

FORM 40 Alabama 2023 Individual Income Tax Return RESIDENTS & PART-YEAR RESIDENTS



For the year Jan. 1 - Dec. 31, 2023, or other tax year:

Beginning: ● Ending: ●
 Your social security number ● 802-36-5806
 Spouse's SSN if joint return ●
 Check if primary is deceased Primary's deceased date (mm/dd/yyyy) ●
 Check if spouse is deceased Spouse's deceased date (mm/dd/yyyy) ●
 Your first name ● PARAS Initial ● Last name ● KUNGWANI
 Spouse's first name ● Initial ● Last name ●

Present home address (number and street or P.O. Box number)

● 24862 GULF STREAM CIRCLE

City, town, or post office

● ORANGE BEACH

State ZIP code

● AL ● 36561

Check if address Foreign Country

is outside U.S.

▶ CHECK BOX IF AMENDED RETURN ●

Filing Status/	1 ● <input checked="" type="checkbox"/> \$1,500 Single	3 ● <input type="checkbox"/> \$1,500 Married filing separate. Complete Spouse SSN ●	<input type="checkbox"/> NRA	
Exemptions	2 ● <input type="checkbox"/> \$3,000 Married filing joint	4 ● <input type="checkbox"/> \$3,000 Head of Family (with qualifying person). Complete Schedule HOF		
Income and Adjustments	5a Alabama Income Tax Withheld (from Schedule W-2, line 18, column G)	A – Alabama tax withheld		
	5b Wages, salaries, tips, etc. (from Schedule W-2, line 18, column I plus J):	5a ● 673	B – Income	
	6 Interest and dividend income (also attach Schedule B if over \$1,500)	6 ●	16,470	
	7 Other income (from page 2, Part I, line 8)	7 ●		
	8 Total income. Add amounts in the income column for line 5b through line 7	8 ●	16,470	
	9 Total adjustments to income (from page 2, Part II, line 16)	9 ●		
	10 Adjusted gross income. Subtract line 9 from line 8.	10 ●	16,470	
	11 Box a or b MUST be checked. Check box a, if you itemize deductions , and enter amount from Schedule A, line 27. Check box b, if you do not itemize deductions, and enter standard deduction (see instructions)	● a <input type="checkbox"/> Itemized Deductions ● b <input checked="" type="checkbox"/> Standard Deduction		11 ● 3,000
	12 Federal tax deduction (see instructions) DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FORM W-2(S)	12 ●	261	
	13 Personal exemption (from line 1, 2, 3, or 4)	13 ●	1,500	
14 Dependent exemption (from page 2, Part III, line 2)	14 ●			
15 Total deductions. Add lines 11, 12, 13, and 14	15 ●	4,761		
16 Taxable income. Subtract line 15 from line 10	16 ●	11,709		
17 Income Tax due. Enter amount from tax table or check if from ● <input type="checkbox"/> Form NOL-85A	17 ●	548		
18 Net tax due Alabama. Check box if computing tax using Schedule OC ● <input type="checkbox"/> , otherwise enter amount from line 17.	18 ●	548		
19 Additional taxes (from Schedule ATP, Part I, Line 3)	19 ●	0		
20 Alabama Election Campaign Fund. You may make a voluntary contribution to the following: a Alabama Democratic Party <input type="checkbox"/> \$1 <input type="checkbox"/> \$2 <input type="checkbox"/> none	20a ●			
b Alabama Republican Party <input type="checkbox"/> \$1 <input type="checkbox"/> \$2 <input type="checkbox"/> none	20b ●			
21 Total tax liability and voluntary contribution. Add lines 18, 19, 20a, and 20b	21 ●	548		
22 Alabama income tax withheld (from column A, line 5a)	22 ●	673		
23 2023 estimated tax payments/Automatic Extension Payment	23 ●			
24 Amended Returns Only – Previous payments (see instructions)	24 ●			
25 Refundable Credits. Enter the amount from Schedule OC, Section F, line F4	25 ●			
26 Payments from Schedule CP, Section B, Line 1	26 ●			
27 Total payments. Add lines 22, 23, 24, 25, and 26	27 ●	673		
28 Amended Returns Only – Previous refund (see instructions)	28 ●			
29 Adjusted Total Payments. Subtract line 28 from line 27	29 ●	673		
30 If line 21 is larger than line 29, subtract line 29 from line 21, and add line 31 and enter AMOUNT YOU OWE. Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.)	30 ●			
31 Penalties (from Schedule ATP, Part II, line 3) (see instructions)	31 ●			
32 If line 29 is larger than line 21, subtract line 21 from line 29, and enter AMOUNT OVERPAID	32 ●	125		
33 Amount of line 32 to be applied to your 2024 estimated tax	33 ●			
34 Total Donation Check-offs from Schedule DC, line 2	34 ●			
35 REFUNDED TO YOU. (CAUTION: You must sign this return on the reverse side.) If line 32 is greater than zero, subtract lines 31, 33, and 34 from line 32	35 ●	125		
For Direct Deposit, check here ● <input checked="" type="checkbox"/> and complete Part V, Page 2.				

