

IRS e-file Signature Authorization

OMB No. 1545-0074

▶ **ERO must obtain and retain completed Form 8879.**
 ▶ **Go to www.irs.gov/Form8879 for the latest information.**

Submission Identification Number (SID) ▶

Taxpayer's name <u>SAIKIRAN AKABILVAM</u>	Social security number 709-66-7185
Spouse's name <u>KAVYA SREE MUPATHKAL</u>	Spouse's social security number 682-82-1805

Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1 Adjusted gross income	1	151,188.
2 Total tax	2	16,952.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	28,826.
4 Amount you want refunded to you	4	11,874.
5 Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

6	7	1	8	5
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 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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 III below.

Your signature ▶ Saikiran Akabilvam Date ▶ 08-Feb-2023

Spouse's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

2	1	8	0	5
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 as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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 III below.

Spouse's signature ▶ Kavya sree Mupathkal Date ▶ 08-Feb-2023

Practitioner PIN Method Returns Only—continue below

Part III 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	6	1	9	8	9
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.**

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form — See Instructions
 Don't Submit This Form to the IRS Unless Requested To Do So**

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying surviving spouse (QSS)

Check only one box.

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial SAIKIRAN		Last name AKABILVAM		Your social security number 709-66-7185	
If joint return, spouse's first name and middle initial KAVYA SREE		Last name MUPATHKAL		Spouse's social security number 682-82-1805	
Home address (number and street). If you have a P.O. box, see instructions. 1119 S LANDRY LN				Apt. no.	
City, town, or post office. If you have a foreign address, also complete spaces below. STILLWATER			State OK	ZIP code 74074	
Foreign country name		Foreign province/state/county		Foreign postal code	
Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse					

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent
 Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** Were born before January 2, 1958 Are blind **Spouse:** Was born before January 2, 1958 Is blind

Dependents (see instructions):

If more than four dependents, see instructions and check here <input type="checkbox"/>	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
					Child tax credit	Credit for other dependents
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Income					
1a	Total amount from Form(s) W-2, box 1 (see instructions)			1a	162,095.
b	Household employee wages not reported on Form(s) W-2			1b	
c	Tip income not reported on line 1a (see instructions)			1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)			1d	
e	Taxable dependent care benefits from Form 2441, line 26			1e	
f	Employer-provided adoption benefits from Form 8839, line 29			1f	
g	Wages from Form 8919, line 6			1g	
h	Other earned income (see instructions)			1h	0.
i	Nontaxable combat pay election (see instructions)		1i		
z	Add lines 1a through 1h			1z	162,095.
2a	Tax-exempt interest	2a		2b	
3a	Qualified dividends	3a		3b	
4a	IRA distributions	4a		4b	
5a	Pensions and annuities	5a		5b	
6a	Social security benefits	6a		6b	
c	If you elect to use the lump-sum election method, check here (see instructions)		<input type="checkbox"/>		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here		<input type="checkbox"/>	7	
8	Other income from Schedule 1, line 10			8	-10,907.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9	151,188.
10	Adjustments to income from Schedule 1, line 26			10	
11	Subtract line 10 from line 9. This is your adjusted gross income			11	151,188.
12	Standard deduction or itemized deductions (from Schedule A)			12	25,900.
13	Qualified business income deduction from Form 8995 or Form 8995-A			13	
14	Add lines 12 and 13			14	25,900.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15	125,288.

Attach Sch. B if required.

Standard Deduction for—

- Single or Married filing separately, \$12,950
- Married filing jointly or Qualifying surviving spouse, \$25,900
- Head of household, \$19,400
- If you checked any box under **Standard Deduction**, see instructions.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	18,797.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	18,797.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	1,845.
	21	Add lines 19 and 20	21	1,845.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	16,952.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	16,952.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	28,826.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	28,826.
	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	28,826.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	11,874.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	11,874.
Direct deposit? See instructions.	b	Routing number 1 0 3 0 0 0 0 1 7	c Type:	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	d	Account number 3 0 5 0 0 7 7 1 0 7 4		
	36	Amount of line 34 you want applied to your 2023 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, 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	Your occupation DEVELOPER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation STUDENT WORKER	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (551) 214-8478	Email address SAIKIRAN0878@GMAIL.COM		

