U.S. INDIVIDUAL INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2019

Prepared For:

Anusha Konchada 9272 Deercross Parkway Apt. No. 2D BlueAsh, OH 45236

Prepared By:

Deloitte Tax Services India Pvt. Ltd. BPTP Crest, Plot 15, Udyog Vihar Gurgaon, Haryana 122015

Amount of Tax:

Total tax	\$ 15,350
Less: payments and credits	\$ 17,098
Plus: interest and penalties	\$ 0
Overpayment	\$ 1,748

Overpayment:

Credited to your estimated tax	\$ 0
Refunded to you	\$ 1,748

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing and the practitioner PIN program has been elected. Please sign and return Form 8879 to our office. We will then transmit your return electronically to the IRS.

Return Must Be Mailed On Or Before:

Return federal Form 8879 to us by October 09, 2020.

Special Instructions:

Your refund will be deposited directly into your account ending in 5218.

Department of the Treasury Internal Revenue Service

Submission Identification Number (SID)

IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

2019

OMB No. 1545-0074

$m{r}$		
Taxpayer's name ANUSHA KONCHADA		l security number
Spouse's name	Spous	se's social security number
Part I Tax Return Information - Tax Year Ending December 31, 2019 (Whole dollars on	y)	
1 Adjusted gross income (Form 1040 or 1040-SR, line 8b; Form 1040-NR, line 35)	1	
2 Total tax (Form 1040 or 1040-SR, line 16; Form 1040-NR, line 61)	2	
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040 or 1040-SR, line 17; Form 1040-NR, line 6		
4 Refund (Form 1040 or 1040-SR, line 21a; Form 1040-NR, line 73a; Form 1040-SS, Part I, line 13a)	4	1,748.
5 Amount you owe (Form 1040 or 1040-SR, line 23; Form 1040-NR, line 75)	5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep	a copy	of your return)
periginator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejective ason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preporting for processing the return and/or a payment of estimated tax, and the financial institution to debit the entry to this account in full force and effect until notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a partenancial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) be electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize DELOITTE TAX SERVICES INDIA PVT • LT to enter or generate my ERO firm name as my signature on my tax year 2019 electronically filed income tax return. Check this box PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	and its desi aration soft count. This count, I m to the paym nformation low is my s PIN 6 Enter don't	ignated Financial tware for payment authorization is to ust contact the U.S. nent (settlement) necessary to signature for my
Your signature ▶ Dat	e ▶	
Spouse's PIN: check one box only		
I authorize to enter or generate my	NIN [
ERO firm name		r five digits, but
as my signature on my tax year 2019 electronically filed income tax return.	don'i	t enter all zeros
I will enter my PIN as my signature on my tax year 2019 electronically filed income tax return. Check this box PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if yo	ou are entering your own
Spouse's signature ▶ Dat	e >	
Practitioner PIN Method Returns Only - continue below		
Part III Certification and Authentication - Practitioner PIN Method Only		
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 9 8 1 1 0 7 Don't enter a	1 0 0	0 7 3
certify that the above numeric entry is my PIN, which is my signature for the tax year 2019 electronically filed inco ndicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner F-Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.	ne tax ret	urn for the taxpayer(s) d and Pub. 1345 ,
ERO's signature ► NIMA DAS Dat	• – <u>10</u>	0/02/2020
ERO Must Retain This Form - See Instructions Don't Submit This Form to the IRS Unless Requested To Do	 So	

REPORT OF FOREIGN BANK AND FINANCIAL ACCOUNTS

Prepared For:

Anusha Konchada 9272 Deercross Parkway Apt. No. 2D BlueAsh, OH 45236

Prepared By:

Deloitte Tax Services India Pvt. Ltd. BPTP Crest, Plot 15, Udyog Vihar Gurgaon, Haryana 122015 India

Form Must be Filed On or Before:

Return Form(s) 114A to us on or before October 9, 2020.

Special Instructions:

Your Form 114 has been prepared for electronic filing. Please sign, date, and return Form 114A to our office. We will then transmit your form to the FinCEN.

Form 114a Department of the Treasury Financial Crimes Enforcement Network (FinCEN)

May 2015

Electronically File FBARs

Record of Authorization to

(See instructions below for completion)

Do not send to FinCEN. Retain this form for your records.

