

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 DHIVYA VENKATESAN	Social security number 731-30-6332
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2022 (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	82,651.
2 Total tax	2	10,957.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	13,037.
4 Amount you want refunded to you	4	2,080.
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

0	6	3	3	2
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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.

2	2	2	4	9	6	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 [X] Single [] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Form fields for personal information: Your first name and middle initial (DHIVYA), Last name (VENKATESAN), Your social security number (731-30-6332), Spouse's social security number, Home address (300S RANKIN STREET, EDMOND, OK, 73034), and Presidential Election Campaign checkboxes.

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [] Yes [X] 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, 1958 [] Are blind Spouse: [] Was born before January 2, 1958 [] Is blind

Table for Dependents with columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents.

Main income table with rows 1a through 15, including sub-rows (2a-6a, 7-15) for detailed income and deduction reporting. Total taxable income: 69,701.

Table with columns for line numbers (16-24), descriptions (Tax and Credits), and amounts. Total tax is 10,957.

Table for Payments (lines 25-33). Includes federal income tax withheld (13,037) and total payments (13,037).

Table for Refund (lines 34-36). Shows overpaid amount of 2,080 and amount applied to 2023 estimated tax.

Table for Amount You Owe (lines 37-38). Shows amount you owe and estimated tax penalty.

Third Party Designee section with checkboxes for Yes/No and fields for name, phone, and PIN.

Sign Here section with signature lines for taxpayer and spouse, occupation (SOFTWARE ENGINEER), and ID Protection PIN fields.

Paid Preparer Use Only section with fields for preparer name, signature, date, PTIN, firm name, address, and phone number.

**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

2022
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
DHIVYA VENKATESAN

Your social security number
731-30-6332

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	0.
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	-9,480.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	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	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABL account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
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	-9,480.

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

Schedule 1 (Form 1040) 2022

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 8l 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 8m	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.)

2022
Attachment
Sequence No. **13**

Department of the Treasury
Internal Revenue Service

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

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

Name(s) shown on return

Your social security number

DHIVYA VENKATESAN

731-30-6332

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 2022 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 36/6CHIDHAMBARAM PILLAR ST KALLAKURICHI TAMIL NADU IN 606202

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	B	C	
A 3		365		0	<input type="checkbox"/>
B					<input type="checkbox"/>
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	3 560.		
4 Royalties received	4		
Expenses:			
5 Advertising	5		
6 Auto and travel (see instructions)	6		
7 Cleaning and maintenance	7 1,460.		
8 Commissions	8		
9 Insurance	9		
10 Legal and other professional fees	10		
11 Management fees	11 1,200.		
12 Mortgage interest paid to banks, etc. (see instructions)	12		
13 Other interest	13		
14 Repairs	14 2,230.		
15 Supplies	15 2,500.		
16 Taxes	16		
17 Utilities	17 2,650.		
18 Depreciation expense or depletion	18		
19 Other (list) _____	19		
20 Total expenses. Add lines 5 through 19	20 10,040.		
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 -9,480.		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (9,480.)		
23a Total of all amounts reported on line 3 for all rental properties	23a 560.		
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 10,040.		
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 (9,480.)		
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 -9,480.		

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-9,480.

Schedule E (Form 1040) 2022



Oklahoma Individual Income Tax Declaration for Electronic Filing

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.

2022
Form 511-EF

Your first name and middle initial DHIVYA	Last name VENKATESAN
If a joint return, spouse's first name and middle initial	Last name
Mailing address (number and street, including apartment number, rural route or PO Box) 300S RANKIN STREET 53	
City, State, ZIP EDMOND OK 73034	

Your social security number: **731306332**

Spouse's social security number:

Filing status: **1**

Total number of exemptions: **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 8)	1	82651	00
2	Oklahoma Income Tax and Use Tax (511, Line 20 or 511-NR, Line 24)	2	3389	00
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line 33)	3	3889	00
4	Refund (511, Line 37 or 511-NR, Line 38)	4	500	00
5	Balance Due (511, Line 42 or 511-NR, Line 43)	5	0	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 2022 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 2022 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
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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 2022). 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	01/31/2023 Date	_____ PTIN
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Paid Preparer Use Only

