

Indiana Part-Year or Full-Year Nonresident Individual Income Tax Return

2022

Your Social Security Number Place "X" in box if amending Your Social Security Number 628 78 6040 Security Number		(R21 / 9-22) If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY	/· ·	ril 18, 2023
Your Social Security Number Place "X" in box if applying for ITIN Your first name Place "X" in box if applying for ITIN Your first name Place "X" in box if applying for ITIN SUJAN If filing a joint return, spouses first name Initial Last name Suffix SUJAN Present address (number and street or rural route) Place "X" in box if you are married filing separately. City State ZIP/Postal code MELEOURNE Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you lived you worked O County where you lived and more spouse ined spouse worked 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A findiana Income 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A findiana Income 2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 2. 0.00 3. Add line 1 and line 2 4. Enter amount from Schedule C, line 12, and enclose Schedule D, line 9, and enclose Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D 7. Subtract line 4 from line 3 8. State adjusted Gross Income 7. 2572. 0.0 8. State adjusted gross income tax: mutiliply line 7 by 3.23% (0323) (if answer is less than zero, leave blank) 9. 0.00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10. Other taxes.		from to:		
Security Number 62.8 7.8 60.40 Security Number Place "X" in box if applying for ITIN Your first name Place "X" in box if applying for ITIN Suffix SUJAN Iffiling a joint return, spouse's first name Initial Last name Suffix			ii dinondiii	9 🗀
Place "X" in box if applying for ITIN Your first name Initial Last name Suffix SUJAN If filing a joint return, spouse's first name Present address (number and street or rural route) Place "X" in box if you are married filing separately. City State ZIP/Postal code FL 32 935 Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where County where Spouse lived Spouse worked Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Section 3, line 36B, and enclose Schedule A first Enter here the amount from Schedule B indiana Add-Backs 2				
Vour first name		Security Number 020 70 0040 Security Number		
SUJAN CALIVEETI If filing a joint return, spouse's first name Initial Last name Suffix		Place "X" in box if applying for ITIN	ox if applying for ITIN	l
If filing a joint return, spouse's first name Initial Last name Suffix Present address (number and street or rural route) 2880 N WICKHAM ROAD 702 Place "X" in box if you are married filing separately. City State ZIP/Postal code MELBOURNE FL 32935 Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where op on County where spouse lived spouse worked Round all entries 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A Indiana Income 1 2600, 00 2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 2 00 3. Add line 1 and line 2 3 2600, 00 4. Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions 4 00 5. Subtract line 4 from line 3 5 2600, 00 6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Adjusted Gross Income 7 2572, 00 7. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7 2572, 00 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) 8 83, 00 9. County tax. Enter county tax due from Schedule C T-40PNR 9 0, 00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10		Your first name Initial Last name		Suffix
Present address (number and street or rural route) Present address (number and street or rural route)		SUJAN GALIVEETI		
City State ZIP/Postal code MELBOURNE Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you worked 00 County where spouse lived spouse worked 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A lindiana Income Indiana Income India		If filing a joint return, spouse's first name Initial Last name		Suffix
City State ZIP/Postal code MELBOURNE Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you worked 00 County where spouse lived spouse worked 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A lindiana Income Indiana Income India				
City State ZIP/Postal code MELBOURNE Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you worked 00 County where spouse lived spouse worked 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A lindiana Income Indiana Income India		Present address (number and street or rural route)		
City State ZIP/Postal code MELBOURNE FL 32 93 5 Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you lived OO County where spouse lived spouse worked spouse worked on Jan. 1, 2022. County where you lived OO Rounty where spouse lived spouse worked spouse worked shedule A first. Enter here the amount from Section 3, line 36B, and enclose Indiana Income 1 2600 00 2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 2 000 3. Add line 1 and line 2 1 3 2600 00 4. Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions 4 000 5. Subtract line 4 from line 3 5 2600 000 6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions 6 28 000 7. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7 2572 000 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 9 0 0 000 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10 000				
Foreign country 2-character code (see instructions) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you lived OO County where spouse lived spouse worked Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Indiana Income Round all entries 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Indiana Income Round all entries 2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 2			•	ately
Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where you lived				
Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on Jan. 1, 2022. County where oo county where you worked oo Schedule County where spouse lived spouse worked and spouse work			2935	
worked on Jan. 1, 2022. County where you lived		Foreign country 2-character code (see instructions)		
worked on Jan. 1, 2022. County where you lived				
worked on Jan. 1, 2022. County where you lived		Enter below the 2 digit county and numbers (found on the back of Schodule CT 40DND) for the	ounty whore you live	land
Spouse lived Spouse worked			ounty where you lived	anu
Round all entries 1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A Indiana Income 1 2600.00 2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 200 3. Add line 1 and line 2				
1. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose Schedule A		you lived you worked spouse lived spouse	se worked	
Schedule A			Round all en	tries
2. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 200 3. Add line 1 and line 23 260000 4. Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions 400 5. Subtract line 4 from line 35 260000 6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions 62800 7. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7257200 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank)	1.			
3 2600.00 4. Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions 4 .00 5. Subtract line 4 from line 3 .00 6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions 6 .28.00 7. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7 .2572.00 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 8 .00 9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 9 .00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10 .00			4	600 00
4. Enter amount from Schedule C, line 12, and enclose Schedule C	2.	ochedule A indiana income	1 2	600.00
4. Enter amount from Schedule C, line 12, and enclose Schedule C	2			
5 2600.00 6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions 6 28.00 7. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7 2572.00 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 8 83.00 9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 9 0.00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10	٥.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs	2	.00
6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D	4.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs	2	.00
6. You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D	5	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2	3 2	600.00
and enclose Schedule D		Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions	3 2	.00
7. Subtract line 6 from line 5		Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions	3 2	.00
8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 9 0.00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.)		Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9,	2 3 2 4 5 2	600.00
8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.)		Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9,	2 3 2 4 5 2	600.00
9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.)	6. 7.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions Subtract line 6 from line 5 Indiana Adjusted Gross Income	2 3 2 4 5 2	600.00
(if answer is less than zero, leave blank) 9 0.00 10. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.) 10 00	6. 7.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions Subtract line 6 from line 5 Indiana Adjusted Gross Income State adjusted gross income tax: multiply line 7 by 3.23% (.0323)	2 3 2 4 5 2 6 7 2	600.00
	6. 7. 8.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions Subtract line 6 from line 5 Indiana Adjusted Gross Income State adjusted gross income tax: multiply line 7 by 3.23% (.0323) [8 83.0]	2 3 2 4 5 2 6 7 2	600.00
	6. 7. 8.	Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs Add line 1 and line 2 Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions Subtract line 4 from line 3 You must complete Schedule D. Enter amount from Schedule D, line 9, and enclose Schedule D Indiana Exemptions Subtract line 6 from line 5 Indiana Adjusted Gross Income State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) 8 83.0 County tax. Enter county tax due from Schedule CT-40PNR	2 3 2 4 5 2 6 7 2	600.00
11. Add lines 8, 9 and 10. Enter total here and on line 15 on the back Indiana Taxes11 83.00	6. 7. 8. 9.	Enter amount from Schedule B, line 6, and enclose Schedule B	2 3 2 4 5 2 6 7 2	600.00
	6. 7. 8. 9.	Enter amount from Schedule B, line 6, and enclose Schedule B	2 3 2 4 5 2 6 7 2	600.00



