

Oklahoma Individual Income Tax Declaration for Electronic Filing NOTE: Do not mail Oklahoma Tax Return - Form 511 or Form 511-NR.

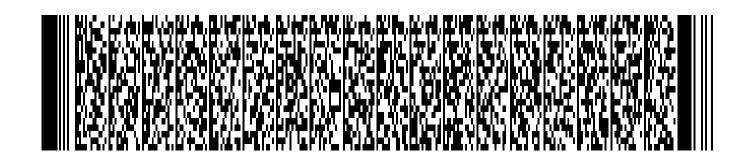
See instructions on Page 2 to determine if you are required to send Form 511-EF to the OTC.

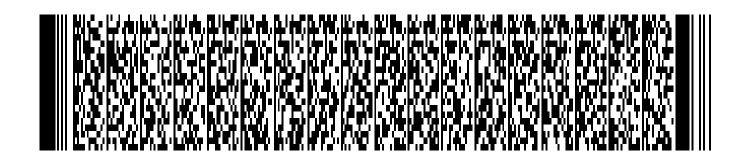
2023 Form 511-EF

_	ur first name and middle initial Last name		Torri or Er
		Your social security number:	160893632
_	SUMA NAGA VAISHNAVI PURIGHALLA i joint return, spouse's first name and middle initial Last name	4	100093032
Па	i joint return, spouse's first name and middle initial Last name	Spouse's social security number:	
Ма	illing address (number and street, including apartment number, rural route or PO Box)	_	Filing status:
_	14515 BRIAR FOREST DR 1826		i illing status.
City	y, State, ZIP		Total number of exemptions:
	HOUSTON TX 77077		
Р	PART ONE - TAX RETURN INFORMATION (WHOLE DOLLA	RS ONLY)	
1	Oklahoma Adjusted Gross Income (511, Line 7) or		
	Adjusted Gross Income: All Sources (511-NR, Line 8)		
2	Oklahoma Income Tax and Use Tax (511, Line 20 or 511-NR, Line 24)		
3	Oklahoma Income Tax Payments and Credits (511, Line 32 or 511-NR, Line	33)	3 4183 00
4	Refund (511, Line 37 or 511-NR, Line 38)		4 42 00
5	Balance Due (511, Line 41 or 511-NR, Line 42)		5
	For a balance due return with an electronic payment, complete line 6b below. balance due return with a non-electronic payment, enclose a payment with the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payr timely. If the due date falls on a weekend or legal holiday when OTC offices are	511-V and submit on nent may be made by	or before the due date of April 15th. If the the later due date and will be considered
P	ART TWO - DECLARATION OF TAXPAYER		
	6a X I consent that my refund be directly deposited as designated in the ele		
	6b I authorize the Oklahoma State Treasury and its designated Financial		
	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 institu		
If I I	receive confidential information necessary to answer inquiries and reshave filed a balance due return, I understand that if the Oklahoma Tax Commission (0		
	nain liable for the tax liability and all applicable interest and penalties.	or of does not receive i	and timely payment of my tax hability, I will
nato retu	der penalties of perjury, I declare I have compared the information contained on my re or (ERO), and the amounts described in Part One above, agree with the amounts sho urn. To the best of my knowledge and belief, my return is true, correct, and complete. nedules and statements, be sent to the OTC by my ERO.	wn on the correspondir	ng lines of my 2023 Oklahoma income tax
In a	addition, by using a computer system and software to prepare and transmit my return sion of all information pertaining to my use of the system and software and to the trans	electronically, I consent esmission of my tax retu	to the disclosure to the Oklahoma Tax Com- urn electronically.
Sigi			
Her		Signature (If joint return,	both must sign) Date
P	ART THREE - DECLARATION OF ELECTRONIC RETURN ORIGI	NATOR (ERO) AN	D PAID PREPARER
lect the othe pen	eclare I have reviewed the above taxpayer's return and the entries on Form 511-EF are of tors are not responsible for reviewing the taxpayer's return; however, they must ensure I taxpayer's signature on Form 511-EF and I have provided the taxpayer with a copy of a er requirements described in Pub. 1345, Handbook for Electronic Filers of Individual Incomplities of perjury I declare I have examined the above taxpayer's return and accompanying itef, they are true, correct, and complete. This Paid Preparer declaration is based on all in	form 511-EF accurately Il forms and information ome Tax Returns (Tax Yong schedules and stater	reflects the data on the return.) I have obtained to be filed with the OTC, and have followed all ear 2023). If I am also a Paid Preparer, under nents, and to the best of my knowledge and
	O Use	1 5 / 2 0 2 4	
Only	y U3/ ERO or Paid Preparer's Signature Date	15/2024 PTIN	
Paid	d Preparer	- /ooo	2000702
Use	Paid Preparer Signature 03/1	5/2024 P02 PTIN	2082703
E:	m Name (or yours if self-employed): SYAM PRIYA RAM SAGAR GUPTA		
LIII		00016	
	Address and ZIP: 245 ROONEY CT E BRUNSWICK NJ	00010	
	Phone Number: (678) 965-9522		REV 01/26/24 PRO