Deductions
If claiming a deduction on line 12, you must attach page 1, 2 and Schedule 1 of your Federal Return, if applicable.



PART I

1	Alimony received	1	●
2	Business income or (loss) (attach Federal Schedule C or C-EZ) (see instructions)	2	●
3	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)	3	●
4	Retirement Income (attach Schedule RS)	4	●
5	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	5	●
6	Farm income or (loss) (attach Federal Schedule F)	6	●
7	Other income (state nature and source — see instructions)	7	●
8	Total other income. Add lines 1 through 7. Enter here and also on page 1, line 7	8	●

PART II

1a	Your IRA deduction	1a	●
b	Spouse's IRA deduction	1b	●
2	Payments to a Keogh retirement plan and self-employment SEP deduction	2	●
3	Penalty on early withdrawal of savings	3	●
4	Alimony paid. Recipient's last name _____ SSN ● _____	4	●
5	Adoption expenses	5	●
6	Moving Expenses (Attach Federal Form 3903) to: City _____ State _____ ZIP _____	6	●
7	Self-employed health insurance deduction	7	●
8	Payments to Alabama College Counts 529 Fund or Alabama PACT Program	8	●
9	Health insurance deduction for small employer employee (see instructions)	9	●
10	Costs to retrofit or upgrade home to resist wind or flood damage	10	●
11	Deposits to a catastrophe savings account	11	●
12	Contributions to a health savings account	12	●
13	Deposits to an Alabama First-Time and Second Chance Home Buyer Savings Account (see instructions)	13	●
14	Firefighter's Insurance Premium	14	●
15	Contributions to an Achieving a Better Life Experience (ABLE) savings account	15	●
16	Total adjustments. Add lines 1 through 15. Enter here and also on page 1, line 9	16	●

PART III

1	Total number of dependents from Schedule DS, line 1b	1	●
2	Amount allowed. Multiply total number of dependents claimed on line 1 by the amount on the dependent chart in the instructions. Enter amount here and on page 1, line 14	2	●

PART IV

General Information

1 **Residency** Check only one box Full Year Part Year From _____ 2023 through _____ 2023.

2 Did you file an Alabama income tax return for the year 2022? Yes No If no, state reason _____

3 Give name and address of present employer(s). Yours OASIS OUTSOURCING CONTRACT LLC 2054 VISTA ROYAL PALM BEACH FL 33411
Your Spouse's _____

All Taxpayers Must Complete This Section.

4 Enter the Federal Adjusted Gross Income ● \$ 16,470 and Federal Taxable Income ● \$ 2,620 as reported on your 2023 Federal Individual Income Tax Return.

5 Do you have income which is reported on your Federal return, but not reported on your Alabama return (other than your state tax refund)? Yes No
If yes, enter source(s) and amount(s) below: (other than state income tax refund)

Source ●	Amount ●
Source ●	Amount ●

PART V For Direct Deposit of your refund, complete 1, 2, 3, and 4 below. (See instructions to see if you qualify.)

Direct Deposit

1 Routing Number: 062000019 2 Type: Checking Savings 3 Account Number: 0340225976

4 Is this refund going to or through an account that is located outside of the United States? Yes No

Drivers License Info

DOB (mm/dd/yyyy) ● _____	Your state ● _____	DL# ● _____	Iss date (mm/dd/yyyy) ● _____	Exp date (mm/dd/yyyy) ● _____
DOB (mm/dd/yyyy) ● _____	Spouse state ● _____	DL# ● _____	Iss date (mm/dd/yyyy) ● _____	Exp date (mm/dd/yyyy) ● _____

I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, 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.

Sign Here In Black Ink Keep a copy of this return for your records.

Your Signature _____	Date _____	Daytime Telephone Number <u>(251) 403-2384</u>	Your Occupation <u>CHEF</u>
Spouse's Signature (if joint return, BOTH must sign) _____	Date _____	Daytime Telephone Number _____	Spouse's Occupation _____

Paid Preparer's Use Only

Preparer's Signature <u>SYAM PRIYA RAM SAGAR GUPTA</u>	Date <u>04/06/2024</u>	Check if Self-employed <input type="checkbox"/>	Preparer's SSN or PTIN <u>P02082703</u>	E.I. Number <u>84-3171965</u>
Firm's Name (or yours if self employed) <u>GLOBAL TAXES LLC</u>	Daytime Telephone No. <u>(678) 965-9522</u>	ZIP Code <u>08816</u>		
Address <u>245 ROONEY CT E BRUNSWICK NJ</u>				



SCHEDULE
ATP

ALABAMA DEPARTMENT OF REVENUE
INCOME TAX ADMINISTRATION DIVISION
Additional Taxes & Penalties