12.	Enter credits from Schedule F, line 12 (enclose schedule)	12	113.00		
13.	Enter offset credits from Schedule G, line 8 (enclose schedule)	13	.00		
14.	Add lines 12 and 13		Indiana Credits	14	113.00
15.	Enter amount from line 11		Indiana Taxes	15	83.00
16.	If line 14 is equal to or more than line 15, subtract line 15 from lin	ne 14	(if smaller, skip to line 23)	16	30.00
17.	Enter donations from Schedule IN-DONATE (enclose schedule);	cann	ot be greater than line 16	17	.00
18.	Subtract line 17 from line 16		Overpayment	18	30.00
19.	Amount from line 18 to be applied to your 2023 estimated tax ac	count	(see instructions).		
	Enter your county code county tax to be applied\$	а	.00		
	Spouse's county code county tax to be applied\$	b	.00		
	Indiana adjusted gross income tax to be applied\$	С	.00		
	Total to be applied to your estimated tax account (a + b + c; can	not be	more than line 18)	19d	.00
20.	Penalty for underpayment of estimated tax from Schedule IT-22	10 or I	T-2210A	20	.00
21.	Refund: Line 18 minus lines 19d and 20. Note: If less than zero, se	ee line	23 instructions Your Refund	21	30.00
22.	a. Routing Number 0 3 1 1 7 6 1 1 0 b. Account Number 1 7 6 9 8 8 7 2 2 c. Type: X Checking Savings Hoosier World Discount Outside 1				
23.	If line 15 is more than line 14, subtract line 14 from line 15. Add to (see instructions)		-	23	.00
24.	Penalty if filed after due date (see instructions)			24	.00
25.	Interest if filed after due date (see instructions)			25	.00
26.	Amount Due: Add lines 23, 24 and 25	able to):	26	.00
Sig	n and date this return after reading the Authorization stateme	ent on	Schedule H. You must end	close Sched	lule H (both pages).
You	ır Signature Date	S	pouse's Signature		Date
. 14	analoging narment mail to Indiana Department of Revenue RO	Doy.	7004 Indiananalia IN 40007	7004	

