		140		Res	Resident Personal Income Tax Return					2022		
Æ	82F	Check box 82F if filing under extension OR FISCAL YEA			AR BEGINNI	R BEGINNING			IG I . I .		. 66F	
¥			First Name and Middle Initial	OTT TOOKE TE	ZATA DEGITATA	Last Name	12101212		Your	Social Security Nu		
O I HE	1		THYAINI T			KOKKIRALA			ter 18	3 81 343	32	
_	_		se's First Name and Middle Init	ial (if box 4 or 6	checked)	Last Name		yo		se's Social Securit		
IEMS	1											
	_		nt Home Address - number and	•	ıte		Apt. No.		¬i	(with area code)		
AN	2		01 E PLAYA DEL NOR			710.0.1.	4124		(480) 79	1-6713 r Prior Year(s) (if diff	F4\	
	3		Town or Post Office MPE	State		ZIP Code 85281		Last Names U	sed in Last Fou	r Prior Year(s) (if din	rerent)	
DO NOT STAPLE	Т			ied filing joint return 4a ☐ Injured Spouse Protection o				REVENUE US	E ONLY. DO NO	OT MARK IN THIS A	REA.	
Σ	STATUS	4 5	_	•		88						
=	STA	3	Head of household. Enter name of qualifying child or dependent on next line:									
ž	FILING	6 Married filing separate return. Enter spouse's			e's name and S	ame and Social Security Number above.						
2	FILI	7	⊠ Single	•		,						
				ed. Do not put	a check mark							
	_	8 Age 65 or over (you and/or spouse) If completing lines 8, 9, and				11a, also complete lines 38,			□ BCVD			
	5	9	Blind (you and/or spouse	=)		10a and 10b, also co		81 PM		80 RCVD		
	and	10a	Dependents: Under age		Depend	lents: Age 17 and	over.					
	10a	11a	Qualifying parents and gi (Box 10a and 10b): Depend		Soo instruction	ne For more s	naco chock ti	ho hov \square an	d complete n	age 4 Part 1		
	and 11a - Dependents 10a and 10b		(a)	ent inionnation.	See mstruction	(b)	(c)	(d)	(e)	(f)		
	end		FIRST AND LA		soc	SOCIAL SECURITY NO.		NO. OF MONT		this person or	n your	
	Dep		(Do not list yoursel	ir or spouse.)				HOME IN 202	22 1	2 federal return educational c	due to	
	<u>a</u>	10c							(Box 10a) (Bo	DX 10b)		
	nd 1	10d										
	a o	10e										
	8	(Box 11a): Qualifying parents and grandparents. See instructions. For more space, check the box and complete page 4, Part 2.										
<u>4</u>	atio.	(a) (b) SOCIAL SECUR				(b) HAL SECURITY NO.	(c) (d) (e) RELATIONSHIP NO. OF MONTHS VIF AGE 65 O LIVED IN YOUR HOME IN 2022			5 OR ✓ IF DIED	ואוכ	
after Form 140.	Exemptions	FIRST AND LAST NAME (Do not list yourself or spouse.)			TAL SECONTT NO.							
ᅙ	ú							HOWE IN 202	22			
ē		11b										
Ħ		11c	-									
ents			Federal adjusted gross inco							46,296		
			Small Business Income: 13S	•	•					46,296	00	
≅	dditions		Modified federal adjusted gros							40,296	00	
응	ddit		15 Non-Arizona municipal interest								00	
Je	▼	16 Partnership Income adjustment. See instructions 16 17 Total federal depreciation 17								00		
ᇹ		18 Other Additions to Income: Complete Other Additions to Arizona Gross Income schedule on page 5								00		
5		19	19 Subtotal: Add lines 14 through 18 and enter the total						19	46,296	<u> 00</u>	
schedules or other docum			Total net capital gain or (loss).						00			
			Total net short-term capital gai						00			
Š			Total net long-term capital gain						00			
			Net long-term capital gain from						0 00	(00	
any required federal and AZ		This	Multiply line 23 by 25% (.25) a box may be blank or may contain a	printed barcode of	data from your		apital gain - qual		I		00	
	us					MERILIII — S SSESS	culated Arizona				00	
	Subtractions					14.7 13 11111	ership Income ac	•			00	
	btra						t on U.S. obliga				00	
۵ بو	Su		L'ANGE LES PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION PROFESSION			96 B	ion for fed., AZ st				00	
ĕ						29b Exclus	ion for retired/reta	ainer pay uniform	services. 29b		00	
ņ			31 Cert				U.S. Social Security or Railroad Retirement Act 30			00		
- E							31 Certain wages of American Indians				00	
an			va-unidektinak (sebah tenghik)						I		00	
							perating loss adj				00	
Place							butions: 34 a 529		00 34a and 34b 34 C		00	

