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

2021

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* **Enter** VENKATA R AKULA 440 11 | 0155 vour Your Spouse's First Name and Initial (if filed joint) Last Name Spouse's Social Security No.* SSN(s). AKULA 06 | 3251 RATNA S 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 INFORMATION** PART 3 - FINANCIAL INSTITUTION INFORMATION Must be present when requesting direct debit or deposit. 2,955 00 1 Arizona Adjusted Gross Income ☐ Foreign Account Deposit/Debit: See instructions below. 2 Balance of Tax 71 00 ROUTING NUMBER 80 00 ☑ Checking 1 | 1 | 3 | 9 | 1 8 2 5 ■ Savings 3 Arizona Income Tax Withheld... ACCOUNT NUMBER Check box 4 or box 5: |1|1|1|0|2| 9 2 8 9 00 **4 ⊠ REFUND**: Enter the amount of refund..... DIRECT DEBIT REQUEST DATE ിററ DIRECT DEBIT PAYMENT AMOUNT 5 AMOUNT YOU OWE: Enter the amount owed 00 Box 4 Checkbox - Refund: You are due a refund based on the information Foreign Account Deposit/Debit Checkbox: Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3). 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 Box 5 Checkbox - Amount You Owe: You owe taxes based on the information provided on your tax return. You have elected to direct debit 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. for payment. The payment will be withdrawn from the account and on the PO Box 29085, Phoenix, AZ 85038-9085. date listed in the Financial Institution Information Section (Part 3). PART 4 - DECLARATION AND SIGNATURE AUTHORIZATION (Sign only after completing Part 2) I consent to my Electronic Return Originator (ERO) or On-Line Service Under penalties of perjury, I declare that I have examined a copy of my Provider (OLSP) sending my electronic Arizona individual income tax electronic Arizona individual income tax return and accompanying schedules return and accompanying schedules and statements to ADOR, and I and statements for the year ending December 31, 2021, and to the best of consent to my ERO or OLSP sending such information to ADOR through a my knowledge and belief, it is true, correct, and complete. I further declare transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter that the amounts of Arizona adjusted gross income, total tax, Arizona an acknowledgement of receipt of transmission and an indication of income tax withheld, and refund (or amount owed) listed above are the whether or not the transmission of my return is accepted and, if the return amounts shown on the copy of my electronic Arizona income tax return. is rejected, the reason(s) for the rejection. If the processing of my return **6a** X I consent that my refund be directly deposited as designated in the or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/ electronic portion of my 2021 Arizona individual income tax return. or transmitter the reason(s) for the delay, or when the refund was sent. If I have filed a joint return, this is an irrevocable appointment of If ADOR contacts my ERO for a copy of my return, any documents or the other spouse as an agent to receive the refund. schedules to my return, and/or this authorization form, I authorize my ERO **6b** \prod I do not want direct deposit of my refund or I am not receiving a to release copies of the requested documents to ADOR. refund 6c I authorize the Arizona Department of Revenue (ADOR) and its designated Financial Agent to initiate an ACH electronic funds I authorize GLOBAL TAXES LLC withdrawal (direct debit) entry to the financial institution account (ELECTRONIC RETURN ORIGINATOR) indicated in the tax preparation software for payment of my Arizona taxes owed on this return. I also authorize the financial institutions to make the election that I want my electronic signature to my electronic involved in the processing of the electronic payment of taxes to federal individual income tax return to serve as my signature to my receive confidential information necessary to answer inquiries and electronic Arizona individual income tax return for the year ending December 31, 2021. I understand that when my ERO makes the election resolve issues related to the payment. that my electronic signature to my federal individual income tax return will If I have filed a balance due return, I understand that if the ADOR does not serve as my signature to my Arizona individual income tax return, I will receive full and timely payment of my tax liability by April 18, 2022, I will have signed my Arizona individual income tax return and declared under remain liable for the tax liability and all applicable interest and penalties. penalties of perjury that to the best of my knowledge and belief the return When electronically filing my federal and state tax returns, I understand is true, correct and complete. that if there is an error on my federal return, my state return will also be rejected. PLEASE SIGN HERE YOUR PEN AND INK SIGNATURE DATE