- If enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 46207-7224.
- Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.







SUJAN GALIVEETI

Schedule A Section 1: Income or Loss

(Complete Proration, Section 2 and Section 3 on back)

2022

Enclosure Sequence No. 01 Page 1 of 2

6040

Name(s) shown on Form IT-40PNR

Your Social Security Number

628

78

104	etion 1: Income or (Loss) Enter in Column A the same in 0, Form 1040-SR, and Form 1040 Schedule 1 (except for ructions). Round all entries.				
11151	ructions). Nourid all entities.		Column A om Federal Return		Folumn B Faxed by Indiana
1.	Your wages, salaries, tips, commissions, etc	1A	86770.00	1B	2600.00
2.	Spouse's wages, salaries, tips, commissions, etc	2A	.00	2B	.00
3.	Taxable interest income	3A	.00	3B	.00
	Dividend income	4A	.00	4B	.00
5.	Taxable refunds, credits, or offsets of state and local taxes from your federal return	5A	.00	5B	.00
6.	Alimony received	6A	.00	6B	.00
	Business income or loss from federal Schedule C	7A	.00	7B	.00
8.	Capital gain or loss from sale or exchange of property from your federal return	8A	.00	8B	.00
9.	Other gains or (losses) from Form 4797	9A	.00	9B	.00
10.	Taxable IRA distribution	10A	.00	10B	.00
	Taxable pensions and annuities	11A	5909.00	11B	0.00
12.	Net rent or royalty income or loss reported on federal Schedule E	12A	.00	12B	.00
13.	Income or loss from partnerships	13A	.00	13B	.00
14.	Income or loss from trusts and estates	14A	.00	14B	.00
15.	Income or loss from S corporations	15A	.00	15B	.00
16.	Farm income or loss from federal Schedule F	16A	.00	16B	.00
17.	Unemployment compensation	17A	.00	17B	.00
	Taxable Social Security benefits	18A	.00	18B	.00
19.	Indiana apportioned income from Schedule IT-40PNRA			19B	.00
20.	Other income reported on your federal return	20A	1300.00	20B	0.00
	List source(s). (Do not include federal net operating loss	in Column B. Se	e instructions.)		
	OTHER INCOME FROM FEDERAL Subtotal: add lines 1 through 20	21 A	93979 00	21R	2600 00







Schedule A Proration; Section 2: Adjustments to Income

Enclosure Sequence No. 01A Page 2 of 2

Proration Section See instructions.