The form 114a may be digitally signed

ANUSHAK20190001

Part I Persons who have an obligation to file a Report of Foreign Bank and Financial Account(s)					
1. Owner last name or entity's legal name	2	. Owner first name			3. Owner M.I.
KONCHADA	A	NUSHA			
4. Spouse last name (if jointly filing FBAR - see instructions be	elow) 5	. Spouse first name			6. Spouse M.I.
I/we declare that I/we have provided information concerning	2 (enter	r number of accounts) foreig	n bank a	nd financ	cial account(s) for the
filing year ending December 31, 2019 to the preparer list					
and complete; that I/we authorize the preparer listed in Part II					,
Report of Foreign Bank and Financial Accounts (FBAR) based					• •
listed in Part II to receive information from FinCEN, answer inc notwithstanding this declaration, it is my/our legal responsibili					
to do so.	ty, not that of the p	oreparer listed in Fart II, to til	nely lile a	ali FDAN	i ii required by law
to do 50.					
7. Owner signature (Authorized representative if entity)	8. Date	9. Owner or entity TII	N	10. TIN	a EIN
				type	e b X SSN/ITIN
	MM DD YYY	Y 181-31-8586			c Foreign
11. Spouse signature	12. Date	13. Spouse TIN		14. TIN	a 🔲 EIN
				type	e b SSN/ITIN
Doub II	MM DD YYY				c Foreign
Part II Individual or Entity Authorized to File FBAR on b					
15. Preparer last name	16. Preparer first	name	17. Pre	parer M.	I. 18. Preparer PTIN
DAS NIMA P014700					P01470073
19. Address	20. City		21. Sta	.te	22. ZIP/postal code
BPTP CREST, PLOT 15, UDYOG VIHA GURGAON 1			122015		
23. Country 24. Preparer's (item 15) employer's (Entity) name		25. Employer EIN	26. Pre	parer's s	signature
code					
IN DELOITTE TAX SERVICE	S INDIA	98-0432569	NIMA	<u>DAS</u>	
Instructions for comple	ating the ERAR Sig	anatura Authorization Reco	ord		

This record may be completed by the individual or entity granting such authorization (Part I) OR the individual/entity authorized to perform such services. The completed record must be signed by the individual(s)/entity granting the authorization (Part I) and the individual/entity that will file the FBAR. The Preparer/filing entity must be registered with FinCEN BSA E-File system. (See http://bsaefiling.fincen.treas.gov/main.html for registration).

Read and complete the account owner statement in Part I.

To authorize a third party to file the Foreign Bank and Financial Accounts Report (FBAR), the account owner should complete Part I, items 1 through 3 (as required), sign and date the document in Part I, items 7/8 and complete items 9 and 10. Item 7 may be digitally signed.

Accounts Jointly Owned by Spouses (see exceptions in the FBAR instructions)

If the account owner is filing an FBAR jointly with his/her spouse, the spouse must also complete Part I, items 4 through 6. The spouse must also sign and date the report in items 11/12, (item 11 may be digitally signed) and complete items 13 and 14. A third party preparer may be one of the spouses of the jointly owned foreign account. In this case, both spouses must complete Part I of form 114a in its entirety. The third party preparer (spouse) that will file the FBAR on behalf of both spouses will complete Part II in its entirety (do not use such terms as see above, or same as item number x).

Complete Part II, items 15 through 18 with the preparer's information. The address, items 19 through 23, is that of the preparer or the preparer's employer if the preparer is an employee. Record the employer's information (if any) in items 24 and 25. If the preparer does not have a PTIN, leave item 18 blank. The third party preparer must sign in item 26 (digital signature acceptable) of Part II indicating that the FBAR will be filed as directed

The person(s) listed in Part I, and the person listed in Part II as authorized to file on behalf of the person(s) listed in Part I, should retain copies of this record of authorization and the filing itself, both for a period of 5 years. See 31 CFR 1010. 430(d).

DO NOT SEND THIS RECORD TO FINCEN UNLESS REQUESTED TO DO SO.

Rev. 10.7 May 21, 2015 920011 04-01-19

GEORGIA INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2019

Pre	nar	ed	Fo	r:
	vai	-u		

Anusha Konchada 9272 Deercross Parkway Apt. No. 2D BlueAsh, OH 45236

Prepared By:

Deloitte Tax Services India Pvt. Ltd. BPTP Crest, Plot 15, Udyog Vihar Gurgaon, Haryana 122015 India

Amount of Tax:

Total tax	\$ 4,942
Less: payments and credits	\$ 5,193
Plus: interest and penalties	\$ 0
Overpayment	\$ 251

Overpayment:

Miscellaneous donations	\$ 0
Credited to your estimated tax	\$ 0
Refunded to you	\$ 251

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the GA DOR, please sign, date, and return Form GA 8453 to our office. We will then submit your electronic return to the GA DOR.