DATE

REV 02/10/22 PRO

SPOUSE'S PEN AND INK SIGNATURE

RETURN.				Arizona Form 140NR	Nonresident Personal Income Tax Ret						Return	FOR CALENDAR YEAR 2021						
REI	82F Check box 82F if filing under extension				on	OR FISC	AL YEAR BE	GINNING L		12,0,2,	1 /	AND ENDING				1 1	ا . لـــــــــــــــــــــــــــــــــــ	66F
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	$\overline{}$,						t Name			SSN(s).			ocial Se	-	No.
ANY ITEMS	1 RATNA S						ULA	Apt. No.		Dayti	ime Pl			06 area co				
E	_								24312) 441			oue)		
F	_	City, Town or Post Office State						ZIP Code	1	L	ast Names Used	_	-			(if differ	ent)	
	3	-					TX 75234-9487										97	
STAPLE	SI	4	4 🛛 Married filing joint return 4a				☐ Injured Spouse Protection of Joint Overpayment			- 11	EVENUE USE (ONLY.	DO NO	ТМА	RK IN T	HIS AR	EA.	
ST	TAT	5		Head of household: Enter name of qualifying child or dependent on next line:														
DO NOT	FILING STATUS		_	Married filing separate return: Enter spouse's name and Social Security Number above.														
0		6																
Δ	ч	J. Enter the number claimed. Do not put a check mark																
	1 10b	If completing lines 8 and 9 also complete lines 4							plete lines 47	81	_{1P} PM			80R	RCVD			
	and	Age 65 of over (you and/or spouse) and 48. For lines 10a and 10b, complete line 59.										ш						
	3 10a	10a Dependents: Under age of 17. 10b Dependents: Age 17 and over.																
	lents	11-13	3 Res	idency Status (che	ck one	e): 11× N	Nonresident	12 Nonr	esident Acti	ive Military '	13[Composite F	Return	ı (see i	nstru	ctions -	page 2	8)
	Depend			ox 10a and 10b): Do		·						·						
	- Del				(a)	(b) AST NAME SOCIAL SECUR elf or spouse.)			(b)) (c)		(d) NO. OF MONTHS		(e)		,	(f)	
	6 p								CURITY NO.	RELATIONS	HIP	LIVED IN YOUR	JR Depende		nt Age d in: 2 if you did n this person of federal return		did not c son on yo	Jaim
INR.	8 and			· 								HOME IN 2021	(Box 10	0a) (Box			onal cred	
	Exemptions	10 c											片	\perp	빍		<u> </u>	
	mpti	10d											H		片		<u> </u>	
	Exe	10e 10f											H	+	片		 	
140			Che	ck box 14 if married	and vo	ou are the s	spouse of ar	active duty	military me	mber		2021 FEDEI	RAL		20	21 ARI	<u> </u>	
Ξ		14 Check box 14 if married and you are the spouse of an active duty military member who qualifies for relief under the Military Spouses Residency Relief Act										urn		irce Amo				
nts after Form 140NR		15 Wages, salaries, tips, etc									 		2,	955	00			
		16	Inter	est							16		101					00
		17									17	17,	856					00
nts	ome		18 Arizona income tax refunds								18 19			00				00 00
me	a Inc	20	Business income or (loss) from federal Schedule C Gains or (losses) from federal Schedule D. See instructions for ARIZ							20		304					00	
DO (Arizona In	21		,	partnerships, estates, trusts, small business corporations							,		00				00
schedules or other docume		22	Othe	her income reported on your federal return. Include your own					chedule		22			00				00
		23		l income: Add lines 1							23	379,				2,	955	
		24 Other federal adjustments: Include your own schedule							24	i e	216				0	00		
S		25 Federal adjusted gross income: Subtract line 24 from line 23 in the FEDERAL column											2.	955	Ω			
≝				ona income ratio:													.008	00
hec				l Business Income: 2		•				•								00
SC		29 Modified Arizona gross income. Subtract line 28 from 26									. 29		2,	955				
ΑZ	ons	30 This	Total	depreciation include	d in Ari	izona gross	s income	m vour return										00
nd	dditi	35 Short-term gain/loss 35 Short-term gain/loss 35 Ohort-term gain/loss 36 Oho												00				
a	Ă											2.	955	00				
Jer	7								00			300	00					
fe	page											00						
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Place any required federal and AZ	cont.							I I	gain. See instr.				00				00	
e le	S – (25)						00 00	
an)	tion								39 Net capital gain from qua40 Recalculated Arizona dep									00
Se	otrac					-AUTS IM IV EUI	'			instructions						00		
Pla	Sul									•		41 from line 33				2,	955	

