



## 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 req	quired to send	Form 511-EF to	the OTC.	Form 511-EF
Your first name and middle initial	Last name		Your social		
HARINI	DHULIPALLA		security number:	725684757	
If a joint return, spouse's first name and m	niddle initial Last name		Spouse's social security number:		
Mailing address (number and street, inclu-	ding apartment number, rural route or P0	О Вох)			
28 NEWCASTLE DR	9				Filing status:
City, State, ZIP NASHUA	NH 03	2060		Total number of	of exemptions:
			2 0 11 1 0		
PART ONE - TAX RETUR	IN INFORMATION (WHO	DE DOLLAR	S ONLY)		
Oklahoma Adjusted Gross Income: Aljusted	come (511, Line 7) <b>or</b> I Sources (511-NR, Line 8)			1	2023 00
	se Tax (511, Line 20 or 511-NR,				0 00
	ents and Credits (511, Line 32 o	*			55 00
<u> </u>	NR, Line 38)	•	,		55 00
	511-NR, Line 43)			5	0 00
balance due return with a non- Internal Revenue Code (IRC) o timely. If the due date falls on a	an electronic payment, complete -electronic payment, enclose a pa f the IRS provides for a later due a weekend or legal holiday when	ayment with the 5 <sup>o</sup> date, your payme	I1-V and submit on nt may be made by	or before the due of the later due date	date of April 15th. If the and will be considered
PART TWO - DECLARATIO	N OF TAXPAYER				
	efund be directly deposited as desig t return, this is an irrevocable appoi				
entry to the financia and/or a payment of receive confidentia.  If I have filed a balance due return, I or remain liable for the tax liability and a Under penalties of perjury, I declare I nator (ERO), and the amounts descri	Il applicable interest and penalties. have compared the information coubed in Part One above, agree with	e tax preparation see financial institution inquiries and resolved Commission (OT entained on my return the amounts shown	oftware for payment of the properties of the pro	of my Oklahoma tax ocessing of the elect ne payment. full and timely paym have provided to m ng lines of my 2022	tes owed on this return tronic payment of taxes to ent of my tax liability, I will y Electronic Return Origi- Oklahoma income tax
return. To the best of my knowledge a schedules and statements, be sent to In addition, by using a computer syste	the OTC by my ERO.	·	·	-	
mission of all information pertaining to	my use of the system and softwar	re and to the transr	nission of my tax retu	ırn electronically.	
Sign Here:				hadhara dalah	D:11
Your Signature	Date	•	nature (If joint return,		Date
PART THREE - DECLARAT					
I declare I have reviewed the above ta lectors are not responsible for reviewir the taxpayer's signature on Form 511-other requirements described in Pub. penalties of perjury I declare I have ex belief, they are true, correct, and comp	ig the taxpayer's return; however, the EF and I have provided the taxpayer 1345, Handbook for Electronic Filers amined the above taxpayer's return	ey must ensure For r with a copy of all for s of Individual Income and accompanying	m 511-EF accurately orms and information e Tax Returns (Tax Yo schedules and stater	reflects the data on to be filed with the 0 ear 2022). If I am als nents, and to the be	the return.) I have obtained DTC, and have followed all so a Paid Preparer, under
ERO Use		03/1	5/2024		
Only ERO or Paid Preparer's Sig	nature	Date	PTIN		
Paid Preparer		/			
Use Only Paid Preparer Signature		03/15/ Date	<u> 2024 P02</u> PTIN	2082703	
Firm Name (or yours if self-employed):	SYAM PRIYA RAM SAGAI	R GUPTA TAL:	LAM		
	245 ROONEY CT E BRUI				
Phone Number:				F	REV 04/04/23 PRO

