



### 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

Se	ee instructions on Page 2 to determine if you are required to	send Form 511-EF to	the OIC.	
You	our first name and middle initial Last name	Your social		
_	SPANDANA CHITTALURI	security number:	158573962	
If a	a joint return, spouse's first name and middle initial Last name	Spouse's social security number:		
Ма	ailing address (number and street, including apartment number, rural route or PO Box)			
	813 MERCURY RD ity, State, ZIP		Filing status:	1
	EDMOND OK 73003		Total number of exemptions:	1
Р	PART ONE - TAX RETURN INFORMATION (WHOLE DOI	LLARS ONLY)		
$\vdash$	<b>`</b>			
1	Oklahoma Adjusted Gross Income (511, Line 7) or Adjusted Gross Income: All Sources (511-NR, Line 8)		1 3285	5 00
2				00
3				00
4		•		00 0
5				00
_				, 00
	For a balance due return with an electronic payment, complete line 6b be balance due return with a non-electronic payment, enclose a payment wi Internal Revenue Code (IRC) of the IRS provides for a later due date, you timely. If the due date falls on a weekend or legal holiday when OTC offic	th the 511-V and submit on r payment may be made by	or before the due date of April 15th. If t the later due date and will be consider	
Р	PART TWO - DECLARATION OF TAXPAYER			
	6a X I consent that my refund be directly deposited as designated in t			
	Ch.	,		
	I authorize the Oklahoma State Treasury and its designated Fina entry to the financial institution account indicated in the tax prepared and/or a payment of estimated tax. I also authorize the financial	aration software for payment	of my Oklahoma taxes owed on this retur	'n
	receive confidential information necessary to answer inquiries ar			
rem	have filed a balance due return, I understand that if the Oklahoma Tax Commiss main liable for the tax liability and all applicable interest and penalties.			
nat retu	nder penalties of perjury, I declare I have compared the information contained on itor (ERO), and the amounts described in Part One above, agree with the amoun turn. To the best of my knowledge and belief, my return is true, correct, and comp hedules and statements, be sent to the OTC by my ERO.	its shown on the correspondir	ng lines of my 2022 Oklahoma income ta:	х
	addition, by using a computer system and software to prepare and transmit my r ssion of all information pertaining to my use of the system and software and to the			om-
Sig				
Her		use's Signature (If joint return,	both must sign) Date	
Р	PART THREE - DECLARATION OF ELECTRONIC RETURN O	RIGINATOR (ERO) ANI	D PAID PREPARER	
lect the othe per	eclare I have reviewed the above taxpayer's return and the entries on Form 511-El ctors are not responsible for reviewing the taxpayer's return; however, they must ene taxpayer's signature on Form 511-EF and I have provided the taxpayer with a copner requirements described in Pub. 1345, Handbook for Electronic Filers of Individual Inalties of perjury I declare I have examined the above taxpayer's return and accomplief, they are true, correct, and complete. This Paid Preparer declaration is based of	Isure Form 511-EF accurately by of all forms and information all Income Tax Returns (Tax Yon panying schedules and stater	reflects the data on the return.) I have obta to be filed with the OTC, and have followe ear 2022). If I am also a Paid Preparer, un- ments, and to the best of my knowledge an	ained d all der
	RO Use	0.4./1.0./0.003		
Onl		04/18/2023 Pate PTIN		
Dair	id Preparer			
	e Only	04/18/2023 P02 Pate PTIN	2470833	
Fir	rm Name (or yours if self-employed): VENKATA SAI PAVAN KUMAR DI			
	Address and ZIP: 245 ROONEY CT E BRUNSWICK	NJ 08816		
	Phone Number: (678_)965-9522		REV 01/20/23 PRO	

