



DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F Check box 82F if filing under extension OR FISCAL YEAR BEGINNING 2022 AND ENDING 66F

Your First Name and Middle Initial SATHISH Last Name NAGARAJAN Your Social Security Number 168 86 8623

Spouse's First Name and Middle Initial (if box 4 or 6 checked) KANAGAPRIYA Last Name SUBRAMANIAN PILLAI Spouse's Social Security No. 995 84 3283

Current Home Address - number and street, rural route 500 N ROOSEVELT AVE Apt. No. 79 Daytime Phone (with area code) (94) (602) 363-6077

City, Town or Post Office CHANDLER State AZ ZIP Code 85226 Last Names Used in Last Four Prior Year(s) (if different) 97

FILING STATUS 4 Married filing joint return 4a Injured Spouse Protection of Joint Overpayment 5 Head of household. Enter name of qualifying child or dependent on next line: 6 Married filing separate return. Enter spouse's name and Social Security Number above. 7 Single

Enter the number claimed. Do not put a check mark. 8 Age 65 or over (you and/or spouse) 9 Blind (you and/or spouse) 10a Dependents: Under age of 17. 10b Dependents: Age 17 and over. 11a Qualifying parents and grandparents

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2022, (e) Dependent Age included in, (f) if you did not claim this person on your federal return due to educational credits. Rows 10c, 10d, 10e.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NO., (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2022, (e) IF AGE 65 OR OVER, (f) IF DIED IN 2022. Rows 11b, 11c.

Table with 3 columns: Line number, Description, Amount. Rows 12-24 including Federal adjusted gross income, Small Business Income, Modified federal adjusted gross income, Non-Arizona municipal interest, Partnership Income adjustment, Total federal depreciation, Other Additions to Income, Subtotal, Total net capital gain or (loss).

Table with 3 columns: Line number, Description, Amount. Rows 25-34 including Net capital gain - qualified small business, Recalculated Arizona depreciation, Partnership Income adjustment, Interest on U.S. obligations, Exclusion for fed., AZ state or local govt. pensions, U.S. Social Security or Railroad Retirement Act, Certain wages of American Indians, Pay received for being an active service member, Net operating loss adjustment, Contributions: 34a 529 plans.

Place any required federal and AZ schedules or other documents after Form 140.

Exemptions 8, 9, and 11a - Dependents 10a and 10b

Additions

Subtractions

Your Name (as shown on page 1) **S NAGARAJAN & K SUBRAMANIAN PILLAI** Your Social Security Number **168-86-8623**

