

**Do not** mail this form to the Arizona Department of Revenue. *The ERO must retain this document a minimum of four years.*

Your First Name and Initial SHOURYA	Last Name MADISHETTY	Enter your SSN(s).	Your Social Security Number* 652   13   9519
Your Spouse's First Name and Initial (if filed joint)	Last Name		Spouse's Social Security No.*

**PART 1 – PURPOSE** *(If you are e-filing a Small Business Income Tax Return, also complete Form AZ-8879 SBI)* **\*Do Not Truncate**

- To certify the truthfulness, correctness, and completeness of the taxpayer's electronic income tax return.
- To authorize the Electronic Return Originator (ERO) to affirm that the taxpayer wishes to use the taxpayer's electronic signature to the taxpayer's federal individual income tax return as the taxpayer's signature to the taxpayer's electronic Arizona individual income tax return.

**PART 2 – TAX RETURN INFORMATION**

1 Arizona Adjusted Gross Income	48,564	00
2 Balance of Tax .....	994	00
3 Arizona Income Tax Withheld ...	1,019	00

**Check box 4 or box 5:**

4  **REFUND:** Enter the amount of refund..... 25 00

5  **AMOUNT YOU OWE:** Enter the amount owed ..... 00

**PART 3 – FINANCIAL INSTITUTION INFORMATION**  
Must be present when requesting direct debit or deposit.

Foreign Account Deposit/Debit: See instructions below.

TYPE OF ACCOUNT  Checking  Savings

ROUTING NUMBER 1 2 2 1 0 0 0 2 4

ACCOUNT NUMBER 7 2 6 8 2 2 0 1 5

DIRECT DEBIT REQUEST DATE

DIRECT DEBIT PAYMENT AMOUNT \$ .00

**Box 4 Checkbox – Refund:** You are due a refund based on the information provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3).

**Box 5 Checkbox – Amount You Owe:** You owe taxes based on the information provided on your tax return. You have elected to direct debit for payment. The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).

**Foreign Account Deposit/Debit Checkbox:** Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come from a foreign account. If you check this box, do not enter your account numbers. If this box is checked, we will not direct deposit or debit your account. If you are due a refund, we will send you a check instead. If you owe tax, **you must mail a check to the Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.**

**PART 4 – DECLARATION AND SIGNATURE AUTHORIZATION** *(Sign only after completing Part 2)*

Under penalties of perjury, I declare that I have examined a copy of my electronic Arizona individual income tax return and accompanying schedules and statements for the year ending December 31, 2021, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts of Arizona adjusted gross income, total tax, Arizona income tax withheld, and refund (or amount owed) listed above are the amounts shown on the copy of my electronic Arizona income tax return.

- 6a  I consent that my refund be directly deposited as designated in the electronic portion of my 2021 Arizona individual 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 do not want direct deposit of my refund or I am not receiving a refund.
- 6c  I authorize the Arizona Department of Revenue (ADOR) 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 Arizona taxes owed on this return. 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 consent to my Electronic Return Originator (ERO) or On-Line Service Provider (OLSP) sending my electronic Arizona individual income tax return and accompanying schedules and statements to ADOR, and I consent to my ERO or OLSP sending such information to ADOR through a transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the transmission of my return is accepted and, if the return is rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/or transmitter the reason(s) for the delay, or when the refund was sent. If ADOR contacts my ERO for a copy of my return, any documents or schedules to my return, and/or this authorization form, I authorize my ERO to release copies of the requested documents to ADOR.

I authorize GLOBAL TAXES LLC  
(ELECTRONIC RETURN ORIGINATOR)

to make the election that I want my electronic signature to my electronic federal individual income tax return to serve as my signature to my electronic Arizona individual income tax return for the year ending December 31, 2021. I understand that when my ERO makes the election that my electronic signature to my federal individual income tax return will serve as my signature to my Arizona individual income tax return, I will have signed my Arizona individual income tax return and declared under penalties of perjury that to the best of my knowledge and belief the return is true, correct and complete.

If I have filed a balance due return, I understand that if the ADOR does not receive full and timely payment of my tax liability by April 18, 2022, I will remain liable for the tax liability and all applicable interest and penalties. When electronically filing my federal and state tax returns, I understand that if there is an error on my federal return, my state return will also be rejected.

