E-file Signature Authorization (Arizona Forms 140, 140A, 140EZ, 140NR and 140PY)

Do not mail this form to the Arizona Department of Revenue. The ERO must retain this document a minimum of four years.

Your First Name and Initial	Last Name		Your Social Security Number*
VENKATA R	AKULA	Enter	440 11 0155
Your Spouse's First Name and Initial (if filed joint)	Last Name	your SSN(s).	Spouse's Social Security No.*
RATNA S	AKULA	00M(S).	277 06 3251

PART 1 – PURPOSE (If you are e-filing a Small Business Income Tax Return, also complete Form AZ-8879 SBI)^{*Do Not Truncate}

• To certify the truthfulness, correctness, and completeness of the taxpayer's electronic income tax return.

• To authorize the Electronic Return Originator (ERO) to affirm that the taxpayer wishes to use the taxpayer's electronic signature to the taxpayer's federal individual income tax return as the taxpayer's signature to the taxpayer's electronic Arizona individual income tax return.

PART 2 – TAX RETURN INFOR	RMATION		PART 3 – FINANCIAL INSTITUTION INFORMATION					
-			Must be present when	requesting di	irect debit or deposit.			
1 Arizona Adjusted Gross Income	2,295 00		Foreign Account D	eposit/Debit:	See instructions below.			
2 Balance Of Tax	55 00		TYPE OF ACCOUNT	ROU				
3 Arizona Income Tax Withheld	62 00		🛛 Checking 🔲 Sa	vings 2	1 1 3 9 1 8 2 5			
Check box 4 <u>or</u> box 5:			ACCOUNT NUMBER					
4 REFUND: Enter the amount of	refund	7 00	1 1 1 0 2 9 2 8	8				
5 AMOUNT YOU OWE: Enter the	e amount owed	00	DIRECT DEBIT REQUEST DATE					

Box 4 Checkbox – Refund: You are due a refund based on the information provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3).

Box 5 Checkbox – Amount You Owe: You owe taxes based on the information provided on your tax return. You have elected to direct debit for payment. The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).

Foreign Account Deposit/Debit Checkbox: Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come from a foreign account. If you check this box, do not enter your account numbers. If this box is checked, we will not direct deposit or debit your account. If you are due a refund, we will send you a check instead. If you owe tax, you must mail a check to the Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.

PART 4 – DECLARATION AND SIGNATURE AUTHORIZATION (Sign only after completing Part 2)

Under penalties of perjury, I declare that I have examined a copy of my electronic Arizona individual income tax return and accompanying schedules and statements for the year ending December 31, 2022, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts of Arizona adjusted gross income, total tax, Arizona income tax withheld, and refund (or amount owed) listed above are the amounts shown on the copy of my electronic Arizona income tax return.

- **6a** X I consent that my refund be directly deposited as designated in the electronic portion of my 2022 Arizona individual 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 do not want direct deposit of my refund or I am not receiving a refund.
- **6c** I authorize the Arizona Department of Revenue (ADOR) 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 Arizona taxes owed on this return. 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 ADOR does not receive full and timely payment of my tax liability by April 18, 2023, I will remain liable for the tax liability and all applicable interest and penalties. When electronically filing my federal and state tax returns, I understand that if there is an error on my federal return, my state return will also be rejected.

I consent to my Electronic Return Originator (ERO) or On-Line Service Provider (OLSP) sending my electronic Arizona individual income tax return and accompanying schedules and statements to ADOR, and I consent to my ERO or OLSP sending such information to ADOR through a transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the transmission of my return is accepted and, if the return is rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/ or transmitter the reason(s) for the delay, or when the refund was sent. If ADOR contacts my ERO for a copy of my return, any documents or schedules to my return, and/or this authorization form, I authorize my ERO to release copies of the requested documents to ADOR.

I authorize GLOBAL TAXES LLC

(ELECTRONIC RETURN ORIGINATOR)

to make the election that I want my electronic signature to my electronic federal individual income tax return to serve as my signature to my electronic Arizona individual income tax return for the year ending December 31, 2022. I understand that when my ERO makes the election that my electronic signature to my federal individual income tax return will serve as my signature to my Arizona individual income tax return and declared under penalties of perjury that to the best of my knowledge and belief the return is true, correct and complete.

