

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 VENKATA SAI AMULYA KOMATINENI	Social security number 890-99-4238
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	82,910.
2 Total tax	2	9,747.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	12,770.
4 Amount you want refunded to you	4	3,023.
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	4	2	3	8
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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					
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 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 VENKATA SAI AMULYA		Last name KOMATINENI	Your social security number 890-99-4238
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. 8290 GATE PARKWAY, WEST UNIT 1407			Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. JACKSONVILLE		State FL	ZIP code 32216
Foreign country name		Foreign province/state/county	Foreign postal code

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.
 You Spouse

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

Dependents (see instructions):

If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>	(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
					<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. 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 Standard Deduction , see instructions.	1	Wages, salaries, tips, etc. Attach Form(s) W-2		1	90,200.	
	2a	Tax-exempt interest	2a	2b		
	3a	Qualified dividends	3a	b Taxable interest	2b	
	4a	IRA distributions	4a	b Ordinary dividends	3b	
	5a	Pensions and annuities	5a	b Taxable amount	4b	
	6a	Social security benefits	6a	b Taxable amount	5b	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>		b Taxable amount	6b	
	8	Other income from Schedule 1, line 10			7	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ▶			8	-7,290.
	10	Adjustments to income from Schedule 1, line 26			9	82,910.
	11	Subtract line 10 from line 9. This is your adjusted gross income ▶			10	
	12a	Standard deduction or itemized deductions (from Schedule A)	12a	12,550.	11	82,910.
	b	Charitable contributions if you take the standard deduction (see instructions)	12b	300.	12c	12,850.
	c	Add lines 12a and 12b			13	
	13	Qualified business income deduction from Form 8995 or Form 8995-A			14	12,850.
14	Add lines 12c and 13			15	70,060.	
15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-					

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	11,165.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	11,165.
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	1,418.
21	Add lines 19 and 20	21	1,418.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	9,747.
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	9,747.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	12,770.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	12,770.
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	
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	
33	Add lines 25d, 26, and 32. These are your total payments	33	12,770.
34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,023.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	3,023.
b	Routing number 1 0 1 1 0 0 0 4 5 <input type="checkbox"/> c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number 5 1 8 0 0 7 9 0 7 8 5 0		
36	Amount of line 34 you want applied to your 2022 estimated tax	36	
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.

Refund

Direct deposit? See instructions.

Amount You Owe

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.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
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. (913) 544-9919 Email address VENKATA.AMULYA@GMAIL.COM

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <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
VENKATA SAI AMULYA KOMATINENI

Your social security number
890-99-4238

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	-7,290.
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	-7,290.

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 3
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

▶ 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. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
VENKATA SAI AMULYA KOMATINENI

Your social security number
890-99-4238

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	1,418.
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Alternative motor vehicle credit. Attach Form 8910	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
l	Amount on Form 8978, line 14. See instructions	6l	
z	Other nonrefundable credits. List type and amount ▶ _____	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	1,418.

(continued on page 2)

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
a	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
c	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
e	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
z	Other payments or refundable credits. List type and amount ► _____	13z		
14	Total other payments or refundable credits. Add lines 13a through 13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31		15	

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

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

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. **13**

Name(s) shown on return

VENKATA SAI AMULYA KOMATINENI

Your social security number

890-99-4238

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	MADDIPADU PRAKASAM DISTRICT ANDHRA PRADESH IN 523211					
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	355	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	580.		
4 Royalties received	4			
Expenses:				
5 Advertising	5	80.		
6 Auto and travel (see instructions)	6	190.		
7 Cleaning and maintenance	7	300.		
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10			
11 Management fees	11	800.		
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14	2,600.		
15 Supplies	15	2,100.		
16 Taxes	16			
17 Utilities	17	1,800.		
18 Depreciation expense or depletion	18			
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20	7,870.		
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	-7,290.		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(7,290.)	()	()
23a Total of all amounts reported on line 3 for all rental properties	23a		580.	
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		7,870.	
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	(7,290.)		
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			-7,290.

For Paperwork Reduction Act Notice, see the separate instructions.

NPA -7,290.

Schedule E (Form 1040) 2021

Education Credits
(American Opportunity and Lifetime Learning Credits)

▶ Attach to Form 1040 or 1040-SR.
 ▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

Name(s) shown on return: VENKATA SAI AMULYA KOMATINENI
 Your social security number: 890-99-4238



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	2	
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4	
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5	
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6 • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places)	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box ▶ <input type="checkbox"/>	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions)	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	10,800.
11	Enter the smaller of line 10 or \$10,000	11	10,000.
12	Multiply line 11 by 20% (0.20)	12	2,000.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	13	90,000.
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	14	82,910.
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	7,090.
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	16	10,000.
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places)	17	0.709
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶	18	1,418.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	1,418.