### FAILURE TO SUBMIT THIS PAGE WILL DELAY PROCESSING OF YOUR RETURN









#### Form 511 2022



### **Oklahoma Resident Income Tax Return**

Your Social Security Number		(joint return only)		AME	AMENDED RETURN!				
	725-68-4757	Place an 'X' in this box if this taxpayer is deceased —	otani oniy)	Place an 'X' in this box if this taxpayer is deceased —	this	e an 'X' in this bo is an amended 5 edule 511-l.			
Nam	ne and Address - Please Prin	nt or Type							
Your F	First Name	Middle Initial Last Name	If a Joint Return	n, Spouse's First Name Middle	nitial Last N	Name			
	RINI	DHULIPALLA		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		g apartment number, rural route or PO Bo	ox) City	State ZIP or F	ostal Code	Country			
	NEWCASTLE DR, APT	-	NASHUA	NH 030		Country			
20	NEWCASILE DR, API	. 9	NASHUA	NH USU	30				
	1 X Single		Note: IT	claiming Special Exemption, see  Regular *Special	Instruction		511 Packet.		
	2 Married filing joint r	eturn (even if only one had inc	ome)	Yourself 1 +	+		(a)		
			suc		-	-			
tatus	3 Married filing separ	rate ling, list name and SSN in the b	oves   d	Spouse 0 +	<u> </u>	0	(b)		
Filing Status	Name	SSN	oxes Exemptions	Number of dep	endents	s <b>=</b>	(c)		
Ε			—   ŭ	Add the Totals from boxes (a),					
			Note: If:	Enter the TO				4h a	
	Head of household with qualifying person  Note: If you may be claimed as a deperton Total box for your regular exemption.					dent on another return, enter "U" in the			
	5 Qualifying widow(e	er) with dependent child							
	Please list the year sp	oouse died in box at right:	Age 65	or Older? (Please see instruction	ns)	Yourself	Spou	ıse	
<b>D4</b>	DT ONE TO ADDIVE	AT OUT ALIONA AD IIIO		2015	$\neg$				
PA	RI ONE: IO ARRIVE A	AT OKLAHOMA ADJUS	TED GROSS INC	OME	R	ound to Neare	est Whole D	ollar	
1	Federal adjusted gross incor	me (from Federal 1040 or 1040	-SR)		1		2023	00	
2	Oklahoma Subtractions (prov	vide Schedule 511-A)			2			00	
	Citationia Gabilactionis (pro-	vide conclude of 1777,						00	
3					3		2023	00	
4	Out-of-state income, except (Provide Federal schedule with	wages. Describe (4a) detailed description; see instruction	ons)	· · · · · · · · · · · · · · · · · · ·	4b			00	
5	Line 3 minus line 4h				5		2023	00	
	Line 3 minus line 4b				3		2023	00	
6	Oklahoma Additions (provide	e Schedule 511-B)			6			00	
7				7		2023	00		
ΡΔΙ	· ·	line 1, provide a copy of you TAXABLE INCOME, TA		<u> </u>					
. , 1				<del>-</del>					
8	Oklahoma Adjustments (prov	vide Schedule 511-C)			8			00	
9	Oklahoma income after adjus	stments (line 7 minus line 8)			9		2023	00	

STOP AND READ: If line 4b is zero, complete lines 10-11. If line 4b is more than zero, see Schedule 511-E and do not complete lines 10-11.



Your Social Name(s) Shown on Form 511: HARINI DHULIPALLA Security Number: 725-68-4757 PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued Oklahoma itemized deductions (from Schedule 511-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)..... 6350 00 Exemptions: Enter the total number of exemptions claimed on page 1..... 1000 00 Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5)..... 7350 00 13 Oklahoma Taxable Income (line 9 minus line 12) -5327 **00** (a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) 14 or if using Farm Income Averaging, enter tax from Form 573, line 22 and 0 00 enter a "1" in box on line 14 ...... 14a (b) If paying the Health Savings Account additional 10% tax. add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. 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 "4" in the box on line 14 ..... 14b 00 Oklahoma Income Tax (line 14a plus line 14b) ..... 14 0 00 STOP AND READ: If line 7 is equal to or larger than line 1, complete line 15. If line 7 is smaller than line 1, complete Schedules 511-F and 511-G. 00 Oklahoma child care/child tax credit (see instructions)..... 16 Credit for taxes paid to another state (provide Form 511TX)..... 16 00 Form 511CR - Other Credits Form. List 511CR line number claimed here: 17 00 17 Income Tax (line 14 minus lines 15-17) Do not enter less than zero 0 00 18 DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42. PART THREE: TAX, CREDITS AND PAYMENTS 00 Use tax due on Internet, mail order, or other out-of-state purchases..... (For use tax table, see page 14 of the Packet) If you certify that no use tax is due, place an 'X' here: 0 00 20 15 00 Oklahoma withholding (provide all W-2s, 1099s or other withholding statements).. 21 21 00 2022 estimated tax payments ..... (qualified farmer 22 22 23 00 24 00 25 40 00 00 26 00 27 28 00 Amount paid with original return plus additional paid after it was filed 00 