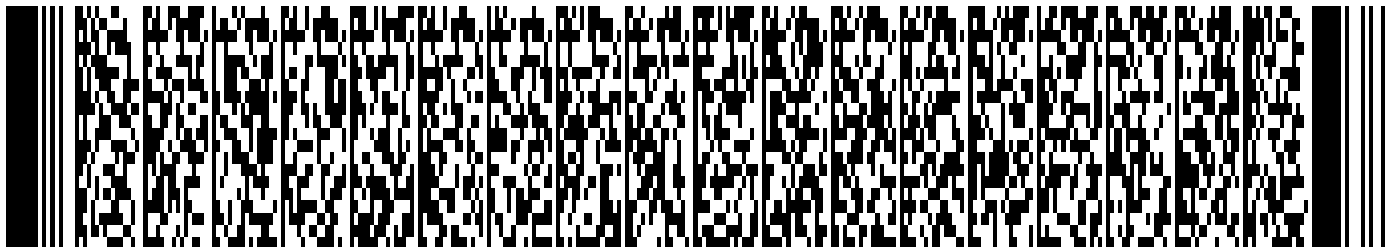
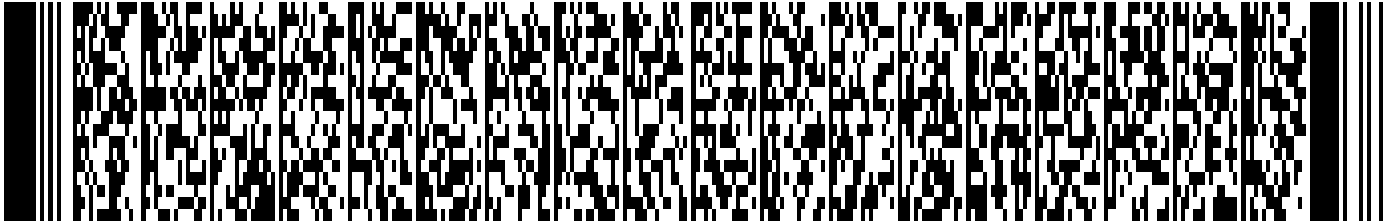
_____ Paid Preparer Signature	01/31/2023 Date	P02082703 PTIN
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Firm Name (or yours if self-employed): SYAM PRIYA RAM SAGAR GUPTA TALLAM

Address and ZIP: 245 ROONEY CT E BRUNSWICK NJ 08816

Phone Number: (678) 965-9522

**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 Resident Income Tax Return

Form 511
2022



Your Social Security Number 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. See Schedule 511-I.

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	
DHIVYA		VENKATESAN				
Mailing Address (Number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
300S RANKIN STREET, APT. 53			EDMOND	OK	73034	

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 and SSN in the boxes)

Name	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 9 of 511 Packet.

	Regular	* Special	Blind	
Exemptions	1	+	+	= 1 (a)
	0	+	+	
Number of dependents				= (c)
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.

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

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME

		Round to Nearest Whole Dollar	
1	Federal adjusted gross income (from Federal 1040 or 1040-SR).....	1	82651 00
2	Oklahoma Subtractions (provide Schedule 511-A).....	2	00
3	Line 1 minus line 2.....	3	82651 00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see instructions).....	4b	00
5	Line 3 minus line 4b.....	5	82651 00
6	Oklahoma Additions (provide Schedule 511-B).....	6	00
7	Oklahoma adjusted gross income (line 5 plus line 6)..... (If line 7 is different than line 1, provide a copy of your Federal return.)	7	82651 00

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

8	Oklahoma Adjustments (provide Schedule 511-C).....	8	00
9	Oklahoma income after adjustments (line 7 minus line 8).....	9	82651 00

STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-E and do not complete lines 10-11.



