E-file Signature Authorization (Arizona Forms 140, 140A, 140EZ, 140NR and 140PY)

2023

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		Your Social Security Number*
BHAVANI	LENKALA	Enter	797 07 7201
Your Spouse's First Name and Initial (if filed joint)	Last Name	your SSN(s).	Spouse's Social Security No.*

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				
		Must be present when reques	sting direct debit or deposit.			
1 Arizona Adjusted Gross Income 9,999 00		Foreign Account Deposit/	Debit: See instructions below.			
2 Balance Of Tax 0 00		TYPE OF ACCOUNT				
3 Arizona Income Tax Withheld 55 00		🛛 Checking 🔲 Savings	1 2 2 1 0 0 0 2 4			
Check box 4 <u>or</u> box 5:		ACCOUNT NUMBER				
4 REFUND: Enter the amount of refund	80 00	8 8 7 6 0 9 0 1 1				
5 AMOUNT YOU OWE: Enter the amount owed	00	DIRECT DEBIT REQUEST DATE	\$			

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 The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).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.

- **6a** X 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.

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.

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.

I authorize GLOBAL TAXES LLC

(ELECTRONIC RETURN ORIGINATOR)

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.

ERE	→			
SE SIGN HERE	→	YOUR PEN AND INK SIGNATURE	DATE	
PLEASE		SPOUSE'S PEN AND INK SIGNATURE	DATE	

Preck box 827 Tor Trans Name and Middle Initial Det Name Tor Trans Name and Middle Initial Det Name Det Name and Middle Initial Det Name Det Name and Middle Initial Det Name Det Det Name Det Name Det Name Det	RETURN.		Arizona Form 140 Resident Personal Income Tax Return					F	FOR CALENDAR YEAR		
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	Your	Name (as shown on page 1)	Y	our Social Securit	ty Number		
	BHA	HAVANI LENKALA 797-07-72					
	26	Other Subtractions from Income Complete Other Subtraction from Avience Orac	26		00		
	36	Other Subtractions from Income. Complete Other Subtraction from Arizona Gross		1 0		9,999	00
	37	Subtract line 36 from line 35. Enter the difference					00
ons	38	Age 65 or over: Multiply the number in box 8 by \$2,100					
pti	39	Blind: Multiply the number in box 9 by \$1,500			00		
Exemptions	40	Other Exemptions. See instructions40E Multiply the number in box 40E by S			00		
ш	41	Qualifying parents and grandparents: Multiply the number in box 11a by \$10,000		9,999	00		
	42	Arizona adjusted gross income: Subtract lines 38 through 41 from line 37. If less tha				12 950	00
	43	Deductions: Check box and enter amount. See instructions				13,850	
	44	If you checked box 43 S and claim charitable contributions, check 44 C Complete				0	00
	45	Arizona taxable income: Subtract lines 43 and 44 from line 42. If less than zero, enter "0					00
Тах	46	Tax: Multiply line 45 by 2.5% (.025). Enter the result				0	00
of Tax	47	Tax from recapture of credits from Arizona Form 301, Part 2, line 31			47		00
Balance	48	Subtotal of tax: Add lines 46 and 47. Enter the total				0	00
alaı	49	Dependent Tax Credit. See instructions					00
8	50	Family income tax credit (from the worksheet - see instructions)			50	40	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 5	51 is greater than li	<u>ne 48, enter "0" .</u>	52	0	00
	53	2023 AZ income tax withheld			53	55	00
	54	2023 AZ estimated tax payments54a 00 Claim of Right 54b		00 Add 54a and			00
lits	55	2023 AZ extension payment (Form 204)					00
Refundable Credits	56	Increased Excise Tax Credit (from the worksheet - see instructions)				25	00
able	57	Property Tax Credit from Arizona Form 140PTC					00
unda	58	Other refundable credits: Check the box(es) and enter the total amount58	8 1]308-1 58 2]	_334 ₅83 _3	349 58		00
Refi	59	Total payments and refundable credits: Add lines 53 through 58. Enter the total			59	80	00
	60	TAX DUE: If line 52 is larger than line 59, subtract line 59 from line 52. Enter amount of tax	ix due. Skip lines 6	1, 62 and 63	60 📃		00
t	61	OVERPAYMENT: If line 59 is larger than line 52, subtract line 52 from line 59. Enter amount	unt of overpaymen	t	61 📃	80	00
Overpayment	62	Amount of line 61 to be applied to 2024 estimated tax			62		00
erpay	63	Balance of overpayment: Subtract line 62 from line 61. Enter the difference		<u></u>	63	80	00
ð	64	- 74 Voluntary Gifts to: Solutions Teams Assigned to Schools	rizona Wildlife	65	00		
			olitical Gift		00		
Gifts		Neighbors Helping Neighbors 69 00 Special Olympics	eterans' Donations Fu	nd 71	00		
ary		Neighbors Helping Neighbors 69 00 Special Olympics	pay/Neuter of Animals		00		
Voluntary Gifts	75	Political Party (if amount is entered on line 68 - check only one): 751 Democratic 752	an				
×		Estimated payment penalty			76		00
~	77	771 Annualized/Other 772 Farmer or Fisherman 773 Form 221 included					
Penalty	78	Add lines 64 through 74 and 76; enter the total			78		00
Ре	79	REFUND: Subtract line 78 from line 63. If less than zero, enter amount owed on line 80			79	80	00
σ		Direct Deposit of Refund: Check box 79A if your deposit will be ultimately placed in a fore					
Amount Owed		C C Checking or ROUTING NUMBER ACCOUNT NUMBER 1 2 2 1 0 0 0 2 4 8 8 7 6 0 9 0	1 1		л II		
Ţ							
n de	80	AMOUNT OWED: Add lines 60 and 78. Make check payable to Arizona Department of					00
۲		and include with your return			80		100
		Inder penalties of perjury, I declare that I have read this return and any document	to with it and to	the heat of m	v knowlodgo	and haliaf that	
		rue, correct and complete. Declaration of preparer (other than taxpayer) is based o					y are
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뽀	Y	YOUR SIGNATURE DATE OCCUPATION					
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SIGN HERE	→_						
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PLEASE		245 ROONEY CT			171965		
Δ.		AID PREPARER'S STREET ADDRESS			PARER'S TIN	.	
		E BRUNSWICK NJ 08816 AID PREPARER'S CITY STATE ZIP COE)965-952		
		AID PREPARER'S CITY STATE ZIP COE re sending a payment with this return, mail to Arizona Department of Revenue, PO Box 52016			PARER'S PHONE		