Exemptions	<b>35</b> Subtract lines 24 through 34c from line 19..... <b>35</b>	211,589	00
	<b>36</b> Other Subtractions from Income. Complete <i>Other Subtraction from Arizona Gross Income</i> schedule on page 6..... <b>36</b>		00
	<b>37</b> Subtract line 36 from line 35. Enter the difference ..... <b>37</b>	211,589	00
	<b>38</b> Age 65 or over: Multiply the number in box 8 by \$2,100..... <b>38</b>		00
	<b>39</b> Blind: Multiply the number in box 9 by \$1,500 ..... <b>39</b>		00
Balance of Tax	<b>40</b> Other Exemptions. See instructions..... <b>40E</b> <input type="checkbox"/> Multiply the number in box <b>40E</b> by \$2,300..... <b>40</b>		00
	<b>41</b> Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000..... <b>41</b>		00
	<b>42</b> <b>Arizona adjusted gross income:</b> Subtract lines 38 through 41 from line 37. If less than zero, enter "0"..... <b>42</b>	211,589	00
	<b>43</b> <b>Deductions: Check box and enter amount.</b> See instructions..... <b>43I</b> <input type="checkbox"/> <b>ITEMIZED</b> .. <b>43S</b> <input checked="" type="checkbox"/> <b>STANDARD</b> <b>43</b>	25,900	00
	<b>44</b> If you checked box <b>43S</b> and claim charitable contributions, check <b>44C</b> <input type="checkbox"/> <b>Complete page 3.</b> See instructions..... <b>44</b>		00
	<b>45</b> Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0"..... <b>45</b>	185,689	00
	<b>46</b> Compute the tax using amount on line 45 and Tax Tables X and Y or Optional Tax Tables..... <b>46</b>	5,287	00
	<b>47</b> Tax from recapture of credits from Arizona Form 301, Part 2, line 32 ..... <b>47</b>		00
	<b>48</b> Subtotal of tax: Add lines 46 and 47. Enter the total ..... <b>48</b>	5,287	00
	<b>49</b> Dependent Tax Credit. See instructions ..... <b>49</b>	200	00
Total Payments and Refundable Credits	<b>5</b> Family income tax credit (from the worksheet - see instructions) ..... <b>50</b>		00
	<b>51</b> Nonrefundable Credits from Arizona Form 301, Part 2, line 64..... <b>51</b>		00
	<b>52</b> <b>Balance of tax:</b> 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" ..... <b>52</b>	5,087	00
	<b>53</b> 2022 AZ income tax withheld..... <b>53</b>	5,713	00
	<b>5</b> 2022 AZ estimated tax payments.. <b>54a</b> <input type="text" value="00"/> Claim of Right <b>54b</b> <input type="text" value="00"/> Add 54a and 54b. <b>54c</b>		00
	<b>55</b> 2022 AZ extension payment (Form 204) ..... <b>55</b>		00
	<b>56</b> Increased Excise Tax Credit (from the worksheet - see instructions) ..... <b>56</b>		00
	<b>5</b> Property Tax Credit from Arizona Form 140PTC ..... <b>57</b>		00
	<b>58</b> Other refundable credits: Check the box(es) and enter the total amount..... <b>581</b> <input type="checkbox"/> <b>308-I</b> <b>582</b> <input type="checkbox"/> <b>349</b> <b>58</b>		00
	<b>59</b> <b>Total payments and refundable credits:</b> Add lines 53 through 58. Enter the total..... <b>59</b>	5,713	00
Tax Due or Overpayment	<b>60</b> <b>TAX DUE:</b> If line 52 is larger than line 59, subtract line 59 from line 52. Enter amount of tax due. Skip lines 61, 62 and 63..... <b>60</b>		00
	<b>61</b> <b>OVERPAYMENT:</b> If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayment..... <b>61</b>	626	00
	<b>62</b> Amount of line 61 to be applied to 2023 estimated tax..... <b>62</b>	0	00
	<b>63</b> Balance of overpayment: Subtract line 62 from line 61. Enter the difference ..... <b>63</b>	626	00
Voluntary Gifts	<b>64 - 74 Voluntary Gifts to:</b>		
	Solutions Teams Assigned to Schools..... <b>64</b>	00	00
	Arizona Wildlife..... <b>65</b>		00
	Child Abuse Prevention..... <b>66</b>	00	00
	Domestic Violence Services..... <b>67</b>	00	00
	Political Gift..... <b>68</b>		00
	Neighbors Helping Neighbors..... <b>69</b>	00	00
	Special Olympics..... <b>70</b>	00	00
Veterans' Donations Fund..... <b>71</b>		00	
Sustainable State Parks and Road Fund..... <b>73</b>	00	00	
Spay/Neuter of Animals.. <b>74</b>		00	
Penalty	<b>75</b> Political Party (if amount is entered on line 68 - check only one): <b>751</b> <input type="checkbox"/> Democratic <b>752</b> <input type="checkbox"/> Libertarian <b>753</b> <input type="checkbox"/> Republican		
	<b>76</b> Estimated payment penalty..... <b>76</b>		00
	<b>771</b> <input type="checkbox"/> Annualized/Other <b>772</b> <input type="checkbox"/> Farmer or Fisherman <b>773</b> <input type="checkbox"/> Form 221 included		
Refund or Amount Owed	<b>78</b> Add lines 64 through 74 and 76; enter the total..... <b>78</b>		00
	<b>79</b> <b>REFUND:</b> Subtract line 78 from line 63. If less than zero, enter amount owed on line 80 ..... <b>79</b>	626	00
	<b>Direct Deposit of Refund: Check box 79A</b> if your deposit will be ultimately placed in a <b>foreign account</b> ; see instructions. <b>79A</b> <input type="checkbox"/>		
<input checked="" type="checkbox"/> <b>C</b> <input checked="" type="checkbox"/> Checking or <input type="checkbox"/> <b>S</b> <input type="checkbox"/> Savings ROUTING NUMBER: 1 2 2 1 0 0 0 2 4 ACCOUNT NUMBER: 6 6 9 2 7 0 2 3 8			
<b>80</b> <b>AMOUNT OWED:</b> Add lines 60 and 78. Make check payable to Arizona Department of Revenue; write your SSN on payment; and include with your return..... <b>80</b>			00

