IT-140

WEST VIRGINIA PERSONAL INCOME TAX RETURN

2023

SOCIAL SECURITY NUMBER	Deceased Deceased Date of Death	*	SOCIAL S	USE'S ECURITY BER	Deceased Date of Dec			eath*			
LAST NAME	VILASAGARAM		SUFFIX		YOUR FIRST NAME	SAI	ARJU	N		МІ	
SPOUSE'S LAST NAME			SUFFIX		SPOUSE'S FIRST NAME					МІ	
FIRST LINE OF ADDRESS	111 MAIN STREET WES	T APT 10	SECON OF ADI								
CITY	WHITE SULPHUR SPRIN	GS	STATE	WV	ZIP CODE	24	986				
TELEPHONE NUMBER 691/191/26 EMAIL CATAD TIM16010CMATT COM DUE D								EXTEND DUE DA MM/DD/YY	ATE		
*ONLY INLCLUDE A DECEASED TAXPAYER AND THEIR DATE OF DEATH IF IT OCCURRED IN THIS TAX YEAR. FOR THE NEXT TWO YEARS, PLEASE LIST THEM BELOW ON THE SURVIVING SPOUSE EXPEMPTION. AMENDED RETURN NONRESIDENT SPECIAL NONRESIDENT/PART YEAR RESIDENT FORM WV-8379 FI LED AS AN INJURED SPOUSE											
FILING STATUS (CHECK ONE) 1 SINGLE 2 HEAD OF HOUSEHOLD 3 MARRIED, FILING SEPARATE **Enter spouse's SS# and name in the boxes above 5 WIDOW(ER) WITH DEPENDENT CHILD											
EXEMPTIONS											
(a) YOURSELF To claim an exemption for yourself, enter 1. If someone can claim you as a dependent, leave box (a) blank.)											
(b) SPOUSE To claim an exemption for your spouse, enter 1. They may not be claimed as an exemption by anyone else. (b)											
(c) DEPENDENTS List your dependents. If over four dependents, continue on Schedule DP on page 49. Enter total number of dependents (c)											
	Dependent First name	Depende	ent Last r	name		Social	Security N	Date of Birt	th (MM	DD YYYY)	
(d) SURVIVIN	G SPOUSE (See page 21) Decedents SSN	l		Year Sp	ouse Died:					(d)	
(e) Total Exemptions (add boxes a, b, c, and d). Enter here and on line 6 below. If box e is zero, enter \$500 on line 6 below.						pelow.		(e)	1		
Federal Adjusted Gross Income or income to claim senior citizen tax credit from Schedule SCTC-A					-A	1		1253	3	.00	
Additions to income (line 59 of Schedule M)							2				.00
Subtractions from income (line 50 of Schedule M)							3				.00
West Virginia Adjusted Gross Income (line 1 plus line 2 minus line 3)						4		1253	3	.00	
Low-Income Earned Income Exclusion (see worksheet on page 29)						5				.00	
6. Total Exemptions as shown above on Exemption Box (e)1 x \$2,000						6		200	0	.00	
7. West Virginia Taxable Income (line 4 minus lines 5 & 6) IF LESS THAN ZERO, ENTER ZERO						7		1053	3	.00	
8. Income Tax Due (Check One)						8		25	3	.00	
	x Table	Nonresident/Part-ye calculation schedule	ar resid			L	<u> </u>			<u>J</u>	.00
TA PAY PLAN		NCLUDE WITH S WITH THIS F									

(W-2s, 1099s, Etc.)



