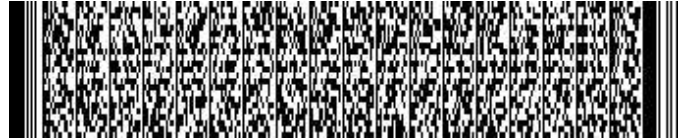


FORM 40NR Alabama 2023 Individual Income Tax Return NONRESIDENTS ONLY



Your social security number 676-60-7544

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

Initial

Last name

SHIVANI

DASARAJU

Spouse's first name

Initial

Last name

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

RESERVE CIRCLE 3506 D

City, town, or post office

State ZIP code

MONTGOMERY

AL 36116

Check if address is outside U.S.

CHECK BOX IF AMENDED RETURN

Filing Status/ 1 [X] \$1,500 Single 3 [] \$1,500 Married filing separate. Complete Spouse SSN [] NRA

Exemptions 2 [] \$3,000 Married filing joint 4 [] \$3,000 Head of Family (with qualifying person). Complete Schedule HOF.

Table with columns for Income and Adjustments, Deductions, Tax, Payments, AMOUNT YOU OWE, OVERPAID, and REFUND. Rows include wages, other income, total income, adjustments, deductions (itemized/standard), tax due, and payments.

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.

Signatures and dates for taxpayer and spouse, along with daytime telephone numbers and occupations.

Paid Preparer's Use Only

Preparer's signature, firm name (GLOBAL TAXES LLC), address (245 ROONEY CT), SSN/PTIN (P02470833), E.I. Number (88-2145487), and phone number ((678) 965-9522).

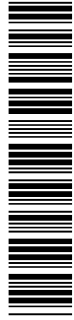
MAIL FORM 40NR TO: SEE INSTRUCTIONS



		B – All Sources	C – Alabama Income	
PART I Other Income <i>(See instructions)</i>	1 Interest and dividend income (attach Schedule B if over \$1500.00)	1 ●	1 ●	
	2 Alimony received	2 ●		
	3 Taxable portion of pensions and annuities (attach Schedule RS)	3 ●		
	4 Business income or (loss) (attach Federal Schedule C) (see instructions)	4 ●	4 ●	
	5 Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)	5 ●	5 ●	
	6 Rents, Royalties, Partnerships, Estates, Trusts, etc. (attach Schedule E)	6 ●	6 ●	
	7 Farm income or (loss) (attach Federal Schedule F) (see instructions)	7 ●	7 ●	
	8 Other income (state nature and source) _____	8 ●	8 ●	
	9 Total other income. Add lines 1 through 8, column B, and lines 1, 4 through 8, column C. Enter here and also on page 1, line 6	9 ●	9 ●	
PART II Adjustments to Income <i>(See instructions)</i>	1 IRA deduction, Keogh retirement plan, and self-employed SEP deduction	1 ●	1 ●	
	2 Penalty on early withdrawal of savings	2 ●		
	3 Moving Expenses (Attach Federal Form 3903) Place of new employment: _____	3 ●	3 ●	
	4 Self-employed health insurance deduction	4 ●	4 ●	
	5 Payments to Alabama College Counts 529 Fund or Alabama PACT program	5 ●	5 ●	
	6 Firefighter's Insurance Premiums	6 ●	6 ●	
	7 Contributions to an Achieving a Better Life Experience (ABLE) savings account	7 ●	7 ●	
	8 Adjustments to income. Add lines 1 through 7, Column B, and lines 1, 3 through 7, Column C. Enter here and also on page 1, line 8, columns B and C	8 ●	8 ●	
PART III Other Adjustments <i>(See instructions)</i>	1 Alimony Paid	1 ●		
	2 Adoption Expenses	2 ●		
	3 Health insurance deduction for small employer employee	3 ●		
	4 Add lines 1 through 3, enter here and on page 1, line 11, column B	4 ●		
	5 Enter the percentage from page 1, line 10	5 ●	100.00%	
	6 Multiply line 4 by line 5. Enter here and also page 1, line 11, column C	6 ●		
PART IV Federal Income Tax Deduction <i>(See instructions)</i>	If you are filing separately on your Alabama return and jointly on your Federal return, complete all lines below. Otherwise, omit lines 1 through 3.	B – Federal Adjusted Gross Income		
	1 Your joint federal adjusted gross income	1 ●		
	2 Your federal adjusted gross income	2 ●		
	3 Divide line 2 by line 1. Enter percentage here		3 ●	%
	4 Enter the Federal Income Tax Liability from worksheet (see instructions)		4 ●	658
	5 If you completed lines 1 through 3 above, multiply line 4 by the percentage from line 3		5 ●	
	6 Enter the percentage from page 1, line 10		6 ●	100.00%
7 If you completed lines 1-3 above, multiply line 5 by percentage on line 6. Otherwise, multiply line 4 by percentage on line 6		7 ●	658	
PART V Dependents	1 Total number of dependents from Schedule DS, line 1b	1 ●		
	2 Multiply total number of dependents claimed on line 1 by the amount on the dependent chart in the instructions	2 ●		
	3 Enter the percentage from page 1, line 10 of your return	3 ●	100.00%	
	4 Dependent exemption allowable. Multiply the amount on line 2 by the percentage on line 3. Enter here and on page 1, line 16	4 ●		
PART VI General Information	1 Name of state of which you were a legal resident in 2023 <u>TX</u>			
	2 Did you file a return with that state for 2023? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state reason why: _____			
	3 If married, did your spouse receive a separate income for 2023? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is your spouse filing a separate Alabama return? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter name here. _____			
	4 Did you file an Alabama return for 2022? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state reason why: _____			
	5 Give name and address of your present employer(s). Yours: <u>CIS TECHNOLOGIES INC 7200 W UNIVERSITY SUITE 150 MCKINNEY TX 75071</u> Your Spouse's: _____			
	6 Enter the Adjusted Gross Income reported on your 2023 Federal Individual Income Tax Return.	6 ●	20,400	
Drivers License Info	DOB (mm/dd/yyyy) ● _____ DOB (mm/dd/yyyy) ● _____	Your state ● _____ Spouse state ● _____	DL# ● _____ DL# ● _____	
	Iss date (mm/dd/yyyy) ● _____ Iss date (mm/dd/yyyy) ● _____		Exp date (mm/dd/yyyy) ● _____ Exp date (mm/dd/yyyy) ● _____	