FAILURE TO SUBMIT THIS PAGE WILL DELAY PROCESSING OF YOUR RETURN









Form 511-NR 2023



Oklahoma Nonresident/Part-Year Income Tax Return

Your	Social Security Number		l Security Number				AMENDED RETURN!			
	Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased						Place an 'X' in this box if this is an amended 511-NR. See Schedule 511-NR-H.			
	ne and Address - Please Prir First Name	nt or Type Middle Initial Last Name	ŀ	f a Joint Return, S	Spouse's Fir	st Name	Middle Initial	Last Name		
SU	MA NAGA VAISHNAVI	PURIGHAL	LA							
Mailin	g Address (Number and street, including	g apartment number, rural route	or PO Box) City			State	ZIP or Posta	Il Code	Country	
	515 BRIAR FOREST D		HOUS	ron		TX	77077		,	
				* Note: If cla	iming Spe	cial Exemptio	n, see instr	ructions on	page 10 of	511NR Packet.
sn	1 X Single 2 Married filing joint r 3 Married filing separ	eturn (even if only one h	ad income)		Yourself	-	Special	Blind		(a)
Filing Status	If spouse is also filing, list name and SSN in the box	Name:		Exemptions	Spouse	+			1	— (b)
证		with qualifying person r) with dependent child		xeu		Number o	of depen	dents	1	(c)
	Please list the year spo	, ,] ú	Add the To	otals from box Enter	es (a), (b) the TOTAL		1	
ncy	Nonresident(s) Sta					claimed as a d		on anothe	r return, e	nter "0" in the
Residency Status	X Part-Year Resident(s) From 01/01/2023 t Resident/Nonresident	o <u>06/30/2023</u>		, , o	, o				
Res	State of Residence:		use	Age 65 o	r Older?	(Please see in	structions)	Yo	urself	Spouse
De	pendents - If more than four	dependents, see instruc	ctions and place a	n 'X' here:						
1. Fir	st Name	2. Last Name	3	3. Social Security	Number	4. Date of Birt	h !	5. Relationsh	ip to Yo	
	Not Required to File \$1,000. (see instructions)	- Place an 'X' in this bo	x if you are a no	nresident w	hose gro	ess income	from Okl	ahoma s	ources is	less than
	nplete Schedule 511-NR- ome (line 1) and Federal a						" to arri			
					Fede	ral Amou	nt	Okla	ihoma /	Amount
1	Oklahoma source income (S	Schedule 511-NR-1, line	18)					1		95172 00
2	Federal adjusted gross inco	ome (Schedule 511-NR-1	l line 19)			1348	05 00	2		
$\overline{}$	Oklahoma additions (Schedul					1340	00	3		00
	Add lines (Federal 2 and 3) a					1348	05 00	4		95172 00
5	Oklahoma subtractions (Sche	dule 511-NR-B, line 17)					00	5		00
6	Adjusted gross income: Oklal	homa Source (line 4 mir	nus line 5)					6		95172 00
7	Adjusted gross income: All Sour	ces (line 4 minus line 5) Als	so enter on line 8			1348	05 00	7		
8	Adjusted gross income: All S	Sources (from line 7)						8		134805 00
-	Oklahoma Adjustments (Sche							9		00
10	Income after adjustments (line	e 8 minus line 9)						10		13480500