Return Must Be Mailed On Or Before:

Return Form GA 8453 to us by October 09, 2020.

Special Instructions:

Your refund will be deposited directly into your account ending in 5218.

PLEASE DO NOT MAIL!

ERO MUST RETAIN THIS FORM. **DO NOT SUBMIT THIS FORM** TO GEORGIA DEPARTMENT OF REVENUE

UNLESS REQUESTED TO DO SO.

IRS DCN	I OR SUBMISSION ID				GA-0433
					2019
	IIA INDIVIDUAL INCOME TAX DECLA ARY OF AGREEMENT BETWEEN TAX				
	ne and Initial	Last Name	D PREPAREN	Social Security	Number
ANUS		KONCHADA		181-31	
	eturn, Spouse's First Name and Initial	Spouse's Last Name			al Security Number
					,
Home Ad	ddress (number and street)		Apt Number	Daytime Teleph	none Number
9272	DEERCROSS PARKWAY		2D		
City, Tow	n or Post Office		State	ZIP Code	
BLUE	ASH		ОН	45236	
P _{ART} I			TAX RE	TURN INFOR	MATION
1. Federal	I Adjusted Gross Income (Form 500 or Form 500)	K, Line 8; Form 500EZ, Line 1)		1.	100,528
2. Georgia	a Taxable Income (Form 500 or Form 500X, Line	15c; Form 500EZ, Line 3)		2.	88,966
	orgia Tax (Form 500 or Form 500X, Line 22; Form				4,516
4. Balance	e Due (Form 500, Line 41; Form 500X, Line 37; Fo				
5. Refund	I (Form 500, Line 42; Form 500X, Line 38; Form 5	00EZ, Line 21)		5.	251
Part I	<u> </u>		DECLARAT	ION OF TAXP	'AYER(S)
	nalties of perjury, I declare that the information I h		• ,		
	ansmitter and the amounts shown in Part I agree				
	ncome Tax Return. I declare that I have examined				
-	e and belief, my return is true, correct and complerovider/Transmitter.	ete. I consent that the electronic	portion of my return may	be sent by my E	RO/Online
	ovidon manorimetor.				
SIGN	TAYBAYEDIO OLOMATURE	000110	EIO OIONATURE		
HERE		Date SPOUS	E'S SIGNATURE (if joint i	return, both must sign) L	Date
	ANUSHA KONCHADA PRINT NAME	EMAIL	ADDRESS		
D II				ND DAID DDE	DADED
P _{ART} I		F ELECTRONIC RETURN			
	RE THAT I HAVE REVIEWED THE ABOVE TAXP RRECT TO THE BEST OF MY KNOWLEDGE.	AYER'S RETURN AND THAT TI	HE ENTRIES ON THE C	6A-8453 ARE CO	MPLETE
AND CON				Date 10/02	2/20
ERO's	ERO's Signature NIMA DAS Firm's Name DELOITTE TAX SEI	DITCES TNDTA DIT	נייי ז		
Use		r 15, UDYOG VIHAR		Check also if pa	ald preparer [五] 8-0432569
Only	Address BPTP CREST, PLOS City, State, & ZIP Code GURGAON 123		<u>.</u>	SSN/TIN P01	
IE DDEDA			C DACED ON ALL INC		
	.RED BY ANY PERSON OTHER THAN THE TAX ER HAS ANY KNOWLEDGE.	PATEN, IMIS DEGLAKATION I	S DASED ON ALL INFO	JRIVIATION OF W	HICH THE
	Paid Preparer's Signature			Date	
Paid	Eirm's Nama			-	
Preparer	· · ·				
Use Onl	City, State, & ZIP Code				
<u> </u>	Oity, State, & Zii Oode			-	

GA-8453

GA-8453 (REV 09/23/19)

KEEP A COPY WITH YOUR RECORDS

OHIO INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2019

Pre	nar	ed	F٥	r.
110	vai '	- u	··	

Anusha Konchada 9272 Deercross Parkway Apt. No. 2D BlueAsh, OH 45236

Prepared By:

Deloitte Tax Services India Pvt. Ltd. BPTP Crest, Plot 15, Udyog Vihar Gurgaon, Haryana 122015

Amount of Tax:

Total tax	\$ 535
Less: payments and credits	\$ 535
Plus: interest and penalties	\$ 0
No payment required	\$

Overpayment:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing. Please sign, date, and return federal Form 8879 to our office. We will submit your electronic return to the ODT.

Return Must Be Mailed On Or Before:

Return federal Form 8879 to us by October 09, 2020.

Special Instructions:

Please review the Disclosure Information for Ohio.