Paid Preparer Use Only

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 02/09/2023	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Phone no. (678) 965-9522		Firm's EIN 84-3171965	
Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816				

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your social security number
709-66-7185

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions): _____		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-10,907.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABLÉ account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
z	Other income. List type and amount: _____	8z	
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-10,907.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions): _____			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount: _____	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

**SCHEDULE 3
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment
Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your social security number
709-66-7185

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	1,845.
4	Retirement savings contributions credit. Attach Form 8880	4	
5	Residential energy credits. Attach Form 5695	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Alternative motor vehicle credit. Attach Form 8910	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
l	Amount on Form 8978, line 14. See instructions	6l	
z	Other nonrefundable credits. List type and amount: _____	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	1,845.

(continued on page 2)

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
a	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
c	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
e	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h		
z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through 13z		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31		15	

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss
(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment
Sequence No. **13**

Name(s) shown on return

SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your social security number

709-66-7185

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

- A** Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions Yes No
B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a Physical address of each property (street, city, state, ZIP code)

A	H NO: 7-101, JANGAM STREET ASIFABAD, ADILABAD TELANGANA STATE IN 504293
B	
C	

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A 3		365	0	<input type="checkbox"/>
B				<input type="checkbox"/>
C				<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) _____

Income:		Properties:		
		A	B	C
3	Rents received	3	650.	
4	Royalties received	4		
Expenses:				
5	Advertising	5		
6	Auto and travel (see instructions)	6		
7	Cleaning and maintenance	7	860.	
8	Commissions	8		
9	Insurance	9		
10	Legal and other professional fees	10		
11	Management fees	11	1,274.	
12	Mortgage interest paid to banks, etc. (see instructions)	12		
13	Other interest	13		
14	Repairs	14	1,850.	
15	Supplies	15	2,685.	
16	Taxes	16		
17	Utilities	17	1,742.	
18	Depreciation expense or depletion	18	3,146.	
19	Other (list) _____	19		
20	Total expenses. Add lines 5 through 19	20	11,557.	
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	-10,907.	
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(10,907.)	()
23a	Total of all amounts reported on line 3 for all rental properties	23a	650.	
b	Total of all amounts reported on line 4 for all royalty properties	23b		
c	Total of all amounts reported on line 12 for all properties	23c		
d	Total of all amounts reported on line 18 for all properties	23d	3,146.	
e	Total of all amounts reported on line 20 for all properties	23e	11,557.	
24	Income. Add positive amounts shown on line 21. Do not include any losses	24		
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(10,907.)	
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .	26		-10,907.

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-10,907.

Schedule E (Form 1040) 2022

Education Credits
(American Opportunity and Lifetime Learning Credits)

Department of the Treasury
Internal Revenue Service

Attach to Form 1040 or 1040-SR.
Go to www.irs.gov/Form8863 for instructions and the latest information.

Name(s) shown on return

Your social security number

SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

709-66-7185



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part I Refundable American Opportunity Credit

1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30 . . .	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	2	
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3	
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4	
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5	
6	If line 4 is: • Equal to or more than line 5, enter 1.000 on line 6 } • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to at least three places) }	6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box <input type="checkbox"/>	7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	

Part II Nonrefundable Education Credits

9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions)	9	
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	9,225.
11	Enter the smaller of line 10 or \$10,000	11	9,225.
12	Multiply line 11 by 20% (0.20)	12	1,845.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	13	180,000.
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14	151,188.
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on line 18, and go to line 19	15	28,812.
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	16	20,000.
17	If line 15 is: • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 } • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places) }	17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions)	18	1,845.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see instructions) here and on Schedule 3 (Form 1040), line 3	19	1,845.

Name(s) shown on return SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL	Your social security number 709-66-7185
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Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

Part III Student and Educational Institution Information. See instructions.