PLEASE SIGN HERE

→ M. Shourya YOUR PEN AND INK SIGNATURE

→ 03/13/2022 DATE

→ \_\_\_\_\_ SPOUSE'S PEN AND INK SIGNATURE

→ \_\_\_\_\_ DATE

DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F  Check box 82F if filing under extension OR FISCAL YEAR BEGINNING 2, 0, 2, 1 AND ENDING 66F

Your First Name and Middle Initial: SHOURYA; Last Name: MADISHETTY; Spouse's First Name and Middle Initial: (if box 4 or 6 checked); Last Name: MADISHETTY; Your Social Security Number: 652 13 9519; Spouse's Social Security No.:

Current Home Address - number and street, rural route: 1319 W JAVELINA DR; Apt. No.:; Daytime Phone (with area code): 94

City, Town or Post Office: CHANDLER; State: AZ; ZIP Code: 85286; Last Names Used in Last Four Prior Year(s) (if different):

FILING STATUS: 4 Married filing joint return; 5 Head of household; 6 Married filing separate return; 7 Single (checked)

Enter the number claimed. Do not put a check mark. 8 Age 65 or over; 9 Blind; 10a Dependents: Under age of 17; 10b Dependents: Age 17 and over; 11a Qualifying parents and grandparents

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2021, (e) Dependent Age included in, (f) if you did not claim this person on your federal return due to educational credits. Rows 10c, 10d, 10e.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2021, (e) IF AGE 65 OR OVER, (f) IF DIED IN 2021. Rows 11b, 11c.

Table with 3 columns: Line number, Description, Amount. Rows 12-24 including Federal adjusted gross income, Small Business Income, Modified federal adjusted gross income, Non-Arizona municipal interest, Partnership Income adjustment, Total federal depreciation, Other Additions to Income, Subtotal, Total net capital gain or (loss).

Table with 3 columns: Line number, Description, Amount. Rows 25-34 including Net capital gain - qualified small business, Recalculated Arizona depreciation, Partnership Income adjustment, Interest on U.S. obligations, Exclusion for fed., AZ state or local govt. pensions, Exclusion for retired/retainer pay uniform services, U.S. Social Security or Railroad Retirement Act, Certain wages of American Indians, Pay received for being an active service member, Net operating loss adjustment, Contributions: 34a 529 plans.

Place any required federal and AZ schedules or other documents after Form 140.

Exemptions 8, 9, and 11a - Dependents 10a and 10b

Additions

Subtractions

Your Name (as shown on page 1) SHOURYA MADISHETTY Your Social Security Number 652-13-9519