PRIMARY LAST NAME	VILASAGARAM		SOCIAL SECURITY NUMBER	18	9656897		
9. Credits from Tax Credit Recap Schedule (see schedule on page 5)			9	253	.00		
10. Total Income Tax Due. Line 8 minus 9. If line 9 is greater than line 8, enter 0			10	0	.00		
11. Overpayment previously refunded or credited (amended return only)						.00	
Penalty Due	CHECK IF REQUESTING WAIVER OR QUALIFIE	ED FARMER					
12. West Virginia Us (See Schedule UT	se Tax Due on out-of-state purchases on page 44).	X CHECK IF NO	USE TAX DUE	12		.00	
13. Add lines 10 thro	ough 12. This is your total amount due			13	0	.00	
14. West Virginia Inc	come Tax Withheld (See instructions page 23)	Check if wi (Nonresident	thholding from NRSR Sale of Real Estate)	14	356	.00	
15. Estimated Tax P	ayments and Payments with Schedule 4868			15	0	.00	
16. Non-Family Ado	ption Tax Credit, if applicable (include Schedule W	/V NFA-1)		16		.00	
17. Senior Citizen Tax Credit for property tax paid (include Schedule SCTC-A)						.00	
18. Homestead Excess Property Tax Credit for property tax paid (include Schedule HEPTC-1 and Class 2 receipt)				18		.00	
19. Build WV Property Value Adjustment Refundable Tax Credit			19		.00		
20. Amount paid with original return (amended return only)			20		.00		
21. Payments and Refundable Credits (add lines 14 through 20)			21	356	.00		
22. Balance Due (lin	e 13 minus line 21). If Line 21 is greater than line 13, complete	e line 23 PAY T	HIS AMOUNT	22		.00	
	ne 13. This is your overpayment			23	356	.00	
24. Indicate donations from line 24. Enter below and enter the sum of columns 24A, 24B, and 24C on Line 24 24A. CHILDREN'S TRUST FUND 4WV DEPT. OF VETERANS ASSISTANCE ASSISTANCE 24C. STATE VETERANS CEMETERY						.00	
25. Amount of Overpayment to be credited to your 2024 estimated tax				25		.00	
26. Refund due to yo	ou (line 23 minus line 24 and line 25)		REFUND	26	356	.00	
Direct Deposit of Refund CHECKING SAVINGS 051503174 ROUTING NUMBER			008926860705 ACCOUNT NUMBER				
PLEASE REVIEW	YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORR					ARGE.	
I authorize the Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of mv knowledge and belief, it is true, correct and complete.							
Your Signature	Date Spouse	e's Signature	Date		Telephone Numb	oer	
Preparer: Check		J			p		
HERE if client is requesting NOT to efile	843171965 SYAM PRIYA RAM			4	6789659		
	Preparer's EIN Signature of preparer other than above	ve	Date		Telephone Numb	ıcı	

SYAM PRIYA RAM SAGAR GUPTA TALLAM

GLOBAL TAXES LLC

Preparer's Printed Name

1555

Preparer's Firm

FOR REFUND, MAIL TO THIS ADDRESS:	FOR BALANCE DUE, MAIL TO THIS ADDRESS:
WV TAX DIVISION	WV TAX DIVISION
P.O. BOX 1071	P.O. BOX 3694
CHARLESTON, WV 25324-1071	CHARLESTON, WV 25336-3694

Payment Options: Returns filed with a balance of tax due may pay through any of the following methods:

Check or Money Order payable to the WV Tax Division - Enclose check or money order with your return.

Electronic Payment - May be made by visiting mytaxes.wvtax.gov and clicking on "Pay Personal Income Tax".



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TAX CREDIT RECAP SCHEDULE

This summary form and the appropriate credit calculation schedule(s) or form(s) must be enclosed with your return in order to claim a tax credit. Information for these tax credits may be obtained by visiting our website at tax.wv.gov or by calling the Taxpayer Services Division at 1-800-982-8297.

Note: If you are claiming the Schedule E credit(s) or the Neighborhood Investment Program Credit you are no longer required to enclose the other state(s) return(s) or the NIPA-2 schedule with your return. You must maintain the other state(s) return(s) or NIPA-2 schedule in your files.

