

Do not mail this form to the Arizona Department of Revenue. The ERO must retain this document a minimum of four years.

Your First Name and Initial	Last Name	Enter your SSN(s).	Your Social Security Number*
DARSHAN	JOSHI		783 36 4759
Your Spouse's First Name and Initial (if filed joint)	Last Name		Spouse's Social Security No.*
AMRITA	KALLA		892 20 6384

PART 1 – PURPOSE (If you are e-filing a Small Business Income Tax Return, also complete Form AZ-8879 SBI) *Do Not Truncate
• To certify the truthfulness, correctness, and completeness of the taxpayer's electronic income tax return.
• To authorize the Electronic Return Originator (ERO) to affirm that the taxpayer wishes to use the taxpayer's electronic signature to the taxpayer's federal individual income tax return as the taxpayer's signature to the taxpayer's electronic Arizona individual income tax return.

PART 2 – TAX RETURN INFORMATION		PART 3 – FINANCIAL INSTITUTION INFORMATION	
1 Arizona Adjusted Gross Income	284,540 00	Must be present when requesting direct debit or deposit. <input type="checkbox"/> Foreign Account Deposit/Debit: See instructions below. TYPE OF ACCOUNT	
2 Balance Of Tax	6,221 00	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	
3 Arizona Income Tax Withheld	7,740 00	ROUTING NUMBER	
Check box 4 or box 5:		ACCOUNT NUMBER	
4 <input checked="" type="checkbox"/> REFUND: Enter the amount of refund	1,519 00	6 2 7 0 3 9 7 2 5	
5 <input type="checkbox"/> AMOUNT YOU OWE: Enter the amount owed	00	DIRECT DEBIT REQUEST DATE	
		DIRECT DEBIT PAYMENT AMOUNT \$.00	

Box 4 Checkbox – Refund: You are due a refund based on the information provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3).
Box 5 Checkbox – Amount You Owe: You owe taxes based on the information provided on your tax return. You have elected to direct debit for payment. The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).

Foreign Account Deposit/Debit Checkbox: Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come from a foreign account. If you check this box, do not enter your account numbers. If this box is checked, we will not direct deposit or debit your account. If you are due a refund, we will send you a check instead. If you owe tax, **you must mail a check to the Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.**

PART 4 – DECLARATION AND SIGNATURE AUTHORIZATION (Sign only after completing Part 2)

Under penalties of perjury, I declare that I have examined a copy of my electronic Arizona individual income tax return and accompanying schedules and statements for the year ending December 31, 2023, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts of Arizona adjusted gross income, total tax, Arizona income tax withheld, and refund (or amount owed) listed above are the amounts shown on the copy of my electronic Arizona income tax return.

I consent to my Electronic Return Originator (ERO) or On-Line Service Provider (OLSP) sending my electronic Arizona individual income tax return and accompanying schedules and statements to ADOR, and I consent to my ERO or OLSP sending such information to ADOR through a transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the transmission of my return is accepted and, if the return is rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/or transmitter the reason(s) for the delay, or when the refund was sent. If ADOR contacts my ERO for a copy of my return, any documents or schedules to my return, and/or this authorization form, I authorize my ERO to release copies of the requested documents to ADOR.

- 6a I consent that my refund be directly deposited as designated in the electronic portion of my 2023 Arizona individual income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- 6b I do not want direct deposit of my refund or I am not receiving a refund.
- 6c I authorize the Arizona Department of Revenue (ADOR) and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Arizona taxes owed on this return. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I authorize GLOBAL TAXES LLC
(ELECTRONIC RETURN ORIGINATOR)

If I have filed a balance due return, I understand that if the ADOR does not receive full and timely payment of my tax liability by April 15, 2024, I will remain liable for the tax liability and all applicable interest and penalties. When electronically filing my federal and state tax returns, I understand that if there is an error on my federal return, my state return will also be rejected.

to make the election that I want my electronic signature to my electronic federal individual income tax return to serve as my signature to my electronic Arizona individual income tax return for the year ending December 31, 2023. I understand that when my ERO makes the election that my electronic signature to my federal individual income tax return will serve as my signature to my Arizona individual income tax return, I will have signed my Arizona individual income tax return and declared under penalties of perjury that to the best of my knowledge and belief the return is true, correct and complete.

PLEASE SIGN HERE	_____	_____ DATE
	YOUR PEN AND INK SIGNATURE	
	_____	_____ DATE
	SPOUSE'S PEN AND INK SIGNATURE	

DO NOT STAPLE ANY ITEMS TO THE RETURN.

82F Check box 82F if filing under extension OR FISCAL YEAR BEGINNING 2,0,2,3 AND ENDING 66F

Your First Name and Middle Initial DARSHAN Last Name JOSHI Your Social Security Number 783 36 4759

Spouse's First Name and Middle Initial (if box 4 or 6 checked) AMRITA Last Name KALLA Spouse's Social Security No. 892 20 6384

Current Home Address - number and street, rural route 7649 CHESTER DAWSON WAY Apt. No. Daytime Phone (with area code) (209) 252-1908

City, Town or Post Office ELK GROVE State CA ZIP Code 95757 Last Names Used in Last Four Prior Year(s) (if different) 97

EXEMPTIONS/FILING STATUS 4 Married filing joint return 4a Injured Spouse Protection of Joint Overpayment 5 Head of household. Enter name of qualifying child or dependent on next line. 6 Married filing separate return. Enter spouse's name and Social Security Number above. 7 Single

REVENUE USE ONLY. DO NOT MARK IN THIS AREA. 81 PM 80 RCVD

8 Age 65 or over (you and/or spouse) 9 Blind (you and/or spouse) 10a Dependents: Under age of 17. 10b Dependents: Age 17 and over. 11a Qualifying parents and grandparents

Enter the number claimed. Do not put a check mark.