Name(s) Shown on Form 511: HARINI DHULIPALLA Security					al Number: 725–68–4757		
PA	RT THREE: TAX, CREDITS AND PAY	MENTS continued					
	·						
30	Payments and credits (add lines 21-29 fr	,			30	55 00	
31	Overpayment, if any, as shown on original as previously adjusted by Oklahoma (amer	31	00				
32	Total payments and credits (line 30 minu	s 31)			32	55 <b>00</b>	
PA	RT FOUR: REFUND						
33	If line 32 is more than line 20, subtract line	20 from line 32. This is your overp	ayment		33	55 <b>00</b>	
34	Amount of line 33 to be applied to 2023 estim	, ,					
	(For further information regarding estimated t	,	34	(	00		
your of the	dule 511-H provides you with the opportunity refund to a variety of Oklahoma organizations organization from Schedule 511-H in the box one organization, put a "99" in the box. Provi	s. Please place the line number to below. If you give to more					
35	Donations from your refund (total from Sch	edule 511-H)	35	(	00		
36	Total deductions from refund (add lines 34	and 35)			36	00	
37	Amount to be refunded to you (line 33 min	us line 36)			37	55 <b>00</b>	
<u> </u>	irect Deposit Note:	refund going to or through an acco	unt that is leasted	Loutoido of the	United States 2	V	
_		sit my refund in my:	unt that is located	outside of the	onneu States?	Yes X No	
are	correct. If your direct deposit fails	Routing					
to process or you do not choose direct deposit, you will receive a debit card.				8			
See	11 - 12 B 1 1 1 B 1 1 B 1 B 1 B 1 B 1 B 1 B	Savings Account Account Number:	792957059				
PA	ART FIVE: AMOUNT YOU OWE						
38	38 If line 20 is more than line 32, subtract line 32 from line 20. This is your tax due					00	
Donation: Public School Classroom Support Fund (original return only)				39	00		
40	Underpayment of estimated tax interest (a	nnualized installment method		)	40	00	
	(If you have an underpayment of estimated					00	
41	For delinquent payment add penalty of 5%	\$ _			_		
plus interest of 1.25% per month\$						00	
Total tax, donation, penalty and interest (add lines 38-41)					42	0 00	
	penalty of perjury, I declare the information contained in ti ments and schedules, is true and correct to the best of my		nis box if the Oklahoma T				
	ayer's Signature Date	Spouse's Signature	Date	Paid Preparer's S	Signature	Date	
	)		24.0	CAVW DELAY BYW C	ACAR CUPTA TALLAM	03/15/2024	
Taxpa	ayer's	Spouse's Occupation		Paid Preparer's A	ddress and Phone N	lumber (678) 965-9522	
	pation JDENT WORKER			245 ROON		(0,0,000 )022	
Dayti (optic	me Phone nal)	Daytime Phone (optional)		E BRUNSW		NJ 08816	
(5540	(405) 418-1545	(		Paid Preparer's F	PTIN P020827	703	

<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

The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.

# State of Oklahoma Claim for Credit/Refund of Sales Tax

Railroad Retirement benefits

Alimony .....

Unemployment benefits .....

Other pensions, annuities and IRAs .....



Taxpayer's Social Security Number:

Spouse's Social

5

6

7

725-68-4757

If died in 2022 or 2023, enter date of death:

If died in 2022 or 2023, enter date of death: Instructions on page 3. Please read carefully as ☐ ☐ an incomplete form may delay your refund.

