expenses or the child tax credit on your Federal return, then as a resident, part-year resident or nonresident military, you are allowed a credit against your Oklahoma tax. Your Oklahoma credit is the **greater** of:

- 20% of the credit for child care expenses allowed by the IRS Code. Your allowed Federal credit cannot exceed the amount of your Federal tax reported on your Federal return, **OR**
- 5% of the child tax credit allowed by the IRS Code. This includes both the nonrefundable child tax credit and the refundable additional child tax credit.

The credit must be prorated based on the ratio of Adjusted Gross Income: All sources to Federal Adjusted Gross Income. If your Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed. **Provide** a copy of your Federal return and, if applicable, the Federal child care credit schedule.

1	Enter your Federal child care credit.....	1		00
2	Multiply line 1 by 20%.....	2		00
3	Enter your Federal child tax credit (total of child tax credit & additional child tax credit).....	3		00
4	Multiply line 3 by 5%.....	4		00
5	Enter the larger of line 2 or line 4	5		00
6	Divide the amount on line 7 of Form 511-NR by the amount on line 2 of Form 511-NR <div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 150px; height: 30px; margin-right: 10px;"></div> <div style="font-size: 2em; margin: 0 10px;">÷</div> <div style="border: 1px solid black; width: 150px; height: 30px; margin-left: 10px;"></div> </div> Enter the percentage from the above calculation here (do not enter more than 100%)	6		%
7	Multiply line 5 by line 6. This is your Oklahoma child care/child tax credit. Enter total here and on line 16 of Form 511-NR.....	7		00



Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) shown on Form 511NR: SAI CHARAN REDDY CHIMARLA

Your Social Security Number: 385-39-3633

Schedule 511-NR-F: Earned Income Credit See instructions for details on qualifications and required documents.

Residents and part-year residents are allowed a credit equal to 5% of the Earned Income Credit allowed on the Federal return. The credit must be prorated on the ratio of Oklahoma source AGI to Federal AGI. Provide a copy of your Federal return.

Nonresidents do not qualify.

Form with 4 lines for Earned Income Credit calculation, including a division box for line 3.

Schedule 511-NR-G: Donations from Refund (Original return only)

This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Information regarding each program, its mission, how funds are utilized and mailing addresses are shown in Schedule 511-NR-G Information on pages 29-30 of the 511-NR Packet.

Place an 'X' in the box associated with the dollar amount you wish to have deducted from your refund and donated to that organization. Then carry that figure over into the column at the right.

Table with 9 rows of donation categories and columns for \$2, \$5, and other amounts, plus a final column for totals.

Schedule 511-NR-H: Amended Return Information

Did you file an amended Federal return? Yes [] No []

If Yes, provide a copy of the IRS Form 1040X or 1045 AND proof of IRS acceptance, such as a copy of the IRS "Statement of Adjustment," IRS check or deposit slip.

Explain the changes to income, deductions, and/or credits below. Enter the line reference number for which you are reporting a change and give the reason.