Name(s) Shown
on Form 511: DHIVYA VENKATESAN

Your Social Security Number: 731-30-6332

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued

10	Oklahoma itemized deductions (from Schedule 511-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Widow(er): \$12,700 • Head of Household: \$9,350).....	10	6350	00
11	Exemptions: Enter the total number of exemptions claimed on page 1..... <input type="text" value="1"/> X \$1,000.....	11	1000	00
12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5).....	12	7350	00
13	Oklahoma Taxable Income (line 9 minus line 12)	13	75301	00
14	(a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14	14a	3389	00
	(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 OS Sec. 2368(K), add the installment payment here and enter a "4" in the box on line 14	14b		00
	Oklahoma Income Tax (line 14a plus line 14b)	14	3389	00

STOP AND READ: If line 7 is equal to or larger than line 1, complete line 15. If line 7 is smaller than line 1, complete Schedules 511-F and 511-G.

15	Oklahoma child care/child tax credit (see instructions).....	15		00
16	Credit for taxes paid to another state (provide Form 511TX).....	16		00
17	Form 511CR - Other Credits Form. List 511CR line number claimed here:..... <input type="text"/>	17		00
18	Income Tax (line 14 minus lines 15-17) Do not enter less than zero	18	3389	00

DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42.

PART THREE: TAX, CREDITS AND PAYMENTS

19	Use tax due on Internet, mail order, or other out-of-state purchases..... (For use tax table, see page 14 of the Packet) If you certify that no use tax is due, place an 'X' here: <input checked="" type="checkbox"/>	19		00
20	Balance (add lines 18 and 19)	20	3389	00
21	Oklahoma withholding (provide all W-2s, 1099s or other withholding statements) ..	21	3889	00
22	2022 estimated tax payments (qualified farmer <input type="checkbox"/>)	22		00
23	2022 payment with extension	23		00
24	Low Income Property Tax Credit (provide Form 538-H).....	24		00
25	Sales Tax Relief Credit (provide Form 538-S).....	25		00
26	Natural Disaster Tax Credit (provide Form 576).....	26		00
27	Credit from Form 578	27		00
28	Oklahoma earned income credit (see instructions).....	28	0	00
29	Amount paid with original return plus additional paid after it was filed (amended return only).....	29		00



Name(s) Shown on Form 511: **DHIVYA VENKATESAN**

Your Social Security Number: **731-30-6332**

PART THREE: TAX, CREDITS AND PAYMENTS continued

30	Payments and credits (add lines 21-29 from page 2).....	30	3889	00
31	Overpayment, if any, as shown on original return and/or prior amended return(s) or as previously adjusted by Oklahoma (amended return only).....	31		00
32	Total payments and credits (line 30 minus 31).....	32	3889	00

PART FOUR: REFUND

33	If line 32 is more than line 20, subtract line 20 from line 32. This is your overpayment.....	33	500	00
34	Amount of line 33 to be applied to 2023 estimated tax (original return only) (For further information regarding estimated tax, see page 5 of the 511 Packet.)	34		00

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

35	Donations from your refund (total from Schedule 511-H).....	35		00
36	Total deductions from refund (add lines 34 and 35).....	36		00
37	Amount to be refunded to you (line 33 minus line 36).....	37	500	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 511 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: **3 2 2 2 7 1 6 2 7**

Savings Account Account Number: **3 1 3 1 9 7 2 2 7**

PART FIVE: AMOUNT YOU OWE

38	If line 20 is more than line 32, subtract line 32 from line 20. This is your tax due.....	38		00
39	Donation: Public School Classroom Support Fund (original return only).....	39		00
40	Underpayment of estimated tax interest (annualized installment method <input type="checkbox"/>).. (If you have an underpayment of estimated tax (line 40) & overpayment (line 33), see instructions.)	40		00
41	For delinquent payment add penalty of 5% \$ _____ plus interest of 1.25% per month \$ _____	41		00
42	Total tax, donation, penalty and interest (add lines 38-41).....	42		0 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 _____	Spouse's Signature _____ Date _____	Paid Preparer's Signature _____ Date 01/31/2023
Taxpayer's Occupation SOFTWARE ENGINEER	Spouse's Occupation _____	Paid Preparer's Address and Phone Number (678) 965-9522
Daytime Phone (optional) _____	Daytime Phone (optional) _____	245 ROONEY CT
		E BRUNSWICK NJ 08816
		Paid Preparer's PTIN P02082703

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
 The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.