FOR CALENDAR YEAR

	Varin	Name (as shown an mage 1)	Ty.	Varus Capial Caprosity No	ı mah a r		_				
		Name (as shown on page 1)	Your Social Security No 440-11-0155								
	VEI	NKATA R & RATNA S AKULA) —————		\perp						
Subtractions – cont. from page 1	43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills	43		00						
	44	Agricultural crops contributed to Arizona charitable organizations	44		00						
	45	Other Subtractions from Income: Complete Other Subtractions from Arizona		45		00					
	46	Subtract lines 43 through 45 from line 42. Enter the difference		46	2,955	00					
Exemptions	47	Age 65 or over: Multiply the number in box 8 by \$2,100	17	00							
	48	Blind: Multiply the number in box 9 by \$1,500	18	00							
	49	Other Exemptions: See instructions49E Multiply the number in box		00							
	50	Add lines 47, 48, and 49. Enter the total	00								
Ĥ	51	Multiply line 50 by the Arizona ratio on line 27	51		00						
	52	Arizona adjusted gross income: Subtract line 51 from line 46. If less than zero				2,955					
	53	Deductions: Check box and enter amount. See instructions	53	201							
	54	If you checked box 53S and claim charitable contributions, check 54C Cor	nstructions	54		00					
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero, e			2,754	$\overline{}$					
of Tax	56a	Compute the tax using amount from line 55 and Tax TableS X and Y	56a	71	00						
	56b	If line 55 is \$250,001 or more (single/mfs) or \$500,001 or more (mfj/hoh) col	•	0			00				
Balance	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 30					00				
3ala	58	Subtotal of tax: Add lines 56a, 56b and 57. Enter the total			58	71	00				
ш	59	Dependent Tax Credit. See instructions		59		00					
	60	Nonrefundable credits from Arizona Form 301, Part 2, line 61			60		00				
D S	61	Balance of tax: Subtract lines 59 and 60 from line 58. If the sum of lines 59 and 60					00				
s an	62	2021 AZ income tax withheld				80	00				
nent le Cı	63	2021 AZ estimated tax paymentssaa 00 Claim of Right		63c		00					
Payr	64	2021 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	65		00						
	66	Total payments and refundable credits: Add lines 62 through 65. Enter the to	66	80	00						
Tax Due or Overpayment	67	TAX DUE: If line 61 is larger than line 66, subtract line 66 from line 61. Enter amour			00						
	68	OVERPAYMENT: If line 66 is larger than line 61, subtract line 61 from line 66. Enter		9	00						
	69	Amount of line 68 to be applied to 2022 estimated tax			0	00					
	70	Balance of overpayment: Subtract line 69 from line 68. Enter the difference	00 Arizona Wildlife			9	00				
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ry G			1								
ınta		Sustainable State Barks	ind 78 00	1							
Voluntary Gifts	00		s 81 00	J							
		Political Party (if amount is entered on line 75 - check only one): 821 Democratic	3 Republican			00					
Penalty		Estimated payment penalty			83		00				
Per		841 Annualized/Other 842 Farmer or Fisherman 843 Form 221 included	05		00						
		Add lines 71 through 81 and 83. Enter the total	85	9	00						
Refund or Amount Owed	86		86		100						
ind of		Direct Deposit of Refund: Check box 86A if your deposit will be ultimately placed in a foreign account; see instructions. 86A ROUTING NUMBER ACCOUNT NUMBER ACCOUNT NUMBER									
Refu		98 S Savings 2 1 1 3 9 1 8 2 5 1 1 1 1 0 2									
₹	87	AMOUNT OWED: Add lines 67 and 85. Make check payable to Arizona Department	87		00						
		Under penalties of perjury, I declare that I have read this return and any doc				and belief, they ar					
PLEASE SIGN HERE	1	true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has an									
	→	YOUR SIGNATURE DATI	RINCIPAL AR	CHITEC	CT	-					
		TOUR SIGNATURE DATE									
	→		OFTWARE DEV	ELOPER	ξ.						
		SPOUSE'S SIGNATURE DATE	OUSE'S OCCUPATION			-					
		RVSSMANIKUMARAPPANA 03062022 GI	LC								
	;		SELF-EMPLOYED)			-					
		2530 Pebble Creek Ln	30-10171	96							
P	PAID PREPARER'S STREET ADDRESS PAID F						-				
		Cumming GA 30041	(646)727	-7157							
	i	PAID PREPARER'S CITY STATE ZIP CODE		PAID PREPARER'S		JMBER	-				

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).