**PLEASE SIGN HERE**

Under penalties of perjury, I declare that I have read this return and any documents with it, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

YOUR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ SOFTWARE ENGINEER  
OCCUPATION

SPOUSE'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ HOME MAKER  
SPOUSE'S OCCUPATION

PAID PREPARER'S SIGNATURE **SYAM PRIYA RAM SAGAR GUPTA TALLAM** **03012023** **GLOBAL TAXES LLC**  
DATE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)

PAID PREPARER'S STREET ADDRESS **245 ROONEY CT** **84-3171965**  
PAID PREPARER'S TIN

PAID PREPARER'S CITY **E BRUNSWICK NJ 08816** **(678) 965-9522**  
STATE ZIP CODE PAID PREPARER'S PHONE NUMBER

## 2022 Form 140 Dependent and Other Exemption Information

**Include page 4 with your return if:**

- You are listing additional dependents (for box 10a and 10b) from page 1.
- You are listing additional qualifying parents and grandparents (for box 11a) from page 1.
  - You are claiming *Other Exemptions* on page 2, line 40.

**Part 1: Dependents (Box 10a and 10b) continued from page 1**

Information used to compute your allowable **Dependent Tax Credit** on page 2, line 49.

**NOTE:** If you have more than three qualifying dependents, you **must** complete Part 1 and the worksheet in the instructions, to compute your Dependent Tax Credit on line 49.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2022	(e) ✓ Dependent Age included in:		(f) ✓ IF YOU DID NOT CLAIM THIS PERSON ON YOUR FEDERAL RETURN DUE TO EDUCATIONAL CREDITS
					1 (Box 10a)	2 (Box 10b)	
10f					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10g					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10h					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10i					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10j					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10k					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10l					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10m					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10n					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10o					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10p					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 2: Qualifying parents and grandparents (Box 11a) continued from page 1**

Additional qualifying parents and grandparents information used to compute your allowable exemption on page 2, line 41.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) RELATIONSHIP	(d) NO. OF MONTHS LIVED IN YOUR HOME IN 2022	(e) ✓ IF AGE 65 OR OVER	(f) ✓ IF DIED IN 2022
11d					<input type="checkbox"/>	<input type="checkbox"/>
11e					<input type="checkbox"/>	<input type="checkbox"/>
11f					<input type="checkbox"/>	<input type="checkbox"/>
11g					<input type="checkbox"/>	<input type="checkbox"/>
11h					<input type="checkbox"/>	<input type="checkbox"/>
11i					<input type="checkbox"/>	<input type="checkbox"/>

**Part 3: Other Exemptions**

Information used to compute your allowable **Other Exemptions** on page 2, line 40.

	(a) FIRST AND LAST NAME (Do not list yourself or spouse.)	(b) SOCIAL SECURITY NO.	(c) ✓ AGE 65 OR OVER (see instructions)		(d) ✓ STILLBORN CHILD IN 2022
			C1	C2	
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Enter the total number of individuals listed in Part 3 in box 40E on page 2, line 40.