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









#### Form 511 2022



### **Oklahoma Resident Income Tax Return**

Your	Social Security Number	Spouse's Social Security Number (joint return only)					AMENDED RETURN!					
1	158-57-3962	Place an 'X' in this box if this taxpayer is deceased	,,,		bo	ace an 'X' in th x if this taxpa deceased —	yer	this is	an 'X' in thi s an amende dule 511-l.			
Nan	ne and Address - Please Pri	int or Type										
Your F	First Name	Middle Initial Last Name		If a Joint Return,	Spouse's Fi	rst Name	Middle Initia	ıl Last Na	ame			
SPA	ANDANA	CHITTALU	IJRI									
	g Address (Number and street, including					State	ZIP or Post	al Code	Country	,		
813	B MERCURY RD		EDM	IOND		OK	73003					
Filing Status	3 Married filing sepa (If spouse is also final separation of the s	filing, list name and SSN i	,	Exemptions Note: If yo	Yourself Spouse Add the To	1 + 0 + Numbe	* Special  r of depen  oxes (a), (b)  r the TOTA  a dependen	Blind  dents  and (c). L here:		1	(a) (b) (c)	the
	, , , ,	er) with dependent child spouse died in box at right	t:	Age 65 o	or Older?	(Please see	instructions)		Yoursel	f	Spou	ise
PA	RT ONE: TO ARRIVE	AT OKLAHOMA AI	DJUSTED G	ROSS INCO	OME			Ro	und to Ne	arest '	Whole D	ollar
4		(frame Fadaral 1010 a	4040 CD)					4			2005	00
1	Federal adjusted gross inco	ome (nom Federal 1040 c	)1 1040-5K)					1			3285	00
2	Oklahoma Subtractions (pro	ovide Schedule 511-A)						2				00
3	Line 1 minus line 2							3			3285	00
4	Out-of-state income, except		netructions)					4b				00
5	(Provide Federal schedule with detailed description; see instructions)							5			3285	
6 Oklahoma Additions (provide Schedule 511-B)							6				00	
7	Oklahoma adjusted gross (If line 7 is different than	income (line 5 plus line n line 1, provide a copy	6) of your Federa	al return.)				7			3285	00
PA	RT TWO: OKLAHOMA	A TAXABLE INCOM	IE, TAX AND	CREDITS								
8	Oklahoma Adjustments (pro	ovide Schedule 511-C)						8				00
9	Oklahoma income after adju	ustments (line 7 minus lin	ne 8)					9			3285	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.



Your Social Name(s) Shown Security Number: 158-57-3962 on Form 511: SPANDANA CHITTALURI PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued 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)..... 6350 00 Exemptions: Enter the total number of exemptions claimed on page 1..... 1000 00 Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5)..... 7350 00 13 Oklahoma Taxable Income (line 9 minus line 12) -4065 00 (a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) 14 or if using Farm Income Averaging, enter tax from Form 573, line 22 and 0 00 enter a "1" in box on line 14 ...... 14a (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 0 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. 00 Oklahoma child care/child tax credit (see instructions)..... 16 Credit for taxes paid to another state (provide Form 511TX)..... 16 00 Form 511CR - Other Credits Form. List 511CR line number claimed here: 17 00 17 Income Tax (line 14 minus lines 15-17) Do not enter less than zero 0 00 DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42. PART THREE: TAX, CREDITS AND PAYMENTS 00 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: 0 00 20 10 00 21 Oklahoma withholding (provide all W-2s, 1099s or other withholding statements).. 21 00 22 2022 estimated tax payments ..... (qualified farmer 22 23 2022 payment with extension ..... 00 24 00 25 40 00 00 26 00 27 28 00 Amount paid with original return plus additional paid after it was filed 00 



Name(s) Shown on Form 511: SPANDANA CHITTALURI					Your Soc Security	Social ity Number: 158–57–3962			
PA	RT THREE: TAX, CREDITS AND PAYI	MENTS continued							
20	Payments and evadite (add lines 21.20 fr	om nago 2)				30	50 00		
Payments and credits (add lines 21-29 from page 2)						30	50 00		
as previously adjusted by Oklahoma (amended return only)						31	00		
32	Total payments and credits (line 30 minus	s 31)				32	50 00		
PA	RT FOUR: REFUND								
33	If line 32 is more than line 20, subtract line	20 from line 32. This is your over	payment			33	50 <b>00</b>		
34	Amount of line 33 to be applied to 2023 estimate	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `							
Scho	(For further information regarding estimated to dule 511-H provides you with the opportunity)	,	34		00				
your of the	refund to a variety of Oklahoma organizations e organization from Schedule 511-H in the box one organization, put a "99" in the box. Provid	. Please place the line number below. If you give to more							
35	Donations from your refund (total from Sch	edule 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 minu	us line 36)				37	50 00		
Di	rect Deposit Note:   Is this	refund going to or through an acco	ount that is located	outside (	of the Un	ited States?	Yes X No		
	•	sit my refund in my:					res × No		
are correct. If your direct deposit fails to process or you do not choose direct  X Checking Account  Number: 1 0 3 0 0 0 6 4 8									
deposit, you will receive a <u>debit card</u> .									
	it card information.	Savings Account Number:	793137362						
PA	ART FIVE: AMOUNT YOU OWE								
38	If line 20 is more than line 32, subtract line	32 from line 20. This is your tax d	ue			38	00		
39 Donation: Public School Classroom Support Fund (original return only)						39	00		
40	Underpayment of estimated tax interest (ar	nnualized installment method			)	40	00		
40	(If you have an underpayment of estimated				)	40	00		
41	For delinquent payment add penalty of 5%	\$ _							
plus interest of 1.25% per month\$						41	00		
Total tax, donation, penalty and interest (add lines 38-41)					42	0 00			
Undor	penalty of perjury, I declare the information contained in th	is document and all Place an 'Y' in t	nis box if the Oklahoma T	ax Commiss	sion				
	nents and schedules, is true and correct to the best of my	io document, una un	s return with your tax pre						
Taxpa	yer's Signature Date	Spouse's Signature	Date	Paid Prep	oarer's Sign	ature	Date		
Taxpa	Taxpayer's Spouse's Occupation WENKATA SAI PAVAI  Taxpayer's Spouse's Occupation Paid Preparer's A				SAI PAVAN K parer's Addi	UMAR DUDIPALLI ess and Phone N	04/18/2023 lumber(678)965-9522		
Occu	Occupation STUDENT Spouse's Occupation 245 ROONI						(0/8)905-9522		
Daytii (optio	ne Phone nal)	Daytime Phone (optional)		E BRI	UNSWI	CK	NJ 08816		
	(405)500-4544			Paid Pre	oarer's PTI	P024708	333		

<u>Do not staple</u> 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.

