

If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY):

from    to:

Place "X" in box   
if amending

Your Social Security Number  085  47  2348

Spouse's Social Security Number

Place "X" in box if applying for ITIN

Place "X" in box if applying for ITIN

Your first name  NEELESH KUMAR  Initial  Last name  REDDYPELLI  Suffix

If filing a joint return, spouse's first name  Initial  Last name  Suffix

Present address (number and street or rural route)

510 MARSH TRAIL CIRCLE  Place "X" in box if you are married filing separately.

City  ATLANTA State  GA ZIP/Postal code  30328

Foreign country 2-character code (see instructions)

Enter below the **2-digit county code** numbers (found on the back of Schedule CT-40) for the county where you lived and worked on Jan. 1, 2022.

County where you lived  49 County where you worked  49 County where spouse lived  County where spouse worked

**Round all entries**

- |  |  |
|--|--|
| 1. Enter your federal adjusted gross income from your federal income tax return, Form 1040 or Form 1040-SR, line 11 _____ <b>Federal AGI</b> | <input type="text"/> 1 <input type="text"/> 41761 <input type="text"/> .00 |
| 2. Enter amount from Schedule 1, line 7, and enclose Schedule 1 _____ <b>Indiana Add-Backs</b>   | <input type="text"/> 2 <input type="text"/> <input type="text"/> .00       |
| 3. Add line 1 and line 2 _____   | <input type="text"/> 3 <input type="text"/> 41761 <input type="text"/> .00 |
| 4. Enter amount from Schedule 2, line 12, and enclose Schedule 2 _____ <b>Indiana Deductions</b>   | <input type="text"/> 4 <input type="text"/> <input type="text"/> .00       |
| 5. Subtract line 4 from line 3 _____   | <input type="text"/> 5 <input type="text"/> 41761 <input type="text"/> .00 |
| 6. Complete Schedule 3. Enter amount from Schedule 3, line 7, and enclose Schedule 3 _____ <b>Indiana Exemptions</b>                         | <input type="text"/> 6 <input type="text"/> 1000 <input type="text"/> .00  |
| 7. Subtract line 6 from line 5 _____ <b>Indiana Adjusted Gross Income</b>  | <input type="text"/> 7 <input type="text"/> 40761 <input type="text"/> .00 |
| 8. State adjusted gross income tax: multiply line 7 by 3.23% (.0323) (if answer is less than zero, leave blank) _____                        | <input type="text"/> 8 <input type="text"/> 1317 <input type="text"/> .00  |
| 9. County tax. Enter county tax due from Schedule CT-40 (if answer is less than zero, leave blank) _____                                     | <input type="text"/> 9 <input type="text"/> 823 <input type="text"/> .00   |
| 10. Other taxes. Enter amount from Schedule 4, line 4 (enclose schedule) _____   | <input type="text"/> 10 <input type="text"/> <input type="text"/> .00      |
| 11. Add lines 8, 9 and 10. Enter total here and on line 15 on the back _____ <b>Indiana Taxes</b>  | <input type="text"/> 11 <input type="text"/> 2140 <input type="text"/> .00 |



12. Enter credits from Schedule 5, line 12 (enclose schedule)   .00

13. Enter offset credits from Schedule 6, line 8 (enclose schedule)   .00

14. Add lines 12 and 13 \_\_\_\_\_ **Indiana Credits**   .00

15. Enter amount from line 11 \_\_\_\_\_ **Indiana Taxes**   .00

16. If line 14 is equal to or more than line 15, subtract line 15 from line 14 (if smaller, skip to line 23)   .00

17. Enter donations from Schedule IN-DONATE (enclose schedule); cannot be greater than line 16   .00

18. Subtract line 17 from line 16 \_\_\_\_\_ **Overpayment**   .00

19. Amount from line 18 to be applied to your 2023 estimated tax account (see instructions).  
 Enter your county code  county tax to be applied \_ \$   .00  
 Spouse's county code  county tax to be applied \_ \$   .00  
 Indiana adjusted gross income tax to be applied \_\_\_\_\_ \$   .00  
 Total to be applied to your estimated tax account (a + b + c; cannot be more than line 18) \_\_\_\_\_   .00

20. Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A \_\_\_\_\_   .00

21. **Refund:** Line 18 minus lines 19d and 20. Note: If less than zero, see line 23 \_\_\_ **Your Refund**   .00

22. **Direct Deposit** (see instructions)  
 a. Routing Number           
 b. Account Number                   
 c. Type:  Checking  Savings  Hoosier Works MC  
 d. Place an "X" in the box if refund will go to an account outside the United States

23. If line 15 is more than line 14, subtract line 14 from line 15. Add any amount to this on line 20 (see instructions) \_\_\_\_\_   .00

24. Penalty if filed after due date (see instructions) \_\_\_\_\_   .00

25. Interest if filed after due date (see instructions) \_\_\_\_\_   .00

26. **Amount Due:** Add lines 23, 24 and 25 \_\_\_\_\_ **Amount You Owe**   .00  
 Do not send cash. Make your check or money order payable to:  
 Indiana Department of Revenue. See instructions if paying with a credit card.