RE	→			
SE SIGN HERE	→	YOUR PEN AND INK SIGNATURE	DATE	
PLEASE		SPOUSE'S PEN AND INK SIGNATURE	DATE	

RETURN.	Arizona Form 140NR Nonresident Personal Income Tax Return							FOR CALENDAR YEAR					
						2 /	AND ENDING					66F	
ΠHE							E at a		Your	Socia	I Security Nur	nber	
Ē	1	VEN	KATA R	AKU	JLA			Enter		44() I	11 0155	5
2	Spouse's First Name and Middle Initial (if box 4 or 6 checked)							your		Spou	se's S	ocial Security	No.
١S			NA S	AKU	JLA			SSN(s).	27	7 т	06 3251	L
Ш	(Curre	nt Home Address - number and street, rural route			Apt. No.		Dayti	me Pl			area code)	
E	-		5 Wood Duck Drive						(513		•	,	
ANY ITEMS			own or Post Office State		ZIP Code		L	ast Names Used					rent)
		•	PELL TX		75019								97
STAPLE		4	Married filing joint return 4a Injured Spouse F	Protoction	of Joint Ou	arnavmant	R	EVENUE USE C	ONLY.		от ма		REA.
STA	Ĩ	4 5				erpayment	88	R					
Ē	STA	Э	Head of household: Enter name of qualifying child or de	ependent or	i next line:								
NOT	ΰz												
DO	FILING STATUS	6 7	Married filing separate return: Enter spouse's name an	ia Social Si	ecurity Numb	er above.							
		1	✓ Single ✓ Enter the number claimed. Do not put a check m	nark.									
	10b	8	Age 65 or over (you and/or spouse) If completing lin		9, also comp	lete lines 47		PM			80P	RCVD	
	and	9	Blind (you and/or spouse) and 48. For line										
	Qa	9 10a		andants:	Age 17 and	over							
	ts							7					
	Jder	11-13	Residency Status (check one): 11 X Nonresident 12	Nonre	sident Activ	ve Military	13L	Composite F	Return	i (see	instru	ctions - page 2	29)
	iede		(Box 10a and 10b): Dependent Information. See instru				the		comp		age 4		
	- De		(a) FIRST AND LAST NAME	(b SOCIAL SEC	<i>'</i>	(c) RELATIONSF		(d) NO. OF MONTHS	✓ Dep inc	(e) endent	Age	(f) ✓ if you did not	claim
	6 pi		(Do not list yourself or spouse.)		Johanna an Anna	RELATION		LIVED IN YOUR	1	cluded i	n: 2	this person on y federal return du	/our
	8 and							HOME IN 2022	(Box 1	0a) (Bo	ox 10b)	educational cre	
		10c											
	ptic	10 d											
ъ	Exemptions	10e											
S	Ш	10f											
after Form 140NR	14 Check box 14 if married and you are the spouse of an active duty					nber		2022 FEDE				22 ARIZONA	
Ę			who qualifies for relief under the Military Spouses Reside	ncy Relie	f Act	14 🗆 🏻	Am	ount from Feder	ral Ret	urn	Sou	Irce Amount On	í l
Ē		15	Wages, salaries, tips, etc				15	365,				2,295	1
er		16	Interest				16		216				00
aft		17	Dividends				17	21,	785			0	00
ts	ame		Arizona income tax refunds				18			00			00
len	na Inco		Business income or (loss) from federal Schedule C			1	19			00			00
n	na	20	Gains or (losses) from federal Schedule D. See instructions	s for ARIZC	NA column			-3,	000			0	00
00	rizo		Rents, royalties, partnerships, estates, trusts, small business corp			1	21			00			00
er d	∢	22	Other income reported on your federal return. Include you				22	204	1	00			00
the		23	Total income: Add lines 15 through 22			····· }	23	384,				2,295	
0		24	Other federal adjustments: Include your own schedule					204		00		0	00
S 0			Federal adjusted gross income: Subtract line 24 from line 23							· · · ·		2,295	00
schedules or other docume			Arizona gross income: Subtract line 24 from line 23 in the ARI										1
edi	ľ	27	Arizona income ratio: Divide line 26 by line 25, and enter the		-							0.006	
ç			Small Business Income: 285 check the box if you are filing Aria									2,295	00
	6		Modified Arizona gross income. Subtract line 28 from 26.									2,275	00
A	ion	This	Fotal depreciation included in Arizona gross income	our return.				ment. See instru					00
anc	Additi		lef kalfbilgeten Extremision beskom en die ster het inder het het en de ster het in de ster het in de ster het	50 9 .				See instructions					00
al	٩							30, 31 and 32		Г		2,295	
e	7			Y64-111		ced gain/loss		50, 51 and 52		00			100
fec	age		l ha i babacalla la da da da da da da calcalla la calcalla da			erm gain/loss				00			
Bd	d uc		xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx			rm gain/loss			0	00			
uir	nt. c		<u> Xeseseseseseseseseseseseseseses</u> eses			ain. See instr.				00			
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ے ح					38 Multiply line 37 by 25% (.25)					00			
an	ctio		DAEENY KAODININA SIYA BAANKA KARAKATAY INA KAODINI BATABATI BATA					eciation					00
Place any required federal and AZ	Subtractions – cont. on page 2							instructions					00
Pla	Su							1 from line 33				2,295	00

