

DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F Check box 82F if filing under extension OR FISCAL YEAR BEGINNING 2023 AND ENDING 66F

Your First Name and Middle Initial SHASHIDHAR Last Name NANDADAPU Your Social Security Number 730 91 8854 Spouse's First Name and Middle Initial (if box 4 or 6 checked) Last Name Spouse's Social Security No.

Current Home Address - number and street, rural route 5359 W HACKAMORE DR Apt. No. Daytime Phone (with area code) 94 (928) 221-1293 City, Town or Post Office PHOENIX State AZ ZIP Code 85083 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. EXEMPTIONS: 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. 81 PM 80 RCVD

Table for Dependents (Box 10a and 10b) with columns for Name, Social Security Number, Relationship, Months Lived in Home, and checkboxes for dependent age and educational credits.

Table for Qualifying Parents and Grandparents (Box 11a) with columns for Name, Social Security Number, Relationship, Months Lived in Home, and checkboxes for age 65 or over and died in 2023.

Main tax calculation table with rows for Federal adjusted gross income (12), Additions (13-19), Subtractions (20-35), and final total of 137,318.00.

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

Your Name (as shown on page 1) SHASHIDHAR NANDADAPU Your Social Security Number 730-91-8854

Exemptions	36	Other Subtractions from Income. Complete <i>Other Subtraction from Arizona Gross Income</i> schedule on page 6.....	36		00
	37	Subtract line 36 from line 35. Enter the difference	37	137,318	00
	38	Age 65 or over: Multiply the number in box 8 by \$2,100.....	38		00
	39	Blind: Multiply the number in box 9 by \$1,500	39		00
	40	Other Exemptions. See instructions.....40E <input type="text"/> Multiply the number in box 40E by \$2,300.....	40		00
Balance of Tax	41	Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000.....	41		00
	42	Arizona adjusted gross income: Subtract lines 38 through 41 from line 37. If less than zero, enter "0".....	42	137,318	00
	43	Deductions: Check box and enter amount. See instructions 43I <input type="checkbox"/> ITEMIZED..43S <input checked="" type="checkbox"/> STANDARD	43	13,850	00
	44	If you checked box 43S and claim charitable contributions, check 44C <input type="checkbox"/> Complete page 3. See instructions.....	44		00
	45	Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0".....	45	123,468	00
	46	Tax: Multiply line 45 by 2.5% (.025). Enter the result.....	46	3,087	00
	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 31	47		00
	48	Subtotal of tax: Add lines 46 and 47. Enter the total	48	3,087	00
	49	Dependent Tax Credit. See instructions	49		00
	50	Family income tax credit (from the worksheet - see instructions).....	50		00
Total Payments and Refundable Credits	51	Nonrefundable Credits from Arizona Form 301, Part 2, line 62.....	51		00
	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	3,087	00
	53	2023 AZ income tax withheld.....	53	2,746	00
	54	2023 AZ estimated tax payments..54a <input type="text"/> 00 Claim of Right 54b <input type="text"/> 00 Add 54a and 54b..	54c		00
	55	2023 AZ extension payment (Form 204)	55		00
	56	Increased Excise Tax Credit (from the worksheet - see instructions)	56		00
	57	Property Tax Credit from Arizona Form 140PTC	57		00
	58	Other refundable credits: Check the box(es) and enter the total amount.....581 <input type="checkbox"/> 308-I 582 <input type="checkbox"/> 334 583 <input type="checkbox"/> 349	58		00
	59	Total payments and refundable credits: Add lines 53 through 58. Enter the total.....	59	2,746	00
	60	TAX DUE: 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.....	60	341	00
Tax Due or Overpayment	61	OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayment.....	61		00
	62	Amount of line 61 to be applied to 2024 estimated tax.....	62		00
Voluntary Gifts	63	Balance of overpayment: Subtract line 62 from line 61. Enter the difference	63		00
	64 - 74 Voluntary Gifts to:				
		Solutions Teams Assigned to Schools.....	64	00	00
		Arizona Wildlife.....	65	00	00
	66	Child Abuse Prevention.....	66	00	00
		Domestic Violence Services.....	67	00	00
		Political Gift.....	68	00	00
	69	Neighbors Helping Neighbors.....	69	00	00
		Special Olympics.....	70	00	00
		Veterans' Donations Fund.....	71	00	00
72	I Didn't Pay Enough Fund.....	72	00	00	
	Sustainable State Parks and Road Fund.....	73	00	00	
	Spay/Neuter of Animals.....	74	00	00	
Penalty	75	Political Party (if amount is entered on line 68 - check only one): 751 <input type="checkbox"/> Democratic 752 <input type="checkbox"/> Libertarian 753 <input type="checkbox"/> Republican			
	76	Estimated payment penalty	76		00
	77	771 <input type="checkbox"/> Annualized/Other 772 <input type="checkbox"/> Farmer or Fisherman 773 <input type="checkbox"/> Form 221 included			
Refund or Amount Owed	78	Add lines 64 through 74 and 76; enter the total.....	78		00
	79	REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80	79		00
	80	Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a foreign account ; see instructions. 79A <input type="checkbox"/> <input checked="" type="checkbox"/> C <input type="checkbox"/> Checking or <input type="checkbox"/> S <input type="checkbox"/> Savings ROUTING NUMBER: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ACCOUNT NUMBER: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	80	341	00

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.