**Sign and date this return after reading the Authorization statement on Schedule 7. Remember to enclose Schedule 7.**

\_\_\_\_\_  
 Signature Date Spouse's Signature Date

- Mail payments 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.

Name(s) shown on Form IT-40

NEELESH KUMAR REDDYPELLI

Your Social Security Number

085 47 2348

Complete and enclose Schedule IN-DEP: Dependent Information and Additional Dependent Child Information if you are claiming dependents on lines 2 and/or 3 below. Complete and enclose Schedule IN-DEP-A: Adopted Dependent Information if you are claiming dependents on line 6 below.

Round all entries

1. Enter \$2000 if you are married filing jointly; otherwise, enter \$1000   1 1000 .00

2. Enter the number of dependents listed on Schedule IN-DEP, Box 6  x \$1000  2  .00  
You **MUST** enclose Schedule IN-DEP.

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 whom you are a legal 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 Dec. 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 Form IT-40, line 1.

- If filing as married filing separately and this amount is less than \$20,000, place "X" in 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 "X" in 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  
You **MUST** enclose Schedule IN-DEP-A.

7. Add lines 1, 2, 3, 4, 5 and 6. Enter here and on Form IT-40, line 6  **Total Exemptions** 7 1000 .00



Name(s) shown on Form IT-40

NEELESH KUMAR REDDYPELLI

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**Round all entries**

1. Indiana state tax withheld: See instructions _____	1	1463	.00
2. Indiana county tax withheld: See instructions _____	2	915	.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		.00
5. Earned income credit: enclose Schedule IN-EIC and enter amount from line <b>A-3</b> _____	5		.00
6. Lake County residential income tax credit _____	6		.00
7. Economic development for a growing economy credit. Enter amount from Schedule IN-EDGE, line 19 (enclose schedule) _____	7		.00
8. Economic development for a growing economy retention credit. Enter amount from Schedule IN-EDGE-R, line 19 (enclose schedule) _____	8		.00
9. Headquarters relocation credit (refundable portion - see instructions) _____	9		.00
10. Adoption Credit _____	10		.00
11. 2022 Additional Automatic Taxpayer Refund: See instructions _____	11		.00
12. Add lines 1 through 11. Enter total here and on Form IT-40, line 12 <b>Total Credits</b>	12	2378	.00

**Schedule IN-DONATE**

**Important:** The amount on line 2 cannot exceed the amount on Form IT-40/IT-40PNR, line 16.

1. Donations: List fund name, 3-digit code and amount to be donated (see instructions)

a. Enter fund name		code no.		1a		.00
b. Enter fund name		code no.		1b		.00
c. Enter fund name		code no.		1c		.00
2. Add lines 1a through 1c. Enter total here and on Form IT-40/IT-40PNR, line 17 <b>Total Donations</b>				2		.00



Name(s) shown on Form IT-40

Your Social Security Number

NEELES KUMAR REDDYPELLI

085 47 2348

1. Federal filing information

Are you filing a federal income tax return for 2022? Place "X" in appropriate box. Yes  No

2. Out-of-state income: Complete if you and/or your spouse (if filing a joint return) received any salary, wage, tip and/or commission income from Illinois, Kentucky, Michigan, Ohio, Pennsylvania or Wisconsin. Enter two-digit code number from the back of Schedule CT-40 for state where you and/or your spouse worked.

State where you worked  Your income \$  .  State where spouse worked  Spouse's income \$  .

3. Extension of time to file

- a. Place "X" in box if you have filed a federal extension of time to file, Form 4868, or made an online extension payment.
- b. Place "X" in box if you have filed an Indiana extension of time to file, Form IT-9, or made an Indiana extension payment online.

4. Farm/Fishing income

Place "X" in box if at least two-thirds of your gross income was made from farming or fishing.   
Important: If you placed an "X" in the box, you MUST attach Schedule IT-2210.

5. Schedule IN-40PA filers. If you are eligible to file federal Form 8857, Request for Innocent Spouse Relief, and are completing Indiana Schedule IN-40PA, enclose Schedule IN-40PA and check the box.

6. Date of death

If any individual listed at the top of the IT-40 died during 2022, enter date of death (MM/DD).

Taxpayer's date of death   2022 Spouse's date of death   2022

Authorization: Sign Form IT-40 after reading the following statement.

Under penalty of perjury, I have examined this return and all attachments and to the best of my knowledge and belief, it is true, complete and correct. I understand that if this is a joint return, any refund will be made payable to us jointly and each of us is liable for all taxes due under this return. Also, my request for direct deposit of my refund includes my authorization to the Indiana Department of Revenue (DOR) to furnish my financial institution with my routing number, account number, account type and Social Security number to ensure my refund is properly deposited. I grant permission to DOR to contact the Social Security Administration to confirm that the Social Security number(s) used on this return is correct.

