

Do not staple or paper clip.



Department of Taxation

2022 Ohio IT 1040 Individual Income Tax Return



01 26 23

Use only black ink/UPPERCASE letters. Use whole dollars only.

22000198 Sequence No. 1

AMENDED RETURN - Check here and include Ohio IT RE.

NOL CARRYBACK - Check here and include Schedule IT NOL.

Primary taxpayer's SSN (required) 653 53 4450

✓ If deceased

Spouse's SSN (if filing jointly) 133 27 9420

✓ If deceased

School district # 2513

First name VISWANATH SAMPA

M.I. Last name BATTINA

Spouse's first name (if filing jointly) PRAGATHI

M.I. Last name KANCHARLA

Address line 1 (number and street) or P.O. Box 4865 CASTLESTONE DR

Address line 2 (apartment number, suite number, etc.)

City DUBLIN

State ZIP code OH 43016

Ohio county (first four letters) FRAN

Foreign country (if the mailing address is outside the U.S.)

Foreign postal code

Residency Status - Check only one for primary. X Resident Part-year resident Nonresident Indicate state. Check only one for spouse (if filing jointly). X Resident Part-year resident Nonresident Indicate state.

Filing Status - Check one (as reported on federal income tax return). Single, head of household or qualifying widow(er). X Married filing jointly Spouse's SSN. Married filing separately.

Ohio Nonresident Statement - See instructions for required criteria. Primary meets the five criteria for irrefutable presumption as nonresident. Spouse meets the five criteria for irrefutable presumption as nonresident.

Federal extension filers - check here.

If someone can claim you (or your spouse if filing jointly) as a dependent, check here.

Do not staple or paper clip.

Table with 2 columns: Description and Amount. Row 1: 1. Federal adjusted gross income... 190842. Row 2: 2a. Additions... 2a. Row 3: 2b. Deductions... 2b. Row 4: 3. Ohio adjusted gross income... 190842. Row 5: 4. Exemption amount... 3800. Row 6: 5. Ohio income tax base... 187042. Row 7: 6. Taxable business income... 6. Row 8: 7. Taxable nonbusiness income... 187042.



MM-DD-YY Code

2022 Ohio IT 1040  
Individual Income Tax Return



SSN 653 53 4450

22000298 Sequence No. 2

Table with 2 columns: Description and Amount. Rows include 7a. Amount from line 7 on page 1 (187042), 8a. Nonbusiness income tax liability (6117), 8b. Business income tax liability (6117), 8c. Income tax liability before credits (6117), 9. Ohio nonrefundable credits (306), 10. Tax liability after nonrefundable credits (5811), 11. Interest penalty on underpayment of estimated tax (11), 12. Unpaid use tax (12), 13. Total Ohio tax liability before withholding (5811), 14. Ohio income tax withheld (6655), 15. Estimated and extension payments (15), 16. Refundable credits (16), 17. Amended return only (17), 18. Total Ohio tax payments (6655), 19. Amended return only overpayment (19), 20. Line 18 minus line 19 (6655), 21. Tax due (21), 22. Interest due on late payment of tax (22), 23. TOTAL AMOUNT DUE (23), 24. Overpayment (844), 25. Original return only (25), 26. Original return only (26), 27. REFUND (844).

Sign Here (required): I have read this return. Under penalties of perjury, I declare that, to the best of my knowledge and belief, the return and all enclosures are true, correct and complete.
Primary signature \_\_\_\_\_ Phone number (614) 969-9090
Spouse's signature \_\_\_\_\_ Date \_\_\_\_\_
Check here to authorize your preparer to discuss this return with the Department.
Preparer's printed name RVSSMANIKUMARAPPANA Phone number (646) 727-7157
Preparer's TIN (PTIN) P 02090332

If your refund is \$1.00 or less, no refund will be issued. If you owe \$1.00 or less, no payment is necessary.
NO Payment Included - Mail to: Ohio Department of Taxation, P.O. Box 2679, Columbus, OH 43270-2679
Payment Included - Mail to: Ohio Department of Taxation, P.O. Box 2057, Columbus, OH 43270-2057



01 26 23

Many of these credits must be calculated using a worksheet and/or be supported by additional required documentation. See the instructions for worksheets and information on supporting documentation.

Nonrefundable Credits

Table with 3 columns: Line number, Description, and Amount. Includes items like Tax liability before credits, Retirement income credit, etc.