**SCHEDULE
W-2**

(FORM 40, 40A, or 40NR)



2023



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: SHIVANI DASARAJU
PRIMARY'S SOCIAL SECURITY NO.: 676-60-7544
SPOUSE'S SOCIAL SECURITY NO.: 676-60-7544

	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	676-60-7544	842891401	<input type="checkbox"/>	<input type="checkbox"/>	AL	011783621	792	20,400	20,400		
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 ...										
							792				
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.										
							792	20,400	20,400		

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

Your first name and initial SHIVANI Last name DASARAJU

If a joint return, spouse's first name and initial Last name

Your social security number 67607544 Spouse's soc. sec. no. if joint return Telephone number (optional) (334) 781-3305

Home address (number and street). If a P.O. Box, see instructions. RESERVE CIRCLE 3506 Apt. no. D

City, town or post office, state, and ZIP code MONTGOMERY AL 36116

Table with 5 rows: 1 Alabama taxable income (15,242), 2 Total tax liability (723), 3 Total payments (792), 4 Refund (69), 5 Amount you owe

Part II Refund and Payment Information: 1 Routing number (06200080), 2 Account number (1965069337), 3 Type of account (Checking), 4 Type of transaction (Direct Deposit), 5 Paper Check

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: ERO's signature, Date, Check if also paid preparer, Preparer's PTIN, Firm's name (GLOBAL TAXES LLC), E.I. No. (88-2145487), and address (245 ROONEY CT E BRUNSWICK NJ), ZIP Code (08816)

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. Preparer's signature, Date, Check if self-employed, Preparer's PTIN (P02470833), Firm's name (VENKATA SAI PAVAN KUMAR DUDIPALLI), E.I. No. (88-2145487), and address (245 ROONEY CT E BRUNSWICK NJ), ZIP Code (08816)

DO NOT MAIL TO ALABAMA DEPT. OF REVENUE

Income Worksheet

2023

Name as Shown on Return
SHIVANI DASARAJU

Social Security Number
676-60-7544

Wages, Salaries, Tips, Etc for Line 5 of Form 40/40NR

Special Type Indicator (X = Income will not be included in your return)
Check this box to exclude income from your Alabama return.