Γ	Your	Name (as shown on page 1)		Your Social Security Nu	umber		
	VE	ENKATA R & RATNA S AKULA 440-11-015					
Subtractions – ont. from page 1	43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills					00
	44	Agricultural crops contributed to Arizona charitable organizations					00
traction from pa	45						00
Sub cont.	46	Subtract lines 43 through 45 from line 42. Enter the difference		46	2,295		
	47	Age 65 or over: Multiply the number in box 8 by \$2,100			00	_,	100
s	48	Blind: Multiply the number in box 9 by \$1,500			00		
Exemptions	49	Other Exemptions: See instructions49E Multiply the number in be			00		
due	50	Add lines 47, 48, and 49. Enter the total			00		
Щ	51	Multiply line 50 by the Arizona ratio on line 27					00
	52	Arizona adjusted gross income: Subtract line 51 from line 46. If less than ze			52	2,295	
Ī	53	Deductions: Check box and enter amount. See instructions					5 00
	54	If you checked box 53S and claim charitable contributions, check 54C C					00
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero				2,140	
x	56	Compute the tax using amount from line 55 and Tax TableS X and Y	·				5 00
of Tax	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 32					00
Ce	58	Subtotal of tax: Add lines 56 and 57. Enter the total				55	5 00
Balance	59	Dependent Tax Credit. See instructions			59		00
Ċ	60	Nonrefundable credits from Arizona Form 301, Part 2, line 64			60		00
	61	Balance of tax: Subtract lines 59 and 60 from line 58. If the sum of lines 59 and	60 is more than line 58, e	nter_"0"	61	55	5 00
	62	2022 AZ income tax withheld	·····	<u></u>	62	62	2 00
and	63	2022 AZ estimated tax payments63a 00 Claim of Right	nt 63 b	00 Add 63a and 63b	63c		00
ents e Cro	64	2022 AZ extension payment (Form 204)			64		00
Total Payments and Refundable Credits	65	Other refundable credits: Check the box(es) and enter the total amount		308-1 65 2 349	65		00
efun.	66	Total payments and refundable credits: Add lines 62 through 65. Enter the	e total		66	62	2 00
₽æ	67	TAX DUE: If line 61 is larger than line 66, subtract line 66 from line 61. Enter amo	ount of tax due. Skip lines	69 and 70	67		00
or nent	68	OVERPAYMENT: If line 66 is larger than line 61, subtract line 61 from line 66. En	nter amount of overpayme	nt	68	7	7 00
Tax Due Dverpayn	69	Amount of line 68 to be applied to 2023 estimated tax			69		00
Tax Due or Overpayment	70	Balance of overpayment: Subtract line 69 from line 68. Enter the difference Solutions Teams			70	7	7 00
	71	- 81 Voluntary Gifts to:Assigned to Schools	00 Arizona Wildlife		1		
Gifts		Child Abuse Prevention	1				
2		Neighbors Helping Neighbors76 00 Special Olympics77 I Didn't Pay Enough Fund	00 Veterans' Donations F		1		
inta	~~		00 Spay/Neuter of Anima				
Voluntary	82	Political Party (if amount is entered on line 75 - check only one): 821 Democra	· · · · ·	00		00	
	83	Estimated payment penalty		83		100	
nalty	84 95		0E		00		
Pená	<u>85</u> 86	· · · · · · · · · · · · · · · · · · ·			85 86	7	7 00
	00	Direct Deposit of Refund: <i>Check box 86A</i> if your deposit will be ultimately placed				,	100
or Owed			R				
nuq		98 S Savings 2 1 1 3 9 1 8 2 5 1 1 1 1 0 2	928				
Refund or Amount Owed	87	AMOUNT OWED: Add lines 67 and 85. Make check payable to Arizona Departmeter	nent of Revenue; write you	r SSN on payment	87		00
		Under penalties of perjury, I declare that I have read this return and any do					re
		rue, correct and complete. Declaration of preparer (other than taxpayer) is	s based on all informati	on of which prepare	er has any k	nowledge.	
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S	:	SPOUSE'S SIGNATURE D.	ATE SF	POUSE'S OCCUPATION			
SE			GLOBAL TAXES L				_
A	i	PAID PREPARER'S SIGNATURE DATE FI	RM'S NAME (PREPARER'S I	SELF-EMPLOYED)			
PLEASE SIGN HERE		245 ROONEY CT		30-10171			_
1	I	PAID PREPARER'S STREET ADDRESS		PAID PREPARER'S			
		E BRUNSWICK NJ 08816 PAID PREPARER'S CITY STATE ZIP CODE		(646)727 PAID PREPARER'S		FR	-
							1

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).