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 2

Name(s) Shown on Form 511NR: SUMA NAGA VAISHNAVI PURIGHALLA

Your Social Security Number: 160893632

	Amount from line 10 on page 1		134805 00
11	Oklahoma itemized deductions (Schedule 511-NR-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)	11	6350 00
12			
13	Total deductions and exemptions (add lines 11 and 12)	13	7350 00
14	Oklahoma Taxable Income: (line 10 minus line 13)	14	127455 00
15	(a) Oklahoma Income Tax from Tax Table or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 15 15a 5866 0 0)	
	(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 15)	
	Oklahoma Income Tax (line 15a plus line 15b)	15	5866 00
STO	P AND READ: If line 7 is equal to or larger than line 2, complete line 16. If line 7 is smaller than line 2, see Schedule 511-NR-E Oklahoma child care/child tax credit (see instructions)		00
17	Subtract line 16 from line 15 (This is your tax base) (Do not enter less than zero)	17	5866 00
18	Tax percentage: Oklahoma Amount (from line 6) a) 95172 Federal Amount (from line 7) b) 134805	18	70.600 %
19	Oklahoma Income Tax. Multiply line 17 by line 18 If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "1" in box. 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 "2" in the box)	19	4141 00
			00
20	Credit for taxes paid to another state (provide Form 511-TX) nonresidents do not qualify	20	00
21	Form 511-CR - Other Credits Form - List 511-CR line number claimed here:	21	00
22	Line 19 minus lines 20 and 21(Do not enter less than zero)	22	4141 00
23	Use tax due on Internet, mail order, or other out-of-state purchases while living in Oklahoma		
	If you certify that no use tax is due, place an 'X' here:	23	00
24	Balance (add lines 22 and 23)	24	4141 00
25	Oklahoma withholding (provide W-2s, 1099s or withholding statement) 25 4183 00)	
26	2023 Oklahoma estimated tax payments If you are a qualified farmer, place an 'X' here: 26 00)	
	if you are a qualified farifier, place an X fiere.		
27	2023 payment with extension)	
28	Credit from Form 578)	
29	Oklahoma earned income credit (Sch. 511-NR-F, line 4))	
30	Amount paid with original return plus additional paid after it was filed (amended return only))	
31	Payments and credits (add lines 25-30)	31	4183 00

2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 3

	Form 511NR: SUMA NAGA VAISH	NAVI PURIGHALLA		Security N	ai Number: 160893	632
			Amount from li	ne 31 on page 2		4183 00
32	Overpayment, if any, as shown on or	riginal return and/or prior ame				
	adjusted by Oklahoma (amended ref				32	00
33	Total payments and credits (line 3	1 minus line 32)			33	4183 00
34	If line 33 is more than line 24, subtra	ct line 24 from line 33. This is	your overpayment		34	42 00
35	Amount of line 34 to be applied to 20 (see page 4 of 511NR Packet for furth			00		
Place	dule 511-NR-G provides you with the opportue the line number of the organization from Scl to more than one organization, put a "99" in t	nity to make a financial gift from you nedule 511-NR-G in the box. If you	ur refund to a variety of Oklahom	na organizations.		
36	Donations from your refund (total fro	m Schedule 511NR-G)	36	00		
37	Total deductions from refund (add lin	es 35 and 36)			37	00
38	Amount to be refunded (line 34 min	us line 37)			38	42 00
Se	nd my refund as a: Debit Card	Is this refund going to or thro Direct Deposit my refund X Checking Account	_		ited States?	Yes X No
	Paper Check	Savings Account	Account Number: 58793549	74		
39	If line 24 is more than line 33, subtra				39	00
40	Underpayment of estimated tax inter	rest (annualized installment m	ethod)		40	00
41	For delinquent payment add penal	ty of 5%	\$			
	plus interest of 1.25% per month		\$		41	00
42	Total tax, penalty and interest (add l	ines 39-41)			42	00
and a	or penalty of perjury, I declare the information cont till attachments and schedules, is true and correct and belief.	to the heat of my knowl	an 'X' in this box if the Oklahom iscuss this return with your tax			
Taxp	ayer's Signature Date	Spouse's Signature	Date	Paid Preparer's Signat		Date
Tax	payer's Occupation	Spouse's Occupation		SYAM PRIYA RAM Paid Preparer's Addres		03/15/2024 (678) 965-9522
	TWORK ENGINEER			245 ROONEY CI	?	
Day	time Phone Number (optional)	A COPY OF F	EDERAL RETURN	E BRUNSWICK	NJ	08816
1		II	E PROVIDED.	Paid Preparer's PTIN	P02082703	