21C. Note: Nonresident military personnel see special instructions and complete worksheet	IC		.00
21D. For all other individuals, divide the amount on line 21B by the amount on line 21A (see instructions			
if either line 21A and/or 21B are less than zero). Please round your answer to a decimal followed by three numbers. Example: \$3,100 ÷ \$8,000 = .3875, which rounds to .388 (do not enter a			
number greater than 1.00). Enter result here and on Schedule D, line 7	21D	0.028	

Section 2: Adjustments to Income Note: Enter in Column A Form 1040, Form 1040-SR, and Form 1040, Sch	-	•	2022 federal income	tax return,
Form 1040, Form 1040-SR, and Form 1040, Sch	Column A Federal Adjustme		Columr Indiana Adjus	_
22. Educator expenses (see instructions)	22A	.00	22B	.00
23. Certain business expenses of reservists, performing artists, etc	23A	.00	23B	.00
24. Health savings account deduction	24A	.00	24B	.00
25. Moving expenses (see instructions)	25A	.00	25B	.00
26. Deductible part of self-employment tax	26A	.00	26B	.00
27. Self-employed, SEP, SIMPLE, and qualified plans	27A	.00	27B	.00
28. Self-employed health insurance deduction	28A	.00	28B	.00
29. Penalty on early withdrawal of savings	29A	.00	29B	.00
30. Alimony paid	30A	.00	30B	.00
31. IRA deduction	31A	.00	31B	.00
32. Student loan interest deduction (see instructions)	32A	.00	32B	.00
33. Reserved for future use	33A	.00	33B	.00
34. Other (see instructions)	34A	.00	34B	.00
35. Add lines 22 through 34	35A	.00	35B	.00
Section 3: Totals				
36. Subtract line 35 from line 21 of Section 1. Carry amount from line 36B to Form IT-40PNR, line 1	36A 939	79.00	36B	2600.00



Schedule D: Exemptions

2022

Enclosure Sequence No. **04**

Name(s) shown on Form IT-40PNR	Your Social	Securi	ty Number
SUJAN GALIVEETI	628	78	6040
Complete and enclose Schedule IN-DEP: Dependent Information and Additional D dependents on lines 2 and/or 3 below. Complete and enclose Schedule IN-DEP-A: claiming dependents on line 6 below.	-		nformation if you are
			Round all entries
1. Enter \$2000 if you are married filing jointly; otherwise, enter \$1000		1	1000.00
Enter the number of dependents listed on Schedule IN-DEP, Box 6 x \$1 You MUST enclose Schedule IN-DEP.	1000	2	.00
 3. You may claim an additional exemption for each qualifying dependent child: who is a son, stepson, daughter, stepdaughter, foster child and/or child for whelegal guardian; who was under the age of 19 by Dec. 31, 2022; or who is a full-time student who was under the age of 24 by Dec. 31, 2022; and who you are eligible to claim as a dependent on line 2 above. 	·		
Enter the number of additional dependents listed on Schedule IN-DEP, Box 7. x \$1500		3	.00
4. Place "X" in box(es) below if, by December 31, 2022 You were age 65 or older and/or blind			
Spouse was 65 or older and/or blind Total number of boxes with Xs x \$1000		4	.00
 5. If age 65 or older, enter amount from Schedule A, line 36A \$ If filing as married filing separately and this amount is less than \$20,000, place the "You were age 65 or older" box below. For all other filers age 65 or older, if this amount is less than \$40,000, place "appropriate box(es) below. You were age 65 or older Spouse was 65 or older 			
Total number of boxes with Xs x \$500		5	.00
6. Enter the number of additional adopted child exemptions listed on Schedule IN-DEP-A, Box 6 x \$3000		6	.00
7. Add lines 1, 2, 3, 4, 5 and 6		7	1000.00
8. Enter the number from Schedule A, Proration Section, line 21D		8	0.028
9. Multiply line 7 by line 8. Enter here and on Form IT-40PNR, line 6 To	otal Exemptions	9	28.00