PLEASE SIGN HERE

YOUR SIGNATURE _____ DATE _____ SOFTWARE ENGINEER
OCCUPATION

SPOUSE'S SIGNATURE _____ DATE _____ SPOUSE'S OCCUPATION _____

SYAM PRIYA RAM SAGAR GUPTA TALLAM 02142024 GLOBAL TAXES LLC
PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF SELF-EMPLOYED)

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

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

Your First Name and Middle Initial 1 SHASHIDHAR		Last Name NANDADAPU	Enter your SSN(s).	Your Social Security Number 730 91 8854	
Spouse's First Name and Middle Initial 1		Last Name		Spouse's Social Security No.	
Current Home Address - number and street, rural route 2 5359 W HACKAMORE DR			Apt. No.	Daytime Phone (with area code) 94 (928) 221-1293	
City, Town or Post Office 3 PHOENIX			State AZ	ZIP Code 85083	
REVENUE USE ONLY. DO NOT MARK IN THIS AREA.					
Please indicate the filing status below: <input type="checkbox"/> Married filing joint return <input type="checkbox"/> Head of household: Enter name of qualifying child or dependent on next line. _____ <input type="checkbox"/> Married filing separate return: Enter spouse's name and Social Security Number above. <input checked="" type="checkbox"/> Single					
				88	
				81 PM	80 RCVD

Enter the amount of payment enclosed..... \$

341	00
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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, "2023 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 15, 2024. You will not receive an additional notice from the Arizona Department of Revenue unless an error exists with your return.

DO NOT STAPLE ANY ITEMS TO THE FORM.

This estimated payment is for tax year ending December 31, 2024, or for tax year ending: 20

1 SHASHIDHAR Last Name NANDADAPU Your Social Security Number 730 91 8854
1 Spouse's First Name and Middle Initial (if filing joint) Last Name Spouse's Social Security No.

2 5359 W HACKAMORE DR Apt. No. 95. Filing Status. Must be the same as Form 140, 140NR or 140PY
95a Married filing joint return 95c Head of Household
95b Married filing separate return 95d Single
3 PHOENIX AZ 85083 REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 88

94 Your Daytime Phone (with area code): (928) 221-1293
Check if this payment is on behalf of a Nonresident Composite return - 140NR
STOP DO NOT USE THIS FORM TO MAKE DELINQUENT INCOME TAX PAYMENTS.
Use this form only for mailing estimated payments.

1 Payment: You must round your estimated payment to a whole dollar (no cents).
Enter the amount of payment enclosed \$ 86.00

2 Check only one box for the quarter for which this payment is made. Do not select more than one quarter. You must submit a separate form for each quarter for which a payment is made.

81 PM 80 RCVD

Payment for calendar year filers are due as follows:

1st Quarter - January to March | Due date is April 15, 2024.
2nd Quarter - April to June | Due date is June 15, 2024. Because June 15, 2024 falls on a weekend, you have until June 17, 2024 to make this payment.
3rd Quarter - July to September | Due date is September 15, 2024. Because September 15, 2024 falls on a weekend, you have until September 16, 2024 to make this payment.
4th Quarter - October to December | Due date is January 15, 2025.

Payment for fiscal year filers are due as follows:

1st Quarter - 15th day of the fourth month of the current fiscal year.
2nd Quarter - 15th day of the sixth month of the current fiscal year.
3rd Quarter - 15th day of the ninth month of the current fiscal year.
4th Quarter - 15th day of the first month of the next fiscal year.

If any of the due dates fall on a Saturday, Sunday, or legal holiday, you may make the required payment for that quarter by midnight on the next business day following that day.

If you are mailing this payment:

To ensure proper application of this payment, be sure that you:
Complete and submit this form in its entirety. Do not cut this page in half.
Make your check or money order payable to Arizona Department of Revenue.
Write your SSN, "Tax Year 2024" and "140ES" on your payment.
If payment is made on behalf of a Nonresident Composite return, write "Composite 140NR", "Tax Year 2024" and the entity's EIN on your payment.
Include your payment with this form.
Mail to Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.
Be sure to review your estimated income and adjust your payments as necessary during the year.

If you are making an electronic payment

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Form fields for personal information: Your First Name and Middle Initial (SHASHIDHAR), Last Name (NANDADAPU), Your Social Security Number (730 91 8854), Spouse's First Name and Middle Initial, Last Name, Spouse's Social Security No.

Form fields for address: Current Home Address (5359 W HACKAMORE DR), Apt. No., City (PHOENIX), State (AZ), ZIP Code (85083). Includes filing status options (95a, 95b, 95c, 95d).

Form fields for phone and payment type: Your Daytime Phone ((928) 221-1293), Check if this payment is on behalf of a Nonresident Composite return - 140NR, STOP sign, and instructions for delinquent payments.

REVENUE USE ONLY. DO NOT MARK IN THIS AREA. Includes boxes for PM (81) and RCVD (80).

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Payment for calendar year filers are due as follows:

Form with checkboxes for calendar year quarters: 1st Quarter (April 15, 2024), 2nd Quarter (June 15, 2024), 3rd Quarter (September 15, 2024), 4th Quarter (January 15, 2025).

Payment for fiscal year filers are due as follows:

Form with checkboxes for fiscal year quarters: 1st Quarter (15th day of the fourth month), 2nd Quarter (15th day of the sixth month), 3rd Quarter (15th day of the ninth month), 4th Quarter (15th day of the first month).

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