20 Student name (as shown on page 1 of your tax return) KAVYA SREE MUPATHKAL	21 Student social security number (as shown on page 1 of your tax return) 682-82-1805
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22 Educational institution information (see instructions)	
a. Name of first educational institution OKLAHOMA STATE UNIVERSITY (1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 304 WHITEHURST STILLWATER OK 74078 (2) Did the student receive Form 1098-T from this institution for 2022? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Did the student receive Form 1098-T from this institution for 2021 with box 7 checked? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution. 73-1383996	b. Name of second educational institution (if any) (1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. (2) Did the student receive Form 1098-T from this institution for 2022? <input type="checkbox"/> Yes <input type="checkbox"/> No (3) Did the student receive Form 1098-T from this institution for 2021 with box 7 checked? <input type="checkbox"/> Yes <input type="checkbox"/> No (4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.

23 Has the American opportunity credit been claimed for this student for any 4 prior tax years? Yes — **Stop!** Go to line 31 for this student. No — Go to line 24.

24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2022 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions. Yes — Go to line 25. No — **Stop!** Go to line 31 for this student.

25 Did the student complete the first 4 years of postsecondary education before 2022? See instructions. Yes — **Stop!** Go to line 31 for this student. No — Go to line 26.

26 Was the student convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance? Yes — **Stop!** Go to line 31 for this student. No — Complete lines 27 through 30 for this student.



You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.

American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000	27	
28 Subtract \$2,000 from line 27. If zero or less, enter -0-	28	
29 Multiply line 28 by 25% (0.25)	29	
30 If line 28 is zero, enter the amount from line 27. Otherwise, add \$2,000 to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1	30	

Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10	31	9,225.
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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

Your first name and middle initial SAIKIRAN	Last name AKABILVAM
If a joint return, spouse's first name and middle initial KAVYA SREE	Last name MUPATHKAL
Mailing address (number and street, including apartment number, rural route or PO Box) 1119 S LANDRY LN	
City, State, ZIP STILLWATER OK 74074	

Your social security number: 709667185

Spouse's social security number: 682821805

Filing status:

Total number of exemptions:

PART ONE - TAX RETURN INFORMATION (WHOLE DOLLARS ONLY)

1	Oklahoma Adjusted Gross Income (511, Line 7) or Adjusted Gross Income: All Sources (511-NR, Line 8)	1	151188	00
2	Oklahoma Income Tax and Use Tax (511, Line 20 or 511-NR, Line 24)	2	6128	00
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line 33)	3	7166	00
4	Refund (511, Line 37 or 511-NR, Line 38)	4	1038	00
5	Balance Due (511, Line 42 or 511-NR, Line 43)	5	0	00

For a balance due return with an electronic payment, complete line 6b below. The due date for an electronic payment is April 20th. For a balance due return with a non-electronic payment, enclose a payment with the 511-V and submit on or before the due date of April 15th. If the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payment may be made by the later due date and will be considered timely. If the due date falls on a weekend or legal holiday when OTC offices are closed, your payment is due the next business day.

PART TWO - DECLARATION OF TAXPAYER

6a I consent that my refund be directly deposited as designated in the electronic portion of my 2022 Oklahoma income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

6b I authorize the Oklahoma State Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Oklahoma taxes owed on this return and/or a payment of estimated tax. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If I have filed a balance due return, I understand that if the Oklahoma Tax Commission (OTC) does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under penalties of perjury, I declare I have compared the information contained on my return, with information I have provided to my Electronic Return Originator (ERO), and the amounts described in Part One above, agree with the amounts shown on the corresponding lines of my 2022 Oklahoma income tax return. To the best of my knowledge and belief, my return is true, correct, and complete. I consent that my return, including this declaration and accompanying schedules and statements, be sent to the OTC by my ERO.

In addition, by using a computer system and software to prepare and transmit my return electronically, I consent to the disclosure to the Oklahoma Tax Commission of all information pertaining to my use of the system and software and to the transmission of my tax return electronically.