538-S

Secu	urity Number:		enter date of deat	th:					
Тахр	payer's First Name	Middle Initial	Last Name	Spouse's First N	ame (If a Joint Return)	Middle Initia	Last Nam	e	
НА	RINI		DHULIPALLA						
Maili	ing Address (Number and street, include	ing apartment nu	imber, or rural route)	City			State	ZIP	
28	NEWCASTLE DR, AP	т. 9		NASHUA			NH	03060	
P	ART 1: TAXPAYER INF	ORMATIO	DN						
	nysical Address in 2022 (If diff			ss section):					
	Place an 'X' if you or you	r spouse hav	re a physical disability	constituting a substar	tial handicap to e	mployment (si	ubmit pro	of)	
Place an 'X' if you or your spouse are 65 years of age or over Oklahoma resident for the entire year? X yes no									
PA	PART 2: DEPENDENT Note: Do not enter the taxpayer or spouse as a dependent.  EXEMPTION INFORMATION								MATION
(IIIst flattle, fillidde liftidd, last flattle) if you have			5.Yea	rly QUA			TIONS		
ad	Iditional dependents, provide schedule	2. Ag	3. Social Security	Number 4. Re	ationship Inco	me			
						A. You	self		1
						B. Spo	use		
						C. Num			
						<del></del>    '	l exempti		
						claim	ied (add	A-C)	1
PA	ART 3: GROSS INCOM	E: Enter tax	able and nontaxable gro	oss income and assista	nce received by AL	L members of	your hous	ehold in th	e year 2022.
See	"Total gross household in	come" defir	ition on page 3 for ex	camples of income.			VEADI	Y INCOM	F
						YOU MAY		R NEGATIVE	
1 Enter total wages, salaries, fees, commissions, bonuses, and tips (including <b>nontaxable</b> income from your W-2s)				1			2023 00		
2 Enter total interest and dividend income received				2			00		
					3			00	
3 Total of all dependents' income (from Part 2, column 5)				3			00		
4 Social Security payments (total including Medicare)				4			00		

00

00

00

00

5

6

7

8







Name(s) Shown on Form 538-S:		Your Social Security Number:		
IIADINI DIIII IDALIA		705 60 4757		
HARINI DHULIPALLA		725-68-4757		
PART 3: GROSS INCOME: Enter taxable and nontaxable gross income and ass	sistance received by ALI	L members of your household in the year 20	022.	
See "Total gross household income" definition on page 3 for examples of income.		YEARLY INCOME YOU MAY NOT ENTER NEGATIVE AMOUNTS		
9 Earned Income Credit (EIC) received in 2022		9	00	
10 Nontaxable sources of income (specify)	1	0	00	
11 Enter <b>gross</b> (positive) income from rentals, royalties, partnerships, estates & true from the sale or exchange of property (taxable & nontaxable) (provide Federal return in		11	00	
12 Enter <b>gross</b> (positive) income from business and farm (provide Federal return include	ding schedules)1	2	00	
Other income-including income of others living in your household (specify)	1	3	00	
14 Total gross household income (Add lines 1-13)	1	4 2023	00	
If line 14 is over income limits shown in steps 2 and 3 on page 3, no credit	is allowed.			
PART 4: SALES TAX CREDIT COMPUTATION (For households with ground page 1 1 x \$40 (computations) and the same page 3 for Research page 3 for Researc	credit claimed) 1		00 he	
If the OTC may discuss this return with your tax preparer, place an 'X' here:    Deposit my refund in my:   Checking Account   Routing Number:	nt that is located outside	e of the United States? Yes	No	
Under penalty of perjury, I declare the information contained in this document and any attachments is true and correct to the best of my to the control of t				
Taxpayer's Signature and Date Spouse's S	Signature and Date			
Occupation Occupatio	n			
STUDENT WORKER				
Preparer's Signature and Date				
SYAM PRIYA RAM SACAR CHIPTA TALLAM 03/15/2024				