# 2022 Ohio Schedule of Credits

Primary taxpayer's SSN

653 53 4450



22280298

Sequence No. 8

25. Technology investment credit carryforward (include a copy of the credit certificate).....	25.	
26. Enterprise zone day care & training credits (include a copy of the credit certificate) .....	26.	
27. Research & development credit (include a copy of the credit certificate).....	27.	
28. Nonrefundable Ohio historic preservation credit (include a copy of the credit certificate).....	28.	
29. Total (add lines 12 through 28) .....	29.	306
30. Tax less additional credits (line 11 minus line 29; if negative, enter zero).....	30.	5811

**Nonresident Credit**

**Dates of Ohio residency** **to** **Other state of residency**

31. Nonresident Portion of Ohio adjusted gross income - Ohio IT NRC Section I, line 18 (include a copy) .....	31.	
32. Ohio adjusted gross income (Ohio IT 1040, line 3).....	32.	
33a. Divide line 31 by line 32 (four decimals; do not round; if greater than 1, enter 1.0000) .....	33a.	
33. Nonresident credit (line 30 times line 33a) .....	33.	

**Resident Credit**

34. Resident credit – Ohio IT RC, line 7 (include a copy) .....	34.	
35. <b>Total nonrefundable credits</b> (add lines 10, 29, 33 and 34; enter here and on Ohio IT 1040, line 9) .....	35.	306

**Refundable Credits**

36. Refundable Ohio historic preservation credit (include a copy of the credit certificate).....	36.	
37. Refundable job creation credit & job retention credit (include a copy of the credit certificate) .....	37.	
38. Pass-through entity credit (include a copy of the Ohio IT K-1s).....	38.	
39. Motion picture & Broadway theatrical production credit (include a copy of the credit certificate).....	39.	
40. Venture capital credit (include a copy of the credit certificate) .....	40.	
41. <b>Total refundable credits</b> (add lines 36 through 40; enter here and on Ohio IT 1040, line 16).....	41.	



# 2022 Schedule of Ohio Withholding

Use only black ink/UPPERCASE letters. Use whole dollars only.

Primary taxpayer's SSN

653 53 4450



22350198

Sequence No. 11

List your and your spouse's (if filing jointly) W-2, 1099, and W-2G forms **only if they have Ohio withholding**. Enter "P" in the "P/S" box if the form is the primary taxpayer's and enter "S" if it is the spouse's. If the Ohio ID number on a statement has 9 digits, enter only the first 8 digits. Complete additional copies if necessary. **Place state copies of your income statements after the last page of your return.**

### Part A - Total Withholding

1. Total of all Ohio state tax withheld on pages 1 and 2 as well as any additional pages. Enter here and on line 14 of your Ohio IT 1040 .....1. 6655

### Part B - W-2s

1. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
S	821627978	47269	5291
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
	54076772	47269	1305
2. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
S	270007828	6360	96
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
	52683339	2400	47
3. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
P	311688884	166492	25294
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
	52624592	166492	5303
4. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
5. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
6. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
7. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax



# 2022 Schedule of Ohio Withholding

Primary taxpayer's SSN  
653 53 4450



22350298

Sequence No. 12

## Part C - 1099-Rs

1. P/S Payer's TIN

Box 15 - Payer's Ohio number

Box 1 - Gross distribution

Box 4 - Federal income tax withheld

Total  
distribution

Box 7 -  
Distribution code

Box 14 - Ohio tax withheld

2. P/S Payer's TIN

Box 15 - Payer's Ohio number

Box 1 - Gross distribution

Box 4 - Federal income tax withheld

Total  
distribution

Box 7 -  
Distribution code

Box 14 - Ohio tax withheld

3. P/S Payer's TIN

Box 15 - Payer's Ohio number

Box 1 - Gross distribution

Box 4 - Federal income tax withheld

Total  
distribution

Box 7 -  
Distribution code

Box 14 - Ohio tax withheld

4. P/S Payer's TIN

Box 15 - Payer's Ohio number

Box 1 - Gross distribution

Box 4 - Federal income tax withheld

Total  
distribution

Box 7 -  
Distribution code

Box 14 - Ohio tax withheld

## Part D - W-2Gs

1. P/S Payer's federal ID number

Box 13 - Ohio state ID number

Box 1 - Reportable winnings

Box 14 - Ohio state winnings

Box 4 - Federal income tax withheld

Box 15 - Ohio income tax withheld

2. P/S Payer's federal ID number

Box 13 - Ohio state ID number

Box 1 - Reportable winnings

Box 14 - Ohio state winnings

Box 4 - Federal income tax withheld

Box 15 - Ohio income tax withheld

3. P/S Payer's federal ID number

Box 13 - Ohio state ID number

Box 1 - Reportable winnings

Box 14 - Ohio state winnings

Box 4 - Federal income tax withheld

Box 15 - Ohio income tax withheld

## Part E - 1099-NECs

1. P/S Payer's TIN

Box 6 - Payer's Ohio number

Box 1 - Nonemployee compensation

Box 7 - State income

Box 4 - Federal income tax withheld

Box 5 - Ohio tax withheld

2. P/S Payer's TIN

Box 6 - Payer's Ohio number

Box 1 - Nonemployee compensation

Box 7 - State income

Box 4 - Federal income tax withheld

Box 5 - Ohio tax withheld



# 2022 Schedule of School District Withholding

Use only black ink/UPPERCASE letters. Use whole dollars only.