Check this box if you are excluding income and plan to attempt to electronically file your return.

NOTE: Part-year residents may use this worksheet to remove non Alabama source income. Resident and Non-Resident returns may be rejected during electronic filing if you exclude income by marking boxes in the # column.

Payer's name	#	State name	Gross earnings	Alabama wages	Alabama tax withheld
CIS TECHNOLOGIES INC	<input type="checkbox"/>	AL	20,400.	20,400.	792.
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
Total			20,400.	20,400.	792.

Other Income for Form 40/40NR

Special Type Indicator (X = Income will not be included in your return)
Check this box to exclude income from your Alabama return.

Description	#	Total amount	Alabama amount
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
Total			

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 2020 See separate instructions.

Your first name and middle initial SHIVANI Last name DASARAJU Your social security number 676 60 7544

If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. RESERVE CIRCLE 3506 Apt. no. D
City, town, or post office. If you have a foreign address, also complete spaces below. MONTGOMERY State AL ZIP code 36116
Foreign country name Foreign province/state/country Foreign postal code Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
You Spouse

Filing Status [X] Single [] Head of household (HOH)
[] Married filing jointly (even if only one had income)
[] Married filing separately (MFS) [] Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction Someone can claim: [] You as a dependent [] Your spouse as a dependent
[] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1959 [] Are blind Spouse: [] Was born before January 2, 1959 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents. Includes a checkbox for 'If more than four dependents, see instructions and check here'.

Income table with columns 1a-1z and 1b-1i. Rows include: 1a Total amount from Form(s) W-2, box 1 (20,400); 1b Household employee wages; 1c Tip income; 1d Medicaid waiver payments; 1e Taxable dependent care benefits; 1f Employer-provided adoption benefits; 1g Wages from Form 8919; 1h Other earned income (0); 1i Nontaxable combat pay election; 1z Add lines 1a through 1h (20,400).

Table with columns 2a-2b, 3a-3b, 4a-4b, 5a-5b, 6a-6b, 7, 8, 9, 10, 11, 12, 13, 14, 15. Rows include: 2a Tax-exempt interest; 2b Taxable interest; 3a Qualified dividends; 3b Ordinary dividends; 4a IRA distributions; 4b Taxable amount; 5a Pensions and annuities; 5b Taxable amount; 6a Social security benefits; 6b Taxable amount; 7 Capital gain or (loss); 8 Additional income from Schedule 1, line 10; 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income (20,400); 10 Adjustments to income from Schedule 1, line 26; 11 Subtract line 10 from line 9. This is your adjusted gross income (20,400); 12 Standard deduction or itemized deductions (from Schedule A) (13,850); 13 Qualified business income deduction; 14 Add lines 12 and 13 (13,850); 15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income (6,550).

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Attach Sch. B if required.

Standard Deduction for—
• Single or Married filing separately, \$13,850
• Married filing jointly or Qualifying surviving spouse, \$27,700
• Head of household, \$20,800
• If you checked any box under Standard Deduction, see instructions.

Table with 2 columns: Line number and Amount. Rows 16-24 under 'Tax and Credits' section. Total tax amount is 658.

Table with 2 columns: Line number and Amount. Rows 25-33 under 'Payments' section. Total payments amount is 1,193.

Table with 2 columns: Line number and Amount. Rows 34-36 under 'Refund' section. Amount of refund is 535.

Table with 2 columns: Line number and Amount. Rows 37-38 under 'Amount You Owe' section. Total amount owed is 623.

Third Party Designee section. Includes checkboxes for 'Yes' and 'No' to allow another person to discuss the return with the IRS.

Sign Here section. Includes signature lines for taxpayer and spouse, occupation, date, and phone number.

Paid Preparer Use Only section. Includes fields for preparer's name, signature, date, PTIN, firm's name, address, and EIN.