7. Your daytime

telephone number  3179692177

Your email address

NEELESHKUMARREDDYPELLI

I authorize the Department to discuss my return with my personal representative.

Yes  No  If yes, complete the information below.

Personal Representative's Name (please print)

Telephone number

Address

City

State  ZIP Code

Paid Preparer: Firm's Name (or yours if self-employed)

GLOBAL TAXES LLC

IN-OPT on file with paid preparer if not filing electronically

PTIN  P02082703

Address  245 ROONEY CT

City  E BRUNSWICK

State  NJ ZIP Code  08816

Preparer's signature  SYAM PRIYA RAM SAGAR GUPTA

Name(s) shown on Form IT-40

Your Social Security Number

NEELESH KUMAR REDDYPELLI

085 47 2348

1. Enter the amount from IT-40, line 7. **Note:** If both you and your spouse lived in the same county on January 1, enter the entire amount from Form IT-40, line 7 on line 1A (do not complete Column B). See instructions \_\_\_\_\_

Column A - Yourself		Column B - Spouse's	
1A	40761.00	1B	.00

2. Enter the county tax rate from the chart on the back of this schedule for the county where you lived on Jan. 1, 2022 \_\_\_\_

2A	.0202000	2B	
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3. Multiply line 1 by the rate on line 2 (leave blank if less than zero)

3A	823.00	3B	.00
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4. Add lines 3A and 3B. Enter the total here. **Perry County residents: If you live in Perry County and worked in the Kentucky counties of Breckinridge, Hancock or Meade, you must complete lines 5 and 6.** Otherwise, enter the total here and on line 7 below (see instructions) \_\_\_\_\_

4	823.00
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5. Enter the amount of income that was taxed by certain Kentucky localities (see instructions) \_\_\_\_\_

5	.00
---	-----

6. Multiply line 5 by .0181 and enter total here \_\_\_\_\_

6	.00
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7. Enter total of line 4 minus line 6. Enter this amount on line 9 of Form IT-40 \_\_\_\_\_

7	823.00
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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

Submission ID [ ] [ ] [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ]

Form with fields for First Name and Middle Initial (NEELESH KUMAR), Last Name (REDDYPELLI), Your Social Security Number (085 47 2348), Spouse's First Name and Middle Initial, Spouse's Last Name, Spouse's Social Security Number, Street Address (510 MARSH TRAIL CIRCLE), City (ATLANTA), State (GA), ZIP Code (30328), and Daytime Telephone Number (317 969 2177).

Part I. Tax Return Information (See instructions on next page)

Table with 8 rows and 3 columns: Line number, Description, and Amount. Rows include Federal Adjusted Gross Income (41761), Indiana Adjusted Gross Income (40761), Total Indiana Tax (2140), Total State Tax Withheld (1463), Total County Tax Withheld (915), Total Indiana Tax Credits (2378), Refund (238), and Amount You Owe.

Part II. Electronic Settlement

9. Type of settlement: [X] Direct Deposit of Refund [ ] Direct Debit of Amount Owed. Amount [ ] Date of Withdrawal [ ]

10. Routing number: [0][7][4][0][0][0][0][1][0] Note: The first two digits of the routing number must be 01 - 12 or 21 - 32.

11. Account number: [7][5][6][8][1][0][5][8][3][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

12. Type of account: [X] Checking [ ] Savings [ ] Hoosier Works MC

13. Place an "X" in the box if refund will go to an account outside the United States. [ ]

My request for direct deposit of my refund, or direct debit of the amount I owe, includes my authorization for the Indiana Department of Revenue to furnish my financial institution with my routing number, account number, account type, and social security number to ensure my refund or payment is properly processed.

Part III. Declaration

Under penalties of perjury, I declare that the information I have given my ERO and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my income tax return. To the best of my knowledge and belief, my 2022 return is true, correct and complete. I consent to my ERO sending my return, this declaration, and accompanying schedules and statements to the DOR. In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure to the DOR of all information pertaining to my use of the system and software and to the transmission of my return electronically. I also consent to the DOR sending my ERO and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not my return is accepted, and, if rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize the DOR to disclose to my ERO and/or transmitter the reason(s) for the delay of when the refund was sent.

Your PIN: Check one box only

[X] I authorize GLOBAL TAXES LLC to enter my PIN [7][2][3][4][8] as my signature on my tax year 2022 electronically filed income tax return. Do not enter all zeros

[ ] I will enter my PIN as my signature on my tax year 2022 electronically filed income tax return. 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 IV below.

Your signature [ ] Date [ ]

Spouse's PIN: Check one box only

[ ] I authorize [ ] to enter my PIN [ ][ ][ ][ ][ ] as my signature on my tax year 2022 electronically filed income tax return. Do not enter all zeros

[ ] I will enter my PIN as my signature on my tax year 2022 electronically filed income tax return. 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 IV below.

Your signature [ ] Date [ ]

Part IV. Practitioner 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][3][1][9][8][9] Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2022 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method.

ERO's signature [ ] Date [ ]

INDIANA