Schedule F: Credits

2022

Enclosure Sequence No. 05

Name(s) shown on Form IT-40PNR	Your Social S	Security N	umber
UJAN GALIVEETI	628	78	6040
		Ro	ound all entries
Indiana state tax withheld: See instructions		1	82.00
2. Indiana county tax withheld: See instructions		2	31.00
3. Estimated tax paid for 2022: include any extension payment made with Form IT	·-9	3	.00
4. Unified tax credit for the elderly		4	.0
5. Earned income credit: see instructions Enter earned income credit from Schedule IN-EIC, line A-3Box A	.00		
Enter number from Schedule A, Proration Section, line 21D Box B	•		
Multiply Box A by Box B, enter total here_		5	.00
6. Lake County residential income tax credit		6	.00
7. Economic development for a growing economy credit. Enter amount from Schedline 19 (enclose schedule)		7	.00
Economic development for a growing economy retention credit. Enter amount fr Schedule IN-EDGE-R, line 19 (enclose schedule)		8	.00
eadquarters relocation credit (refundable portion - see instructions)		9	.00
10. doption Credit		10	.00
11. 2022 dditional Automatic Taxpayer Refund: See instructions		11	.00
12. Add lines 1 through 11. Enter total here and on Form IT-40PNR, line 12	Total Credits	12	113.00
Schedule IN-DONATE Important: The amount on line 2 cannot exceed the amount or	າ Form IT-40/IT-40P	PNR, line 1	6.
Donations: List fund name, 3-digit code and amount to be donated (see instruct)	tions)		
a. Enter fund name code	e no.	1a	.00
b. Enter fund name code	e no.	1b	.00
c. Enter fund name code	e no.	1c	.00
2. Add lines 1a through 1c. Enter total here and on Form IT-40/IT-40PNR, line 17	Total Donations	2	.00





Schedule H Section 1: Residency Information

(Complete Section 2: Additional Information on back)

2022

Enclosure Sequence No. 07 Page 1 of 2

(R13 / 9-22) Your Social Security Number Name(s) shown on Form IT-40PNR 78 SUJAN GALIVEETI List all state(s) and dates of your (and your spouse's, if filing jointly) residency during 2022. Enter 2-letter Section 1: Residency state name (e.g. "IL" for Illinois) or the letters "OC" if you were a resident of a foreign country (see instructions). Information **Example** State of Date From Date To Did you file a tax return with the state/country? Residence (MM/DD) (MM/DD) Place "X" in appropriate box. IL 01 2022 06 2022 Yes X 01 01 No 2022 2022 02 12 31 IN 06 Yes X No **Your information** (b) (a) (c) State of Date From Date To Did you file a tax return with the state/country? Residence Place "X" in appropriate box. (MM/DD) (MM/DD) FL 01 01 2022 31 2022 Yes X 2022 2022 **1B** 2022 2022 2022 2022 Spouse's information if married filing jointly (a) (b) (c) State of Date From Date To Did you file a tax return with the state/country? Place "X" in appropriate box. Residence (MM/DD) (MM/DD) 2022 2022 Yes No 2022 2022 2B 2022 2022 2C

Turn over to complete Section 2





2022

2022



Schedule H Section 2: Additional Required Information

2022

Enclosure Sequence No. **07A Page 2 of 2**

Section 2: Additional Information

 Federal filing information Are you filing a federal income tax return for 2022? Place "X" in appr 	ropriate box. Yes X No
Extension of time to file a. Place "X" in box if you have filed a federal extension of time to file	file, Form 4868, or made an online extension payment.
b. Place "X" in box if you have filed an Indiana extension of time to	o file, Form IT-9, or made an Indiana extension payment online.
3. Farm/Fishing income Place "X" in box if at least two-thirds of your gross income was made Important: If you placed an "X" in the box, you MUST attach Schedu	
4. Schedule IN-40PA filers. If you are eligible to file federal Form 885 Indiana Schedule IN-40PA, enclose Schedule IN-40PA and check the	
5. Date of death If any individual listed at the top of the IT-40PNR died during 2022, e	enter date of death (MM/DD).
	puse's date of death 2022
taxes due under this return. Also, my request for direct deposit of my Revenue (DOR) to furnish my financial institution with my routing nu ensure my refund is properly deposited. I grant permission to DOR to Social Security number(s) used on this return is correct. 6. Your daytime telephone number 3128829241 Your em address	mber, account number, account type and Social Security number to o contact the Social Security Administration to confirm that the
I authorize the Department to discuss my return with my personal representative. Yes No If yes, complete the information below.	Paid Preparer: Firm's Name (or yours if self-employed) GLOBAL TAXES LLC
Personal Representative's Name (please print)	IN-OPT on file with paid preparer if not filing electronically
	PTIN P02082703
Telephone number	Address 245 ROONEY CT
Address	City E BRUNSWICK
City	State NJ ZIP Code 08816
State ZIP Code	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA





Form IT-8879 State Form 53399

Indiana Individual Income Tax

DECLARATION OF ELECTRONIC FILING

Income Tax for the Tax Year January 1 - December 31, 2022

Do Not Mail This Form To DOR

,					IO DOIX
Submis	sion ID				
First Name and Middle Initial SUJAN	Last Name GALIVEETI			Your Social Secu 628 78 6	rity Number 5040
Spouse's First Name and Middle Initial	Spouse's Last Name			Spouse's Social	Security Number
Street Address City 2880 N WICKHAM ROAD 702 MR	 y Elbourne	State FL	ZIP Code 32935		Telephone Number 82 9241
	eturn Information (Se				
Federal Adjusted Gross Income	•		1.	90)	93979
Indiana Adjusted Gross Income			2.		2572
3. Total Indiana Tax			3.		83
4. Total State Tax Withheld			4.		82
5. Total County Tax Withheld			5.		31
6. Total Indiana Tax Credits			6.		113
7. Refund			7.		30
8. Amount You Owe			8.		
	Part II. Electronic	Settlement			
9. Type of settlement:		1			
☐ Direct Debit of Am	ount Owed Amount		Dat	te of Withdrawal	
10. Routing number: 0 3 1 1 7 6 1	1 0 Note: The	e first two digits	of the routing	g number must be	e 01 - 12 or 21 - 32
11. Account number: 1 7 6 9 8 8 7	2 2				Do Not Ma
12. Type of account:	gs	C			This Form
13. Place an "X" in the box if refund will go to a	n account outside the Uni	ted States. \square			To DOR
My request for direct deposit of my refund, or direct to furnish my financial institution with my routing it became its properly processed.	t debit of the amount I owe, number, account number, a	includes my au account type, a	thorization for nd social secu	the Indiana Depa urity number to er	artment of Reven nsure my refund
Under penalties of perjury, I declare that the inform corresponding lines of the electronic portion of my complete. I consent to my ERO sending my return using a computer system and software to prepare pertaining to my use of the system and software arond/or transmitter an acknowledgement of receipt reason(s) for the rejection. If the processing of my reason(s) for the delay of when the refund was set	income tax return. To the be n, this declaration, and acco and transmit my return elect and to the transmission of m of transmission and an indi return or refund is delayed,	O and the amouest of my knowle ompanying sche ctronically, I con y return electron cation of whethe	edge and belie edules and sta sent to the dis nically. I also co er or not my re	ef, my 2022 return atements to the D sclosure to the DC consent to the DOI eturn is accepted,	is true, correct and OR. In addition, IN of all information R sending my ER and, if rejected, the
Your PIN: Check one box only					
▼ I authorize GLOBAL TAXES LLC to en filed income tax return.	ter my PIN 8 6 0 4		gnature on m	y tax year 2022 e	electronically
☐ I will enter my PIN as my signature on my ta entering your own PIN and your return is file	x year 2022 electronically d using the Practitioner P	filed income to IN method. The	ax return. Che e ERO must c	eck this box only complete part IV	beľow.
Your signature ▶		D	ate		
Spouse's PIN: Check one box only					I
I authorize to en filed income tax return.	ter my PIN Do not enter all z		gnature on my	y tax year 2022 e	electronically
☐ I will enter my PIN as my signature on my ta entering your own PIN and your return is file	d using the Practitioner P	IN method. The	ERO must o	complete part IV	below.
Your signature ▶		D	ate		<i>P</i>
Part IV. Practitioner Cert	ification and Authenti	cation - Prac	titione <u>r PIN</u>	N Method ONL	Υ
ERO's EFIN/PIN. Enter your six-digit EFIN follow	wed by your five-digit self	selected PIN.	2 2	2 2 4 9 6	
certify that the above numeric entry is my PIN, vaxpayer(s) indicated above. I confirm that I am s	which is my signature for th ubmitting this return in acc	e tax year 2022 ordance with th	2 electronically ne requiremen	Do not enter y filed income tax nts of the Practitio	return for the

____ Date __

1030 REV 02/01/23 PRO

ERO's signature ▶ ___