

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: VARNA; Last Name: GOBBUR; Your Social Security Number: 422 89 2165; 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: 813 W UNIVERSITY AVENUE; Apt. No.: 909; Daytime Phone (with area code): (928) 863-9538; City, Town or Post Office: FLAGSTAFF; State: AZ; ZIP Code: 86001; Last Names Used in Last Four Prior Year(s) (if different):

FILING STATUS: 4 Married filing joint return; 5 Head of household; 6 Married filing separate return; 7 Single (checked); EXEMPTIONS: 8 Age 65 or over; 9 Blind; 10a Dependents: Under age of 17; 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 sections for Additions (lines 12-19) and Subtractions (lines 20-35), showing federal adjusted gross income and final taxable income of 9,569.00.

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

Your Name (as shown on page 1) Your Social Security Number
 VARNA GOBBUR 422-89-2165

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	9,569	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	9,569	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		00
	46 Tax: Multiply line 45 by 2.5% (.025). Enter the result.....	46		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		00
	49 Dependent Tax Credit. See instructions	49		00
	50 Family income tax credit (from the worksheet - see instructions).....	50	40	00
	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		00
	53 2023 AZ income tax withheld.....	53	70	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	54		00
	Total Payments and Refundable Credits	55 2023 AZ extension payment (Form 204)	55	
56 Increased Excise Tax Credit (from the worksheet - see instructions)		56	25	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	95	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		00
61 OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayment.....		61	95	00
62 Amount of line 61 to be applied to 2024 estimated tax.....		62		00
63 Balance of overpayment: Subtract line 62 from line 61. Enter the difference		63	95	00
Voluntary Gifts		64 - 74 Voluntary Gifts to:		
	Solutions Teams Assigned to Schools.....			
	64	<input type="text"/> 00	Arizona Wildlife.....	65 <input type="text"/> 00
	Child Abuse Prevention.....	66 <input type="text"/> 00	Domestic Violence Services.....	67 <input type="text"/> 00
	Neighbors Helping Neighbors.....	69 <input type="text"/> 00	Special Olympics.....	70 <input type="text"/> 00
	I Didn't Pay Enough Fund.....	72 <input type="text"/> 00	Sustainable State Parks and Road Fund.....	73 <input type="text"/> 00
	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			
	75			
	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			
Penalty	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	95	00
	Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a foreign account ; see instructions. 79A <input type="checkbox"/>			
Refund or Amount Owed	<input checked="" type="checkbox"/> C <input checked="" type="checkbox"/> Checking or <input type="checkbox"/> S <input type="checkbox"/> Savings ROUTING NUMBER: 1 2 2 1 0 0 0 2 4 ACCOUNT NUMBER: 8 9 1 8 9 0 9 1 2			
	80 AMOUNT OWED: Add lines 60 and 78. Make check payable to Arizona Department of Revenue; write your SSN on payment; and include with your return.....	80		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 _____ STUDENT
OCCUPATION

SPOUSE'S SIGNATURE _____ DATE _____ SPOUSE'S OCCUPATION

SYAM PRIYA RAM SAGAR GUPTA TALLAM 02292024 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