Sign Here:

Your Signature _____ Date _____ Spouse's Signature (If joint return, both must sign) _____ Date _____

PART THREE - DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER

I declare I have reviewed the above taxpayer's return and the entries on Form 511-EF are complete and correct to the best of my knowledge. (EROs who are collectors are not responsible for reviewing the taxpayer's return; however, they must ensure Form 511-EF accurately reflects the data on the return.) I have obtained the taxpayer's signature on Form 511-EF and I have provided the taxpayer with a copy of all forms and information to be filed with the OTC, and have followed all other requirements described in Pub. 1345, Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022). If I am also a Paid Preparer, under penalties of perjury I declare I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO Use Only

ERO or Paid Preparer's Signature _____ Date 02/09/2023

PTIN _____

Paid Preparer Use Only

Paid Preparer Signature _____ Date 02/09/2023

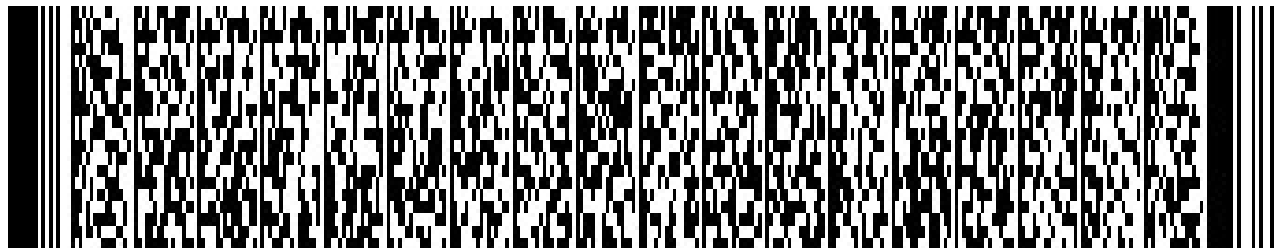
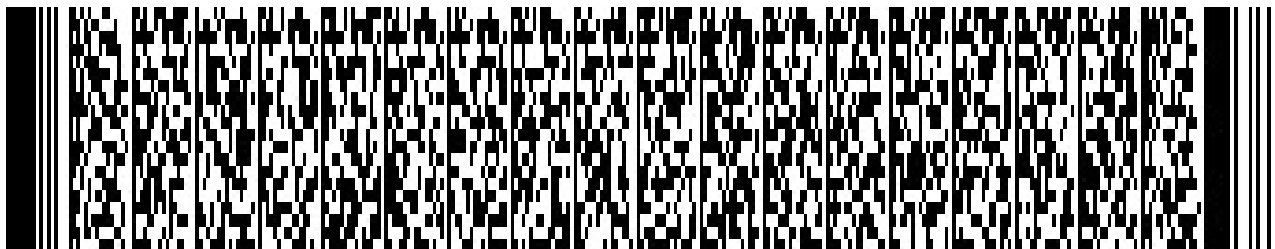
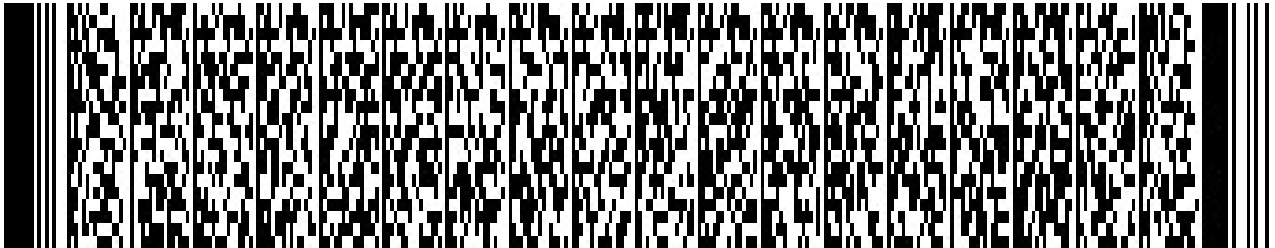
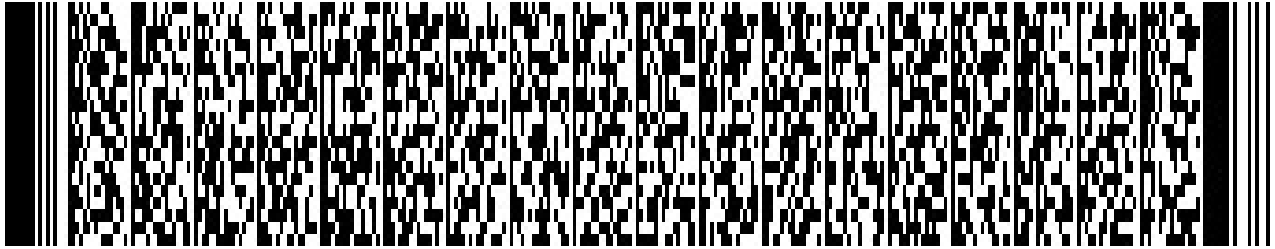
PTIN P02082703