(Box 10a and 10b): Dependent Information. See instructions. For more space, check the box and complete page 4, Part 1.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NUMBER, (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2023, (e) Dependent Age included in: 1 (Box 10a), 2 (Box 10b), (f) if you did not claim this person on your federal return due to educational credits. Rows 10c, 10d, 10e.

(Box 11a): Qualifying parents and grandparents. See instructions. For more space, check the box and complete page 4, Part 2.

Table with 6 columns: (a) FIRST AND LAST NAME, (b) SOCIAL SECURITY NUMBER, (c) RELATIONSHIP, (d) NO. OF MONTHS LIVED IN YOUR HOME IN 2023, (e) IF AGE 65 OR OVER, (f) IF DIED IN 2023. Rows 11b, 11c.

12 Federal adjusted gross income (from your federal return) 12 284,540 00

13 Small Business Income: 13S check the box if you are filing Arizona Form 140-SBI and enter the amount from Form 140-SBI, line 10.. 13 00

14 Modified federal adjusted gross income. Subtract line 13 from line 12..... 14 284,540 00

15 Non-Arizona municipal interest..... 15 00

16 Partnership Income adjustment. See instructions 16 00

17 Total federal depreciation 17 00

18 Other Additions to Income: Complete Other Additions to Arizona Gross Income schedule on page 5..... 18 00

19 Subtotal: Add lines 14 through 18 and enter the total 19 284,540 00

20 Total net capital gain or (loss). See instructions 20 00

21 Total net short-term capital gain or (loss). See instructions 21 00

22 Total net long-term capital gain or (loss). See instructions 22 00

23 Net long-term capital gain from assets acquired after December 31, 2011. See instructions. 23 0 00

24 Multiply line 23 by 25% (.25) and enter the result 24 0 00

25 Net capital gain derived from investment in qualified small business..... 25 00

26 Recalculated Arizona depreciation 26 00

27 Partnership Income adjustment. See instructions 27 00

28 Interest on U.S. obligations such as U.S. savings bonds and treasury bills..... 28 00

29a Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)..... 29a 00

29b Exclusion for benefits, annuities and pensions for retired/retainer pay of the uniformed services..... 29b 00

30 U.S. Social Security or Railroad Retirement Act benefits included as income on your federal return (taxable amount) 30 00

31 Certain wages of American Indians..... 31 00

32 Pay received for active service as a member of the reserves, national guard or the U.S. armed forces..... 32 00

33 Net operating loss adjustment. See instructions..... 33 00

34 Contributions to: 34a 529 College Savings Plans 00 34b 529A (ABLE accounts) 00 add 34a and 34b 34c 00

35 Subtract lines 24 through 34c from line 19. Enter the difference..... 35 284,540 00

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

Your Name (as shown on page 1) **DARSHAN JOSHI & AMRITA KALLA** Your Social Security Number **783-36-4759**

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	284,540	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="checkbox"/> Multiply the number in box 40E by \$2,300.....	40		00		
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	284,540	00			
Balance of Tax	43 Deductions: Check box and enter amount. See instructions..... 43I <input type="checkbox"/> ITEMIZED...43S <input checked="" type="checkbox"/> STANDARD	43	27,700	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	256,840	00		
	46 Tax: Multiply line 45 by 2.5% (.025). Enter the result.....	46	6,421	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	6,421	00		
	49 Dependent Tax Credit. See instructions	49	200	00		
	50 Family income tax credit (from the worksheet - see instructions).....	50		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	6,221	00		
Total Payments and Refundable Credits	53 2023 AZ income tax withheld.....	53	7,740	00		
	54 2023 AZ estimated tax payments. 54a <input type="checkbox"/> 00 Claim of Right 54b <input type="checkbox"/> 00 Add 54a and 54b. 54c	54		00		
	55 2023 AZ extension payment (Form 204).....	55		00		
	56 Increased Excise Tax Credit (from the worksheet - see instructions)	56		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	7,740	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		
Tax Due or Overpayment	61 OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount of overpayment.....	61	1,519	00		
	62 Amount of line 61 to be applied to 2024 estimated tax.....	62	0	00		
	63 Balance of overpayment: Subtract line 62 from line 61. Enter the difference	63	1,519	00		
Voluntary Gifts	64 - 74 Voluntary Gifts to:					
	Solutions Teams Assigned to Schools.....	64	00	Arizona Wildlife.....	65	00
	Child Abuse Prevention.....	66	00	Domestic Violence Services.....	67	00
	Neighbors Helping Neighbors.....	69	00	Special Olympics.....	70	00
	I Didn't Pay Enough Fund.....	72	00	Sustainable State Parks and Road Fund.....	73	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
Penalty	77 771 <input type="checkbox"/> Annualized/Other 772 <input type="checkbox"/> Farmer or Fisherman 773 <input type="checkbox"/> Form 221 included	77				
	78 Add lines 64 through 74 and 76; enter the total.....	78				00
Refund or Amount Owed	79 REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80	79	1,519			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"/>					
	<input checked="" type="checkbox"/> C <input type="checkbox"/> Checking or <input type="checkbox"/> S <input type="checkbox"/> Savings ROUTING NUMBER <input type="text" value="322271627"/> ACCOUNT NUMBER <input type="text" value="627039725"/>					
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 _____ OCCUPATION IT MANAGER

SPOUSE'S SIGNATURE _____ DATE _____ SPOUSE'S OCCUPATION IT CONSULTANT

SYAM PRIYA RAM SAGAR GUPTA 04162024 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

If you are sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016. Include the payment with Form 140. If you are expecting a refund or owe no tax, or owe tax but are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138.