Complete a separate schedule for each SD 100 you file that reports school district withholding.

Primary taxpayer's SSN

School District #

List your and your spouse's (if filing jointly) W-2 and 1099-R forms **only if they have school district withholding**. Enter "P" in the "P/S" box if the form is the primary taxpayer's and enter "S" if it is the spouse's. If the Ohio ID number on a statement has 9 digits, enter only the first 8 digits. Complete additional copies if necessary. **Place state copies of your income statements after the last page of your return.**

**Important:** On occasion, employers will report school district withholding in box 14 of the W-2 instead of the "local" boxes. In this case, enter the school district number and the withholding amount in the appropriate fields and report the Ohio state wages from box 16 as the school district wage amount.

### Part A - Total Withholding

1. Total of all school district income tax withheld for the school district entered above. Enter here and on line 7 of your SD 100 ..... 1. **4695**

### Part B - W-2s

1. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
S	821627978	47269	5291
	Box 15 - Employer's Ohio ID number	Box 18 - School district wages	Box 19 - School district tax
	54076772	52667	1317
2. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
S	270007828	6360	96
	Box 15 - Employer's Ohio ID number	Box 18 - School district wages	Box 19 - School district tax
	52683339	2400	48
3. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
P	311688884	166492	25294
	Box 15 - Employer's Ohio ID number	Box 18 - School district wages	Box 19 - School district tax
	52624592	166492	3330
4. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 18 - School district wages	Box 19 - School district tax
5. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 18 - School district wages	Box 19 - School district tax

### Part C - 1099-Rs

1. P/S	Payer's TIN	Box 1 - Gross distribution	Box 4 - Federal income tax withheld
	Box 15 - Payer's Ohio number	Box 19 - School district distribution	Box 17 - School district tax



Form R  
File by

2022 DUBLIN CITY INCOME TAX RETURN 2022

THIS RETURN MUST BE FILED BY EVERYONE REQUIRED TO SUBMIT A DECLARATION OF ESTIMATED TAX EVEN THOUGH DECLARATION WAS ACCURATE AND PAID IN FULL.

Fiscal Years Fill in Dates  
Beginning  
Ending  
And File Within 4 Months of Ending Date

OCCUPATION OR PRINCIPAL BUSINESS ACTIVITY . . . . .

INDICATE WHETHER SOLE PROPRIETORSHIP EMPLOYEE OTHER

ACCOUNT NUMBER ACCOUNT TYPE SSN  
653-53-4450

Date moved in . . . . . Spouse SSN  
Date moved out . . . . . 133-27-9420

VISWANATH SAMPATH KU BATTINA  
PRAGATHI KANCHARLA  
4865 CASTLESTONE DR  
DUBLIN OH 43016

Table with 2 columns: Yes, No. Rows include: ARE YOU A RESIDENT?, DID YOU FILE A RETURN FOR 2021?, HAS INTERNAL REVENUE SERVICE INCREASED YOUR INCOME TAX LIABILITY FOR ANY PRIOR YEAR?, IF SO, HAS AN AMENDED INCOME TAX RETURN BEEN FILED?, YOUR LOCAL PHONE NUMBER.

Your Name, Address and Social Security Number/Federal ID Number Are Printed Above As They Appear On Our Records. Make Corrections Where Necessary. Add Social Security Number/Federal ID Number If Missing. Attach Copy of Federal Return And Schedules in Lieu of Page 2 Schedules C, E, and H. Otherwise, Returns Will Be Questioned if all lines Applicable to Taxpayer Are Not Completed.

This Space For Tax Office Use Only

Enter Employer's Name, Where Employed, And 2022 Gross Wages, Salaries, Bonuses, Commissions, Tips, Etc. Attach Copy Of W-2 Form(s)

Table with 4 columns: Employer's Name (Attach Copy of W-2 Form(s)), City Where Employed, City Tax Withheld, Wages, Etc. Rows include: GATHI ANALYTICS LLC, UNITED SOFTWARE GROUP INC, ERP ANALYSTS INC.