TAX CREDIT		SCHEDULE		APPLICABLE CREDIT	
Credit for Income Tax paid to another state(s) (§11-21-20)		E	1		.00
** For what states?				id to KY, MD, OH, PA or VA rages and salaries.	for
2. Family Tax Credit (see page 11) (§11-21-22)		FTC-1	2	253	.00
General Economic Opportunity Tax Credit (§11-13Q)		EOTC-PIT	3		.00
High Technology Manufacturing Business (§11-13Q-10a)		EOTC-HTM	4		.00
WV Environmental Agricultural Equipment Credit (§11-13K)		AG-1	5		.00
6. WV Military Incentive Credit (§11-24-12)		J	6		.00
7. Neighborhood Investment Program Credit (§11-13J)		NIPA-2	7		.00
Historic Rehabilitated Buildings Investment Credit (§11-24-23a)		RBIC	8		.00
Qualified Residential Rehabilitated Buildings Investment Credit (§11-21-8g)		RBIC-A	9		.00
10. Apprenticeship Training Tax Credit (§11-13W)		ATTC-1	10		.00
11. Alternative-Fuel Tax Credit (§11-6D)		AFTC-1	11		.00
12. Conceal Carry Gun Permit Credit (§61-7-4)		CCGP-1	12		.00
13. Farm to Food Bank Tax Credit (§11-13DD)			13		.00
14. Downstream Natural Gas Manufacturing Investment Tax Credit (§11-13GG)		DNG- 2	14		.00
15. Post Coal Mine Site Business Credit (§11-28)		PCM-2	15		.00
16. Natural Gas Liquids (§11-13HH)		NGL-2	16		.00
17. Donation or Sale of Vehicle to Qualified Charitable Organizations (§11-13FF)		DSV-1	17		.00
18. Small Arms And Ammunition Manufacturers Credit (§11-13KK)		SAAM-1	18		.00
19. West Virginia Jumpstart Savings Program Credit (Employer Use On (§11-24-10a)		JSP- 1	19		.00
20. Capital Investment in Child-Care Property Tax Credit (§11-21-97)		CIP	20		.00

Continues on next page



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TAX CREDIT RECAP SCHEDULE

2023

TAX CREDIT	SCHEDULE		APPLICABLE CREDIT	
21. Operating Costs of Child Care Property Tax Credit (§11-21-97)	OCF	21		.00
22. Industrial Advancement Act Tax Credit (§11-13LL)		22		.00
23. West Virginia Film Industry Investment Tax Credit (§11-13X)	WV FIIA-TCS	23		.00
24. Volunteer Firefighter Tax Credit (§11-13JJ)	VFTC-1	24		.00
25. Build WV Property Value Adjustment Tax Credit (§5B-2L)	PVA-2	25		.00
26. Elective Income Credit for tax paid by a pass through entity (§11-21-3a and §11-21-20)	EK-1	26		.00
27.TOTAL NON REFUNDABLE CREDITS — add all recap lines. Enter on IT-140 line 9			253	.00





FAMILY TAX CREDIT

A Family Tax Credit is available to certain individuals or families that may reduce or eliminate their West Virginia personal income tax. You may be entitled to this credit if you meet certain income limitations and family size. Individuals who file their income tax return with zero exemptions cannot claim the credit. Persons who pay the federal alternative minimum tax are not eligible to claim this credit. In order to determine if you are eligible for this credit, complete the schedule below and attach to Form IT-140. If filing status is married filing separate use Family Tax Credit Table 2.

If this schedule is not enclosed with Form IT-140, the credit will be disallowed.

Federal Adjusted Gross Income (enter the amount from line 1 of Form IT-140)	1	12533	.00
Increasing West Virginia modifications (enter the amount from line 2 of Form IT-140)	2		.00
3. Tax-exempt interest reported on federal tax return (enter the amount shown on Federal Form 1040 that is not already included on line 2 of Form IT-140)	3		.00
4. Add lines 1 through 3. This is your Modified Federal Adjusted Gross Income for the Family Tax Credit	4	12533	.00
5. Enter the number of exemptions claimed from Form IT-140, sum of boxes a, b, and c (<i>This is your Family Size for the Family Tax Credit</i>)	5	1	
6. Enter the Family Tax Credit Percentage for your family size AND Modified Federal Adjusted Gross Income level from the tables on page 12. If the exemptions on line 5 are greater than 8, use the table for a family size of 8	6	100.	
7. Enter your income tax due from line 8 of Form IT-140	7	253	.00
8. Multiply the amount on line 7 by the percentage shown on line 6 This is your Family Tax Credit. Enter this amount on line 2 of Form IT-140 RECAP	8	253	.00

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