<u>Do not staple</u> 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



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 4 Note: Provide this page with your return.

Name(s) Shown on Form 511NR: SUMA NAGA VAISHNAVI PURIGHALLA

Your Social Security Number: 160-89-3632

Schedule 511-NR-1: Income Allocation for Nonresidents and Part-Year Residents See instructions on pages 10-12.

Lines 1-19: In the Federal column, enter the amounts from your Federal tax return. See the instructions to figure the amounts to report in the Oklahoma column.

		Federal Amount		Oklahoma Amount
1	Wages, salaries, tips, etc	134805 00	1	95172 00
2	Taxable interest income	00	2	00
3	Dividend income	00	3	00
4	Taxable IRA distribution	00	4	00
5	Taxable pensions and annuities	00	5	00
6	Taxable Social Security benefits (also enter on line 2 of Sch. 511-NR-B)	00	6	00
7	Capital gains or losses (Federal Schedule D)	00	7	00
8	Taxable refunds (state income tax)	00	8	00
9	Alimony received (divorce/separation agreement date:)	00	9	00
10	Business income or (loss) (Federal Schedule C)	00	10	00
11	Other gains or losses (Federal Form 4797)	00	11	00
12	Rental real estate, royalties, partnerships, etc	00	12	00
13	Farm income or (loss)	00	13	00
14	Unemployment compensation	00	14	00
15	Other income (identify:)	00	15	00
16	Add lines 1 through 15	134805 00	16	95172 00
17	Total Federal adjustments to income (identify:)	00	17	00
18	Oklahoma source income (line 16 minus line 17) Enter here and on page 1, line 1		18	95172 00
19	Federal adjusted gross income (line 16 minus line 17) Enter here and on page 1, line 2	134805 00	19	



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 5 Note: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.

Nam on F	e(s)Shown orm511NR:SUMA NAGA VAISHNAVI PURIGHALLA	You Sec	r Social curity Numb	per: 160-89-3632
	hedule 511-NR-A: Oklahoma Additions Federal Amou	nt		Oklahoma Amount
1	State and municipal bond interest	00	1	00
2	Lump sum distributions (not included in your Federal AGI)	00	2	00
3	Federal net operating loss	00	3	00
4	Recapture depletion claimed on a lease bonus or add back of excess Federal depletion	00	4	00
5	Recapture of contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Account(s)	00		00
6	Oklahoma loss distributed by an electing PTE	00	6	00
7	Miscellaneous: Other additions (enter number in box for the type of addition)	00		00
8	Total additions (add lines 1-7, enter total here and on line 3 of Form 511-NR)	00		00
	hedule 511-NR-B: Oklahoma Subtractions instructions on pages 21-25. Federal Amount			Oklahoma Amount
	Interest on U.S. government obligations	00	1	00
2	Taxable Social Security (from Schedule 511-NR-1, line 6)	00	2	00
3	Federal civil service retirement in lieu of social security	00	3	00
	- Retirement Claim Number:			
4		00	4	00
5	Oklahoma government or Federal civil service retirement	00	5	00
6	Other retirement income	00	6	00
7	U.S. Railroad Retirement Board Benefits	00	7	00
8	Additional depletion	00	8	00
9	Oklahoma net operating loss (Loss Year[s]) (provide Schedules)	00	9	00
10	Exempt tribal income (see instructions for qualifications)	00		00
		Ť		
11	Gains from the sale of exempt government obligations	00	11	00
12	Nonresident military wages (provide W-2)	00	12	
13	Oklahoma Capital Gain Deduction (provide Form 561-NR)	00	13	00
14	Income Tax Refund (Federal Form 1040 or 1040-SR, Schedule 1, line 1)	00	14	00
15	Oklahoma income distributed by an electing PTE	00	15	00
16	Miscellaneous: Other subtractions (enter number in box for the type of deduction)	00	16	00
<u>17</u>	Total subtractions (add lines 1-16, enter total here and on line 5 of Form 511-NR)	00	17	00