2023

NAME(S) AS SHOWN ON THE TAX RETURN

SOCIAL SECURITY NUMBER

PARAS KUNGWANI

802-36-5806

PART I Additional Taxes

1	Consumer Use Tax (see instructions). If you certify that no use tax is due, check box <input checked="" type="checkbox"/>	1	●	0
2	Catastrophe savings tax (see instructions)	2	●	
3	Total Additional Taxes. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 19	3	●	0

PART II Penalties

1	Estimated Tax Penalty (see instructions). Farmers and Fishermen that meets IRC §6654, check box <input type="checkbox"/>	1	●	
2	First-time Second chance Home Buyer Savings Account penalty (from Schedule HBC, Part IV, Line 4)	2	●	
3	Total penalties. Add line 1 and line 2. Enter here and also on Form 40, page 1, line 31	3	●	



Alabama Department of Revenue
Wages, Salaries, Tips, etc.

Schedule W-2 must be completed fully and included with your return in order to receive proper credit for your Alabama income tax withheld. Attach a copy of all withholding statements to your return.

NAME(S) AS SHOWN ON TAX RETURN
PARAS KUNGWANI

PRIMARY'S SOCIAL SECURITY NO. SPOUSE'S SOCIAL SECURITY NO.
802-36-5806

	A Employee's Social Security Number	B Employer's Identification Number (EIN)	C Statutory Employee	D Schedule C/C-EZ Filed?	E State Code	F Alabama Employer's State ID Number	G Alabama State Income Tax Withheld	H Federal Wages (Box 1 of Form W-2)	I Alabama State Wages (Box 16 of Form W-2)	J Additional Taxable Wages - Other States	
1	802-36-5806	593578989	<input type="checkbox"/>	<input type="checkbox"/>	AL	0000367795	673	16,470	16,470		
2			<input type="checkbox"/>	<input type="checkbox"/>							
3			<input type="checkbox"/>	<input type="checkbox"/>							
4			<input type="checkbox"/>	<input type="checkbox"/>							
5			<input type="checkbox"/>	<input type="checkbox"/>							
6			<input type="checkbox"/>	<input type="checkbox"/>							
7			<input type="checkbox"/>	<input type="checkbox"/>							
8			<input type="checkbox"/>	<input type="checkbox"/>							
9			<input type="checkbox"/>	<input type="checkbox"/>							
10			<input type="checkbox"/>	<input type="checkbox"/>							
11			<input type="checkbox"/>	<input type="checkbox"/>							
12			<input type="checkbox"/>	<input type="checkbox"/>							
13			<input type="checkbox"/>	<input type="checkbox"/>							
14			<input type="checkbox"/>	<input type="checkbox"/>							
15			<input type="checkbox"/>	<input type="checkbox"/>							
16	TOTAL ALABAMA TAX WITHHELD FROM W-2s. Total lines 1-15, Column G and enter the amount here . . .						673				
17	ALABAMA TAX WITHHELD FROM 1099s AND W-2Gs. Enter the total Alabama Income Tax Withheld from all Form 1099s and Form W-2Gs received. See instructions on where to report the income from these statements.						0				
18	TOTAL WAGES AND TOTAL ALABAMA TAX WITHHELD FROM W-2s, 1099s, AND W-2Gs. See instructions.						673	16,470	16,470		

THIS SCHEDULE CAN ONLY BE SUBMITTED AND/OR PRINTED VIA LANDSCAPE

Your first name and initial: PARAS Last name: KUNGWANI

Home address (number and street): 24862 GULF STREAM CIRCLE Apt. no. City, town or post office, state, and ZIP code: ORANGE BEACH AL 36561

Your social security number: 802365806 Spouse's soc. sec. no. if joint return Telephone number (optional): (251) 403-2384

Table with 2 columns: Line number and Amount. Rows include Alabama taxable income (11,709), Total tax liability (548), Total payments (673), Refund (125), and Amount you owe.

Part II Refund and Payment Information. Includes routing number (062000019), account number (0340225976), type of account (Checking), and type of transaction (Direct Deposit).

Part III Declaration of Taxpayer. Under penalties of perjury, I declare that I have compared the information contained on my return with the information I have provided to my electronic return originator...

Sign Here. Your signature, Date, Spouse's signature. If a joint return, BOTH must sign, Date.

Part IV Declaration of Electronic Return Originator (ERO) and Paid Preparer. I declare that I have reviewed the above taxpayer's Alabama individual income tax return and that the entries on this form are complete and correctly represented based on all information of which I have any knowledge...

ERO's Use Only. Includes ERO's signature, Date (04/06/2024), Check if also paid preparer, Preparer's PTIN, Firm's name (GLOBAL TAXES LLC), and address (245 ROONEY CT E BRUNSWICK NJ).

Paid Preparer's Use Only. Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Includes Preparer's signature, Date (04/06/2024), Check if self-employed, Preparer's PTIN (P02082703), Firm's name (SYAM PRIYA RAM SAGAR GUPTA), and address (245 ROONEY CT E BRUNSWICK NJ).

DO NOT MAIL TO ALABAMA DEPT. OF REVENUE