Name(s) shown on return VENKATA SAI AMULYA KOMATINENI	Your social security number 890-99-4238
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Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Part III Student and Educational Institution Information. See instructions.

20 Student name (as shown on page 1 of your tax return) VENKATA SAI AMULYA KOMATINENI	21 Student social security number (as shown on page 1 of your tax return) 890-99-4238
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22 Educational institution information (see instructions)	
a. Name of first educational institution UNIVERSITY OF THE CUMBERLANDS	b. Name of second educational institution (if any)

(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 6178 COLLEGE STATION DR Williamsburg KY 40769	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
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(2) Did the student receive Form 1098-T from this institution for 2021? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	(2) Did the student receive Form 1098-T from this institution for 2021? <input type="checkbox"/> Yes <input type="checkbox"/> No
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(3) Did the student receive Form 1098-T from this institution for 2020 with box 7 checked? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(3) Did the student receive Form 1098-T from this institution for 2020 with box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No
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(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution. 61-0470593	(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3) . You can get the EIN from Form 1098-T or from the institution.
--	--

23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021?	<input type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input checked="" type="checkbox"/> No — Go to line 24.
---	---

24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2021 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	<input checked="" type="checkbox"/> Yes — Go to line 25. <input type="checkbox"/> No — Stop! Go to line 31 for this student.
--	---

25 Did the student complete the first 4 years of postsecondary education before 2021? See instructions.	<input checked="" type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input type="checkbox"/> No — Go to line 26.
--	---

26 Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?	<input type="checkbox"/> Yes — Stop! Go to line 31 for this student. <input type="checkbox"/> No — Complete lines 27 through 30 for this student.
--	--



You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000	27	
28 Subtract \$2,000 from line 27. If zero or less, enter -0-	28	
29 Multiply line 28 by 25% (0.25)	29	
30 If line 28 is zero, enter the amount from line 27. Otherwise, add \$2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1	30	

Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	10,800.
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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 VENKATA SAI AMULYA	Last name KOMATINENI	Your social security number 8 9 0 9 9 4 2 3 8
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) 8290 GATE PARKWAY, WEST UNIT 1407		Filing status <input type="text" value="1"/>
City, State, ZIP JACKSONVILLE FL 32216		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	82910	00
2	Oklahoma Income Tax and Use Tax (511, Line 21 or 511-NR, Line 25)	2	427	00
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line 33)	3	409	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	18	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
ERO or Paid Preparer's Signature Date PTIN

Paid Preparer Use Only
Paid Preparer Signature Date PTIN

Firm name (or yours if self-employed), _____
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