Table with 2 columns: Description, Amount. Rows include: INCOME (1a TOTALS, 2 OTHER INCOME, 3 TOTAL INCOME), ADJUSTMENTS TO INCOME (4a, 4b, 4c, 5a, 5b, 5c), TAX (6 AMOUNT SUBJECT TO DUBLIN CITY INCOME TAX, 7 DUBLIN CITY TAX RATE, 8 CREDITS), ALLOWABLE CREDITS (9 BALANCE OF TAX DUE, 10 OVERPAYMENT CLAIMED).

DECLARATION OF ESTIMATED TAX FOR 2023. Table with 2 columns: Description, Amount. Rows include: 11 Total Income Subject to Tax, 12 Estimated Tax Withheld, 13 Total Estimated Tax, 14 Credit From Line 10, 15 Net Estimated Tax Due, 16 First Quarter 2023 Estimated Payment Due, 17 Total Due With This Return.

I CERTIFY I HAVE EXAMINED THIS RETURN INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE AND THAT THE FIGURES USED HEREIN ARE THE SAME AS FOR FEDERAL INCOME TAX PURPOSES. OHYB9901 09/27/16

RVSSMANIKUMARAPPANA 01/26/2023 SIGNATURE OF PERSON PREPARING IF OTHER THAN TAXPAYER DATE SIGNATURE OF TAXPAYER OR AGENT DATE

GLOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK NJ 08816 ADDRESS OR NAME AND ADDRESS OF FIRM OR EMPLOYER SIGNATURE OF SPOUSE DATE

If this return was prepared by a tax practitioner, may we contact your practitioner directly with questions regarding the preparation of this return? YES [ ] NO [ ]



Form R  
File by

2022 FRANKLIN CITY INCOME TAX RETURN 2022

THIS RETURN MUST BE FILED BY EVERYONE REQUIRED TO SUBMIT A DECLARATION OF ESTIMATED TAX EVEN THOUGH DECLARATION WAS ACCURATE AND PAID IN FULL.

Fiscal Years Fill in Dates  
Beginning  
Ending  
And File Within 4 Months of Ending Date

OCCUPATION OR PRINCIPAL BUSINESS ACTIVITY . . . . .

INDICATE WHETHER SOLE PROPRIETORSHIP EMPLOYEE OTHER

ACCOUNT NUMBER ACCOUNT TYPE SSN  
653-53-4450

Date moved in . . . . . Spouse SSN  
Date moved out . . . . . 133-27-9420

VISWANATH SAMPATH KU BATTINA  
PRAGATHI KANCHARLA  
4865 CASTLESTONE DR  
DUBLIN OH 43016

Table with 2 columns: Question, Yes/No. Includes questions about residency, 2021 filing, and amended returns.

Your Name, Address and Social Security Number/Federal ID Number Are Printed Above As They Appear On Our Records. Make Corrections Where Necessary. Add Social Security Number/Federal ID Number If Missing. Attach Copy of Federal Return And Schedules in Lieu of Page 2 Schedules C, E, and H. Otherwise, Returns Will Be Questioned if all lines Applicable to Taxpayer Are Not Completed.

This Space For Tax Office Use Only

Enter Employer's Name, Where Employed, And 2022 Gross Wages, Salaries, Bonuses, Commissions, Tips, Etc. Attach Copy Of W-2 Form(s)

Table with 4 columns: Employer's Name, City Where Employed, City Tax Withheld, Wages, Etc. Lists GATHI ANALYTICS LLC, UNITED SOFTWARE GROUP INC, and ERP ANALYSTS INC.

Income and Adjustments section (Lines 1a-9). Includes totals for income, adjustments, and tax credits. Shows a balance of tax due of 1317.

DECLARATION OF ESTIMATED TAX FOR 2023. Table with 2 columns: Line number, Amount. Shows total estimated tax due of 1317.

I CERTIFY I HAVE EXAMINED THIS RETURN INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE AND THAT THE FIGURES USED HEREIN ARE THE SAME AS FOR FEDERAL INCOME TAX PURPOSES.

RVSSMANIKUMARAPPANA 01/26/2023 SIGNATURE OF PERSON PREPARING IF OTHER THAN TAXPAYER DATE SIGNATURE OF TAXPAYER OR AGENT DATE

GLOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK NJ 08816 ADDRESS OR NAME AND ADDRESS OF FIRM OR EMPLOYER SIGNATURE OF SPOUSE DATE

If this return was prepared by a tax practitioner, may we contact your practitioner directly with questions regarding the preparation of this return? YES NO