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 6 Note: Provide this page <u>ONLY</u> if you have an amount shown on a schedule.

Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) Shown on Form 511NR: SUMA NAGA VAISHNAVI PURIGHALLA

Your Social Security Number: 160-89-3632

Sc	hedule 511-NR-C: Oklahoma Adjustments See instruction	ns on pages 25-28.		
1	Military pay exclusion - Active Duty, Reserve and National Guard (not retirement)			00
2	Qualifying disability deduction (residents and part-year residents only)		2	00
3	Contributions to Oklahoma 529 College Savings Plan and OklahomaDream 529 Ac	count(s)	3	00
4	Deductions for providing foster care		4	00
5	Miscellaneous: Other adjustments (enter number in box for the type of deduction)	5	00
6	Total Adjustments (add lines 1-5, enter total here and on line 9 of Form 511-NR)		6	00
Sc	hedule 511-NR-D: Oklahoma Itemized Deductions See	e instructions on page 28.		
	u claimed itemized deductions on your Federal return, must claim Oklahoma Itemized Deductions.			
1	Federal itemized deductions from Federal Sch. A, line 17	00		
2	State and local sales or income taxes from Federal Sch. A, line 5a (If Federal Sch A, line 5e is limited, enter that portion of Federal Sch A, line 5a included in line 5e)	00		
3	Line 1 minus line 2		3	00
4	Medical and Dental expenses from Federal Sch. A, line 4	00		
5	Gifts to Charity from Federal Sch. A, line 145	00		
6	Line 3 minus lines 4 and 5		6	00
7	Is line 6 more than \$17,000?			00
	YES. Your itemized deductions are limited. Complete lines 9-11.			
	NO. Your itemized deductions are not limited. Skip lines 9 and 10. Go to line 1	1.		
8	Maximum amount allowed for itemized deductions. (Exception, lines 9 and 10)		8	17,000 00
9	Medical and Dental expenses from Federal Sch. A, line 4		9	00
10	Gifts to Charity from Federal Sch. A, line 14		10	00
11	Oklahoma Itemized Deductions			
	If you responded YES on line 7: Add lines 8, 9 and 10.			
	If you responded NO on line 7: Enter the amount from line 3		11	00

Enter your Oklahoma Itemized Deductions on line 11 of Form 511-NR.



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 7 Note: Provide this page ONLY if you have an amount shown on a schedule.

Name(s) Shown on Form 511NR: SUMA NAGA VAISHNAVI PURIGHALLA

Your Social Security Number: 160-89-3632

Schedule 511-NR-E: Child Care/Child Tax Credit See instructions on page 28.

If your Federal Adjusted Gross Income is \$100,000 or less and you are allowed either a credit for child care expenses or the child tax credit on your Federal return, then as a resident, part-year resident or nonresident military, you are allowed a credit against your Oklahoma tax. Your Oklahoma credit is the **greater** of:

- 20% of the credit for child care expenses allowed by the IRS Code.
- 5% of the child tax credit allowed by the IRS Code. This includes both the nonrefundable child tax credit and the refundable additional child tax credit.

The credit must be prorated based on the ratio of Adjusted Gross Income: All sources to Federal Adjusted Gross Income. If your Federal Adjusted Gross Income is greater than \$100,000, no credit is allowed. **Provide** a copy of your Federal return and, if applicable, the Federal child care credit schedule.