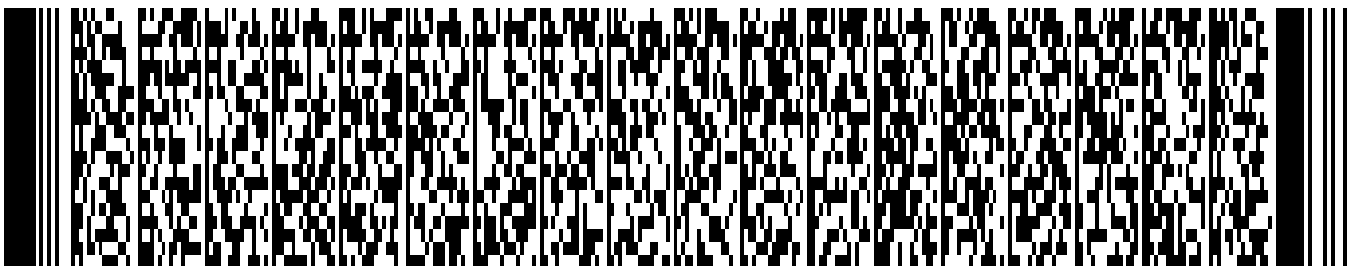
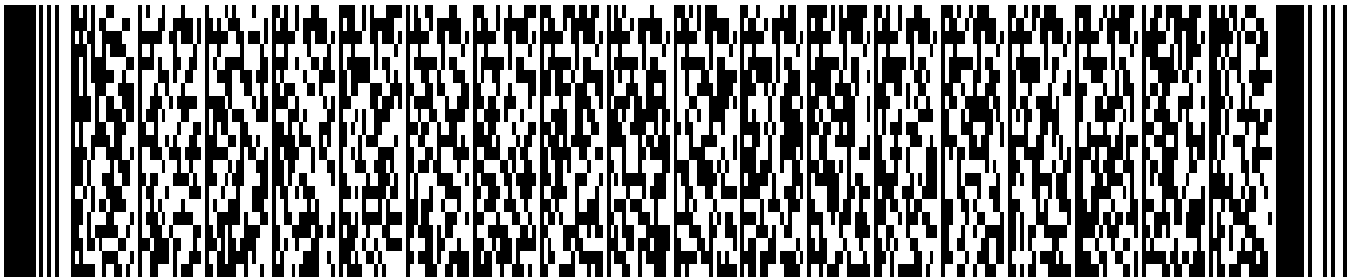
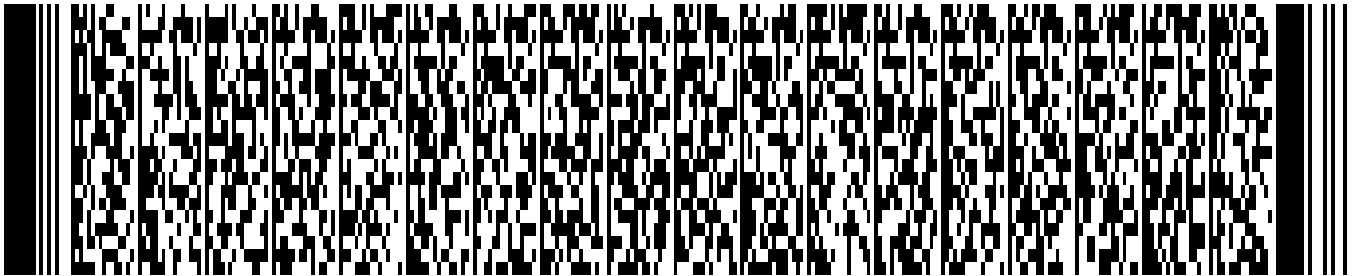
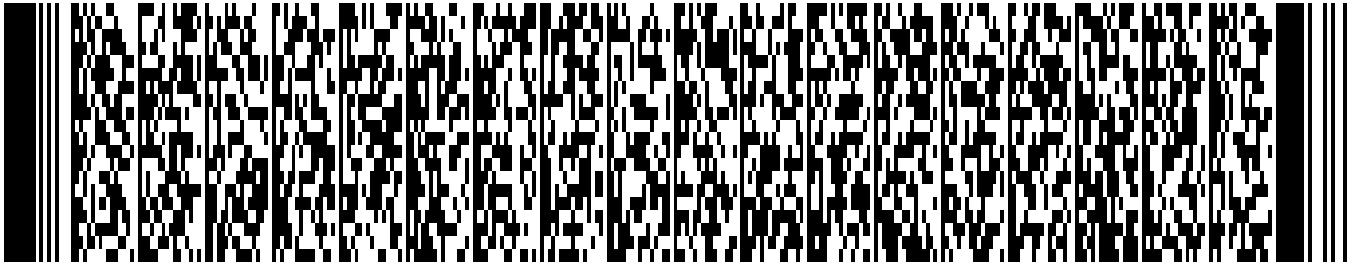


Reporting Period 01-01-2021 to 12-31-2021	Due Date (Penalty and interest may be assessed if payment is not sent by the due date) 04-15-2022
Your first name, middle initial and last name VENKATA SAI AMULYA KOMATINENI	Your Social Security Number (if filing a joint return, enter the SSN shown first on your return) 890-99-4238
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) 8290 GATE PARKWAY, WEST UNIT 1407	Daytime phone number (optional)
City, State, ZIP JACKSONVILLE FL 32216	Do not enclose a copy of your Oklahoma tax return.

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

Balance Due	\$ 18
Amount of Payment	\$ 18

**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: 890994238 Place an 'X' in this box if this taxpayer is deceased →

Spouse's Social Security Number (joint return only): Place an 'X' in this box if this taxpayer is deceased →

AMENDED RETURN!
Place an 'X' in this box if this is an amended 511-NR. See Schedule 511-NR-H. →

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	
VENKATA SAI		AMULYA	KOMATINENI			
Mailing address (number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
8290 GATE PARKWAY WEST UNIT 1407			JACKSONVILLE	FL	32216	

Filing Status

1 Single

2 Married filing joint return (even if only one had income)

3 Married filing separate
• If spouse is also filing, list Name: _____
name and SSN in the boxes: SSN: _____

4 Head of household with qualifying person

5 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.