	Your	Name (as shown on page 1)	y Number	ımber		
	KAT	THYAINI T KOKKIRALA	183-81-3432			
	25	Subtract lines 24 through 34c from line 19		46,296		
	35	Other Subtractions from Income. Complete Other Subtraction from Arizona Gross Income sched			40,230	0
	36 37	Subtract line 36 from line 35. Enter the difference		I	46,296	
ons				10/230	0	
įξ	38	Age 65 or over: Multiply the number in box 8 by \$2,100			0	
Exemptions	3	Blind: Multiply the number in box 9 by \$1,500			0	
ш	40	Other Exemptions. See instructions40E Multiply the number in box 40E by \$2,300				$\overline{}$
	41	Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000		46,296	0	
	42	Arizona adjusted gross income: Subtract lines 38 through 41 from line 37. If less than zero, enter "0".				
	43	Deductions: Check box and enter amount. See instructions			12,950	$\overline{}$
	44	If you checked box 43 S and claim charitable contributions, check 44 C Complete page 3. See in		22 246	0	
Тах	45	Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0"		33,346	$\overline{}$	
Balance of Tax	46	Compute the tax using amount on line 45 and Tax Tables X and Y or Optional Tax Tables	46	870	$\overline{}$	
nce	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 32	47		00	
ala	48	Subtotal of tax: Add lines 46 and 47. Enter the total	48	870	$\overline{}$	
	49	Dependent Tax Credit. See instructions		49		0
	50	Family income tax credit (from the worksheet - see instructions)		50		0
	51	Nonrefundable Credits from Arizona Form 301, Part 2, line 64		51		0
	52	Balance of tax: Subtract lines 49, 50 and 51 from line 48. If the sum of lines 49, 50 and 51 is greater than	line 48, enter "0".	52	870	0
it a	53	2022 AZ income tax withheld		53	68	0
Sred	54	2022 AZ estimated tax payments 54a 00 Claim of Right 54b	00 Add 54a and	54b. 54c		0
ble (55	2022 AZ extension payment (Form 204)		I		0
Total Payments and Refundable Credits	56	Increased Excise Tax Credit (from the worksheet - see instructions)				0
otal Sefu	57	Property Tax Credit from Arizona Form 140PTC		I		0
	58	Other refundable credits: Check the box(es) and enter the total amount				00
. =	59	Total payments and refundable credits: Add lines 53 through 58. Enter the total			68	$\overline{}$
me or	60	TAX DUE: If line 52 is larger than line 59, subtract line 59 from line 52. Enter amount of tax due. Skip lines 6			802	1
x Du	61	OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayme			002	0
Tax Due or Overpayment						0
	62	Amount of line 61 to be applied to 2023 estimated tax			0	
Voluntary Gifts	63	Balance of overpayment: Subtract line 62 from line 61. Enter the difference		00		101
ج	04			00		
ıţ				00		
No.				00		
Penalty		Political Party (if amount is entered on line 68 - check only one): 751 Democratic 752 Libertarian	753 Republica			
Pen	76	Estimated payment penalty		76		00
	77	771 Annualized/Other 772 Farmer or Fisherman 773 Form 221 included				-
٠	78	Add lines 64 through 74 and 76; enter the total	78		00	
Refund or Amount Owed	79	REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80		. 79		0
를		Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a foreign account; see	instructions. 79A	,U		
P E		98 S Savings		7		
⋖	80	AMOUNT OWED: Add lines 60 and 78. Make check payable to Arizona Department of Revenue; write y	our SSN on payme	ent.		
	00	and include with your return			802	0
		Under penalties of perjury, I declare that I have read this return and any documents with it, and to				•
		true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information	on of which prep	arer has any	knowledge.	
	4					
HERE	_ ا		TUDENT			
		YOUR SIGNATURE DATE OC	CUPATION			
SIGN	→					
18		SPOUSE'S SIGNATURE DATE SF	OUSE'S OCCUPATION	ON		-
PLEASE		SYAM PRIYA RAM SAGAR GUPTA TALLAM 04142023 GLOBAL TAXES L.: PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF				
EA		· ·	•	171065		
7		245 ROONEY CT	84-317			-
-		PAID PREPARER'S STREET ADDRESS		PARER'S TIN		
		E BRUNSWICK NJ 08816) 965-952		-
		PAID PREPARER'S CITY STATE ZIP CODE	PAID PRE	PARER'S PHON	E NOMBEK	

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode). If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).

Arizona Form AZ-140V

Arizona Individual Income Tax Payment Voucher for Electronic Filing of Form 140, 140PY or 140NR

EPV 2022

Your First Name and Middle Initial	,	Last Name			Your Social Security Number
1 KATHYAINI		KOKKIRALA		Enter	183 81 3432
Spouse's First Name and Middle Ini	tial	Last Name		your	Spouse's Social Security No.
1				SSN(s).	
Current Home Address - number ar	d street, rural route		Apt. No.	Daytime F	Phone (with area code)
2 1001 E PLAYA DEL NORT	TE DR		4124	94 (48)	0)791-6713
City, Town or Post Office	State	ZIP Code			.Y. DO NOT MARK IN THIS AREA.
3 TEMPE	AZ	85281		88	
Please indicate the filing state ☐ Married filing joint return ☐ Head of household: Enter na ☐ Married filing separate return					
 ☑ Married filling separate return ☑ Single 	TI. Enter spouse's name a	and Social Security Num	ibei above.	81 PM	80 RCVD
Enter the amount of paymer	\$ 802 00				

If you are mailing this payment

To ensure proper application of this payment, be sure that you:

- ✓ Do not send cash.
- ✓ Make your check or money order payable to Arizona Department of Revenue.
- ✓ Write your SSN, "2022 Tax" and 140 on your payment.
- ✓ Include your payment with this form.
- ✓ **Mail to** Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.

If you are making an electronic payment

You can make this 140V payment by eCheck or credit card! American Express ♦ Visa ♦ Discover Card ♦ MasterCard www.AZTaxes.gov

- ✓ Click on "Make a Payment" and select "140V" as the Payment Type.
- ✓ Do not mail this form. We will apply this payment to your account.

NOTE: To avoid interest and penalties you must pay the full amount of your tax by April 18, 2023. You will not receive an additional notice from the Arizona Department of Revenue unless an error exists with your return.

ADOR 10944 (22) 1555 REV 02/04/23 PRO