1	Enter your Federal child <u>care</u> credit	1	00		
2	Multiply line 1 by 20%	2	00		
3	Enter your Federal child <u>tax</u> credit (total of child tax credit & additional child tax credit)	3	00		
4	Multiply line 3 by 5%	4	00		
5	Enter the larger of line 2 or line 4			5	00
6	Divide the amount on line 7 of Form 511-NR by the amount on line 2 of				
	<u>.</u>				
	Enter the percentage from the above calculation here (do not enter mo	re th	an 100%)	6	%
7	Multiply line 5 by line 6. This is your Oklahoma child care/child tax cred	it			
Ľ	Enter total here and on line 16 of Form 511-NR			7	00

Schedule 511-NR-F: Earned Income Credit See instructions on page 28.

Residents and part-year residents are allowed a credit equal to 5% of the federal earned income credit calculated using the same requirements for calculating the earned income tax credit for federal income tax purposes in effect for the 2020 income tax year. **Provide** a copy of your Federal return and OTC Form 511-EIC.

	Nonresidents do not qualify.		
1	Federal earned income credit	1	00
2	Multiply line 1 by 5%	2	00
3	Divide the amount on line 6 of Form 511-NR by the amount on line 2 of Form 511-NR		
	Enter the percentage from the above calculation here (do not enter more than 100%)	3	%
4	Oklahoma earned income credit (multiply line 2 by line 3, enter total here and	4	000
	on line 29 of Form 511-NR)	4	00



2023 Form 511-NR - Nonresident/Part-Year Income Tax Return - Page 8

Note: Provide this page if you have an amount shown on a schedule or are filing an Amended Return.

1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Your Social Security Number: 160-89-3632

Schedule 511-NR-G: Donations from Refund (Original Return Only) See instructions on page 29.

This schedule allows you to make a donation from your refund to a variety of Oklahoma organizations. Information regarding each program, its mission, how funds are utilized and mailing addresses are shown in Schedule 511-NR-G Information on pages 29-30 of the 511-NR Packet. If you are not receiving a refund but would like to make a donation to one of these organizations, Schedule 511-NR-G Information lists the mailing address to mail your donation to the organization.

Place an 'X' in the box associated with the dollar amount you wish to have deducted from your refund and donated to that organization. Then carry that figure over into the column at the right. When you carry your figure back to line 36 of Form 511-NR, please list the line number of the organization to which you donated. If you donate to more than one organization, please write a "99" in the box at line 36 of Form 511-NR.

1	Support of Programs for Volunteers to Act					
	as Court Appointed Special Advocates for Abused or Neglected Children	\$2	\$5	\$	1	00
	Tot Abused of Neglected Children	Φ2	φ5	Ψ		00
2	Y.M.C.A. Youth and Government Program	\$2	\$5	\$	2	00
3	Support Wildlife Diversity Fund	\$2	\$5	\$	3	00
	Connect Oldebares Ciberal Leisand Lesislature and Alexani					
4	Support Oklahoma Silver Haired Legislature and Alumni Association Program	\$2	\$5	\$	4	00
5	Total donations (add lines 1-4, enter total here and on line 3	36 of Form	511-NR)		5	00
94	:hedule 511-NR-H: Amended Return Inf	Format	ion Sasi	notructions on	nage 20	
30	niedule 511-NK-n. Amended Return im	Offilat	IOII See I	iistructions on	page 29.	
Did	you file an amended Federal return? Yes		No			
					f.// JD0 //0/	
It Ye	es, provide a copy of the IRS Form 1040X or 1045 AND istment," IRS check or deposit slip. IRS documents sub	proot of	IRS acce	otance, such	as a copy of the IRS "Sta	atement of
Auju	istinent, The check of deposit slip. The documents sub	milled a	ter ming t	iis Okianomi	amended return may de	elay processing.
	ain the changes to income, deductions, and/or credits I			e reference r	number for which you are	e reporting a change
and	give the reason. If more space is needed, provide a se	parate so	chedule.			