# State of Oklahoma Claim for Credit/Refund of Sales Tax

Other pensions, annuities and IRAs .....

Unemployment benefits .....



Taxpayer's Social Security Number:

Spouse's Social

6

7

158-57-3962

If died in 2022 or 2023, enter date of death:

enter date of death:

If died in 2022 or 2023,

Instructions on page 3. Please read carefully as an incomplete form may delay your refund. ☐

538-S

Security Number:		enter date of deat	.n:						
Taxpayer's First Name	Middle Initial		Spouse's	First Name (If a Joint	Return)	Middle Initial	Last Name	;	
SPANDANA		CHITTALURI							
Mailing Address (Number and street, in	cluding apartment num	nber, or rural route)	City				State	ZIP	
813 MERCURY RD			EDMOND				OK	73003	
PART 1: TAXPAYER I									
Physical Address in 2022 (If	different than sho	own in mailing addres	s section):						
Place an 'X' if you or y	our spouse have	a physical disability	constituting a su	ıbstantial handica	ap to empl	oyment (su	bmit proc	of)	
Place an 'X' if you or	your spouse are	65 years of age or ov	er Okl	ahoma resident f	for the enti	re year?	× ye	s	no
PART 2: DEPENDENT	Note: Do not e	enter the taxpayer or	spouse as a d	ependent.		FXFI	/PTION	INFOR	MATION
1. Dependents (first name, middle initial, last name)	If you have		See Instructions 5.Ye			III .	LIFIED EXEMPTIONS		
additional dependents, provide sche	dule. 2. Age	3. Social Security I	Number	4. Relationship	Income	$\dashv$			
						A. Your	self		1
				C. Num	ise her of				
							ndents		
							exemption ed (add A		1
PART 3: GROSS INCO	ME: Enter taxal	ble and nontaxable gro	oss income and a	ssistance receive	d by ALL m	embers of y	our house	ehold in the	e year 2022.
See "Total gross household	income" definit	tion on page 3 for ex	camples of inco	ome.				INCOMI	
1 Enter total wages, salarie (including <b>nontaxable</b> in		·	•		1	TOO MATT	TOT ENTER	NEGATIVE	3285 00
2 Enter total interest and d	ividend income re	eceived			2				00
3 Total of all dependents' i	ncome (from Par	t 2, column 5)			3				00
4 Social Security payments	s (total including	Medicare)			4				00
5 Railroad Retirement ben	efits				5				00

00

00

00

6

7

8







Name(s) Shown on Form 538-S:				Your Social Security Number:				
SPANDANA CHITTALURI		158-57-3962						
PART 3: GROSS INCOME: Ente	er taxable and nontaxable gross in	come and assistance received by A	ALL I	 members of your household in the year 2	022.			
See "Total gross household income" definition on page 3 for examples of income.				YEARLY INCOME YOU MAY NOT ENTER NEGATIVE AMOUNTS				
9 Earned Income Credit (EIC) receive	9		00					
10 Nontaxable sources of income (spe	10		00					
11 Enter <b>gross</b> (positive) income from from the sale or exchange of proper	11		00					
12 Enter <b>gross</b> (positive) income from	business and farm (provide Feder	ral return including schedules)	12		00			
13 Other income-including income of o	thers living in your household (sp	pecify)	13		00			
14 Total gross household income (A	dd lines 1-13)		14	3285	00			
If line 14 is over income limits sh	own in steps 2 and 3 on page	3, no credit is allowed.						
PART 4: SALES TAX CREDIT	COMPUTATION (For housel	holds with gross income below allow	able	limits, see steps 2 and 3 on page 3.)				
15 Total qualified exemptions claimed i	in Box D on page 1	1 x \$40 (credit claimed)	15	40	00			
DIRECT DEPOSIT OPTION: For	page 3 for Refund Information.		If you are filing a Form 511, carry to credit to Form 511, line 25.	he				
If the OTC may discuss this return with your tax preparer, place an 'X' here:    Sthis refund going to or through an account that is located out				of the United States? Yes	No			
	Savings Account	Account Number:						
Under penalty of perjury, I declare the information contained in th	is document and any attachments is true and correct	ct to the best of my knowledge and belief.						
Taxpayer's Signature and Date		Spouse's Signature and Date						
Occupation		Occupation						
STUDENT								
Preparer's Signature and Date								
VENKATA SAI PAVAN KUMAR DUDIPALLI	04/18/2023							