	Regular	* Special	Blind	
Exemptions				
Yourself	1	+	+	1
Spouse	0	+	+	
Number of dependents				
Add the Totals from boxes (a), (b) and (c). Enter the TOTAL here: 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

Nonresident(s) State of Residence: FL

Part-Year Resident(s) From _____ to _____

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)		1 9856.00
2 Federal adjusted gross income (Schedule 511-NR-1, line 19)	82910.00	2
3 Oklahoma additions: Schedule 511-NR-A, line 800	3 .00
4 Add lines (Federal 2 and 3) and then (Oklahoma 1 and 3)	82910.00	4 9856.00
5 Oklahoma subtractions: Schedule 511-NR-B, line 1700	5 .00
6 Adjusted gross income: Oklahoma Source (line 4 minus line 5)		6 9856.00
7 Adjusted gross income: All Sources (line 4 minus line 5) Also enter on line 8	82910.00	7
8 Adjusted gross income: All Sources (from line 7)		8 82910.00
9 Oklahoma Adjustments (Schedule 511-NR-C, line 7)		9 .00
10 Income after adjustments (line 8 minus line 9)		10 82910.00



Name(s) shown on Form 511NR: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890994238

Amount from line 10 on page 1

Table with 3 columns: Line number, Description, and Amount. Includes rows for Oklahoma itemized deductions (6350.00), Exemptions (1000.00), Total deductions (7350.00), Oklahoma Taxable Income (75560.00), Oklahoma Income Tax (3590.00), and Oklahoma child care/child tax credit (.00).

Table with 3 columns: Line number, Description, and Amount. Includes rows for Tax percentage (11.8876%), Oklahoma Income Tax (427.00), Oklahoma earned income credit (.00), Credit for taxes paid to another state (.00), Form 511-CR (.00), Use tax due on Internet purchases (.00), Oklahoma withholding (409.00), 2021 Oklahoma estimated tax payments (.00), 2021 payment with extension (.00), Credits from Form (.00), Amount paid with original return (.00), and Payments and credits (409.00).



Name(s) shown on Form 511NR: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890994238

Amount from line 31 on page 2

Table with 2 columns: Description and Amount. Rows include: 32 Overpayment, if any, as shown on original return... 33 Total payments and credits (line 31 minus line 32)... 34 If line 33 is more than line 25, subtract line 25 from line 33... 35 Amount of line 34 to be applied to 2022 estimated tax (original return only)...

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: Description and Amount. Rows include: 36 Donations from your refund (total from Schedule 511NR-G)... 37 Total deductions from refund (add lines 35 and 36)... 38 Amount to be refunded (line 34 minus line 37)...

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: Description and Amount. Rows include: 39 If line 25 is more than line 33, subtract line 33 from line 25. This is your tax due... 40 Donation: Public School Classroom Support Fund (original return only)... 41 Underpayment of estimated tax interest (annualized installment method)... 42 For delinquent payment add penalty of 5% \$... plus interest of 1.25% per month... 43 Total tax, donation, penalty and interest (add lines 39-42)...

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
SOFTWARE ENGINEER
Daytime Phone Number (optional)

Spouse's signature Date
Spouse's occupation

Paid Preparer's signature Date
Paid Preparer's address and phone number (678) 965-9522
2530 PEBBLE CREEK LN
CUMMING GA 30041
Paid Preparer's PTIN

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: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890-99-4238

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.....	90200 00	1 9856 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.....	-7290 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.....	82910 00	16 9856 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 9856 00
19 Federal adjusted gross income (line 16 minus line 17) Enter here and on page 1, line 2.....	82910 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: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890-99-4238

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, 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: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890-99-4238

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="text-align: center; margin-right: 10px;">÷</div> <div style="border: 1px solid black; width: 150px; height: 30px; margin-right: 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: VENKATA SAI AMULYA KOMATINENI

Your Social Security Number: 890-99-4238

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.

Table with 4 rows for Earned Income Credit calculation. Line 1: Federal earned income credit. Line 2: Multiply line 1 by 5%. Line 3: Divide the amount on line 6 of Form 511NR by the amount on line 2 of Form 511NR. Line 4: Oklahoma earned income credit.

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. When you carry your figure back to line 36 of Form 511-NR, please list the line number of the organization to which you donated.

Table with 9 rows for Donations from Refund. Columns include organization name, \$2 amount, \$5 amount, and total amount. Organizations include Support of Programs for Volunteers to Act as Court Appointed Special Advocates, Y.M.C.A. Youth and Government Program, Support Wildlife Diversity Fund, etc.

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. IRS documents submitted after filing this Oklahoma amended return may delay processing.

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. If more space is needed, provide a separate schedule.

Blank lines for explaining changes to income, deductions, and/or credits.