Firm Name (or yours if self-employed): SYAM PRIYA RAM SAGAR GUPTA TALLAM

Address and ZIP: 245 ROONEY CT E BRUNSWICK NJ 08816

Phone Number: (678) 965-9522

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



Note: This is to be mailed with original return. Please DO NOT attach this sheet when filing the payment voucher, Form 511V.

Oklahoma Resident Income Tax Return

Form 511
2022



Your Social Security Number

709-66-7185

Place an 'X' in this box if this taxpayer is deceased →

Spouse's Social Security Number
(joint return only)

682-82-1805

Place an 'X' in this box if this taxpayer is deceased →

AMENDED RETURN!

Place an 'X' in this box if this is an amended 511. See Schedule 511-I. →

Name and Address - Please Print or Type

Your First Name	Middle Initial	Last Name	If a Joint Return, Spouse's First Name	Middle Initial	Last Name	
SAIKIRAN		AKABILVAM	KAVYA SREE		MUPATHKAL	
Mailing Address (Number and street, including apartment number, rural route or PO Box)			City	State	ZIP or Postal Code	Country
1119 S LANDRY LN			STILLWATER	OK	74074	

Filing Status

1 Single

2 Married filing joint return (even if only one had income)

3 Married filing separate
(If spouse is also filing, list name and SSN in the boxes)

Name	SSN

4 Head of household with qualifying person

5 Qualifying widow(er) with dependent child
• Please list the year spouse died in box at right:

* Note: If claiming Special Exemption, see instructions on page 9 of 511 Packet.

	Regular	* Special	Blind	
Exemptions	Yourself	1 +	+	= 1 (a)
	Spouse	1 +	+	
	Number of dependents			= (c)
	Add the Totals from boxes (a), (b) and (c). Enter the TOTAL here:			= 2

Note: If you may be claimed as a dependent on another return, enter "0" in the Total box for your regular exemption.

Age 65 or Older? (Please see instructions) Yourself Spouse

PART ONE: TO ARRIVE AT OKLAHOMA ADJUSTED GROSS INCOME

		Round to Nearest Whole Dollar	
1	Federal adjusted gross income (from Federal 1040 or 1040-SR).....	1	151188 00
2	Oklahoma Subtractions (provide Schedule 511-A).....	2	00
3	Line 1 minus line 2.....	3	151188 00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see instructions).....	4b	00
5	Line 3 minus line 4b.....	5	151188 00
6	Oklahoma Additions (provide Schedule 511-B).....	6	00
7	Oklahoma adjusted gross income (line 5 plus line 6)..... (If line 7 is different than line 1, provide a copy of your Federal return.)	7	151188 00

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS

8	Oklahoma Adjustments (provide Schedule 511-C).....	8	00
9	Oklahoma income after adjustments (line 7 minus line 8).....	9	151188 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.



Name(s) Shown
on Form 511: SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your Social Security Number: 709-66-7185

PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued

10	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).....	10	12700	00
11	Exemptions: Enter the total number of exemptions claimed on page 1..... <input type="text" value="2"/> X \$1,000.....	11	2000	00
12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5).....	12	14700	00
13	Oklahoma Taxable Income (line 9 minus line 12)	13	136488	00
14	(a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14	14a	6128	00
	(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	6128	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.