Exemptions	35 Subtract lines 24 through 34c from line 19.....	35	48,564	00
	36 Other Subtractions from Income. Complete <i>Other Subtraction from Arizona Gross Income</i> schedule on page 6.....	36		00
	37 Subtract line 36 from line 35. Enter the difference .....	37	48,564	00
	38 Age 65 or over: Multiply the number in box 8 by \$2,100.....	38		00
Balance of Tax	39 Blind: Multiply the number in box 9 by \$1,500 .....	39		00
	40 Other Exemptions. See instructions.....40E <input type="checkbox"/> Multiply the number in box 40E by \$2,300.....	40		00
	41 Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000.....	41		00
	42 Arizona adjusted gross income: Subtract lines 38 through 41 from line 37. If less than zero, enter "0".....	42	48,564	00
	43 Deductions: Check box and enter amount. See instructions.....43I <input type="checkbox"/> ITEMIZED...43S <input checked="" type="checkbox"/> STANDARD	43	12,550	00
	44 If you checked box 43S and claim charitable contributions, check 44C <input type="checkbox"/> Complete page 3. See instructions.....	44		00
	45 Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0".....	45	36,014	00
	46a Compute the tax using amount on line 45 and Tax Tables X and Y or Optional Tax Tables.....	46a	994	00
	46b If line 45 is \$250,001 or more (single/mfs) or \$500,001 or more (mfj/hoh) compute the tax surcharge. Enter the amount.....	46b		00
	47 Tax from recapture of credits from Arizona Form 301, Part 2, line 30 .....	47		00
Total Payments and Refundable Credits	48 Subtotal of tax: Add lines 46a, 46b and 47. Enter the total.....	48	994	00
	49 Dependent Tax Credit. See instructions .....	49		00
	50 Family income tax credit (from the worksheet - see instructions) .....	50		00
	51 Nonrefundable Credits from Arizona Form 301, Part 2, line 61.....	51		00
	52 Balance of tax: Subtract lines 49, 50 and 51 from line 48. If the sum of lines 49, 50 and 51 is greater than line 48, enter "0" .....	52	994	00
	53 2021 AZ income tax withheld.....	53	1,019	00
	54 2021 AZ estimated tax payments. 54a <input type="text" value="00"/> Claim of Right 54b <input type="text" value="00"/> Add 54a and 54b. 54c	54		00
	55 2021 AZ extension payment (Form 204) .....	55		00
	56 Increased Excise Tax Credit (from the worksheet - see instructions) .....	56		00
	57 Property Tax Credit from Arizona Form 140PTC .....	57		00
Tax Due or Overpayment	58 Other refundable credits: Check the box(es) and enter the total amount.....581 <input type="checkbox"/> 308-1 582 <input type="checkbox"/> 349	58		00
	59 Total payments and refundable credits: Add lines 53 through 58. Enter the total.....	59	1,019	00
	60 TAX DUE: If line 52 is larger than line 59, subtract line 59 from line 52. Enter amount of tax due. Skip lines 61, 62 and 63.....	60		00
	61 OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayment.....	61	25	00
	62 Amount of line 61 to be applied to 2022 estimated tax.....	62		00
Voluntary Gifts	63 Balance of overpayment: Subtract line 62 from line 61. Enter the difference .....	63	25	00
	64 - 74 Voluntary Gifts to:			
	Solutions Teams Assigned to Schools..... 64 <input type="text" value="00"/> Arizona Wildlife..... 65 <input type="text" value="00"/>			
	Child Abuse Prevention..... 66 <input type="text" value="00"/>	Domestic Violence Services..... 67 <input type="text" value="00"/>	Political Gift..... 68 <input type="text" value="00"/>	
	Neighbors Helping Neighbors..... 69 <input type="text" value="00"/>	Special Olympics..... 70 <input type="text" value="00"/>	Veterans' Donations Fund..... 71 <input type="text" value="00"/>	
	I Didn't Pay Enough Fund..... 72 <input type="text" value="00"/>	Sustainable State Parks and Road Fund..... 73 <input type="text" value="00"/>	Spay/Neuter of Animals..... 74 <input type="text" value="00"/>	
	75 Political Party (if amount is entered on line 68 - check only one): 751 <input type="checkbox"/> Democratic 752 <input type="checkbox"/> Libertarian 753 <input type="checkbox"/> Republican			
	76 Estimated payment penalty .....	76		00
	77 771 <input type="checkbox"/> Annualized/Other 772 <input type="checkbox"/> Farmer or Fisherman 773 <input type="checkbox"/> Form 221 included	77		00
	78 Add lines 64 through 74 and 76; enter the total.....	78		00
Refund or Amount Owed	79 REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80 .....	79	25	00
	Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a foreign account; see instructions. 79A <input type="checkbox"/>			
	ROUTING NUMBER ACCOUNT NUMBER			
	<input checked="" type="checkbox"/> C Checking or <input type="text" value="122100024"/> <input type="text" value="726822015"/>			
	<input type="checkbox"/> S Savings			
80 AMOUNT OWED: Add lines 60 and 78. Make check payable to Arizona Department of Revenue; write your SSN on payment; and include with your return.....				
80				
00				

Under penalties of perjury, I declare that I have read this return and any documents with it, 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.

**PLEASE SIGN HERE**

YOUR SIGNATURE: M. Shourya DATE: 03/13/2022 OCCUPATION: SOFTWARE ENGINEER

SPOUSE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ SPOUSE'S OCCUPATION: \_\_\_\_\_

PAID PREPARER'S SIGNATURE: SYAM PRIYA RAM SAGAR GUPTA TALLAM DATE: 03102022 FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED): GLOBAL TAXES LLC

PAID PREPARER'S STREET ADDRESS: 2530 Pebble Creek Ln PAID PREPARER'S TIN: 30-1017196

PAID PREPARER'S CITY: Cumming GA 30041 STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PAID PREPARER'S PHONE NUMBER: (678) 965-9522

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode). If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).