15	Oklahoma child care/child tax credit (see instructions).....	15		00
16	Credit for taxes paid to another state (provide Form 511TX).....	16		00
17	Form 511CR - Other Credits Form. List 511CR line number claimed here:..... <input type="text"/>	17		00
18	Income Tax (line 14 minus lines 15-17) Do not enter less than zero	18	6128	00

DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42.

PART THREE: TAX, CREDITS AND PAYMENTS

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: <input checked="" type="checkbox"/>	19		00
20	Balance (add lines 18 and 19)	20	6128	00
21	Oklahoma withholding (provide all W-2s, 1099s or other withholding statements) ..	21	7166	00
22	2022 estimated tax payments (qualified farmer <input type="checkbox"/>)	22		00
23	2022 payment with extension	23		00
24	Low Income Property Tax Credit (provide Form 538-H).....	24		00
25	Sales Tax Relief Credit (provide Form 538-S).....	25		00
26	Natural Disaster Tax Credit (provide Form 576).....	26		00
27	Credit from Form 578	27		00
28	Oklahoma earned income credit (see instructions).....	28	0	00
29	Amount paid with original return plus additional paid after it was filed (amended return only).....	29		00



Name(s) Shown
on Form 511: SAIKIRAN AKABILVAM & KAVYA SREE MUPATHKAL

Your Social Security Number: 709-66-7185

PART THREE: TAX, CREDITS AND PAYMENTS continued

30	Payments and credits (add lines 21-29 from page 2).....	30	7166	00
31	Overpayment, if any, as shown on original return and/or prior amended return(s) or as previously adjusted by Oklahoma (amended return only).....	31		00
32	Total payments and credits (line 30 minus 31).....	32	7166	00

PART FOUR: REFUND

33	If line 32 is more than line 20, subtract line 20 from line 32. This is your overpayment.....	33	1038	00
34	Amount of line 33 to be applied to 2023 estimated tax (original return only) (For further information regarding estimated tax, see page 5 of the 511 Packet.)	34		00

Schedule 511-H provides you with the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Please place the line number of the organization from Schedule 511-H in the box below. If you give to more than one organization, put a "99" in the box. Provide Schedule 511-H.....

35	Donations from your refund (total from Schedule 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 minus line 36).....	37	1038	00

Direct Deposit Note:
Verify your account and routing numbers are correct. If your direct deposit fails to process or you do not choose direct deposit, you will receive a **debit card**. See the 511 Packet for direct deposit and debit card information.

Is this refund going to or through an account that is located outside of the United States? Yes No

Deposit my refund in my:

Checking Account Routing Number: 103000017

Savings Account Account Number: 30500771074

PART FIVE: AMOUNT YOU OWE

38	If line 20 is more than line 32, subtract line 32 from line 20. This is your tax due.....	38		00
39	Donation: Public School Classroom Support Fund (original return only).....	39		00
40	Underpayment of estimated tax interest (annualized installment method).. (If you have an underpayment of estimated tax (line 40) & overpayment (line 33), see instructions.)	40		00
41	For delinquent payment add penalty of 5% \$ _____ plus interest of 1.25% per month \$ _____	41		00
42	Total tax, donation, penalty and interest (add lines 38-41).....	42		00

Under penalty of perjury, I declare the information contained in this document, and all attachments and schedules, is true and correct to the best of my knowledge and belief. Place an 'X' in this box if the Oklahoma Tax Commission may discuss this return with your tax preparer.....

Taxpayer's Signature _____ Date _____ Taxpayer's Occupation DEVELOPER Daytime Phone (optional) _____	Spouse's Signature _____ Date _____ Spouse's Occupation STUDENT WORKER Daytime Phone (optional) (551) 214-8478	Paid Preparer's Signature _____ Date 02/09/2023 SYAM PRIYA RAM SAGAR GUPTA TALLAM Paid Preparer's Address and Phone Number (678) 965-9522 245 ROONEY CT E BRUNSWICK NJ 08816 Paid Preparer's PTIN P02082703
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Do not staple 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.