U.S. INDIVIDUAL INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2017

Pre	pare	d F	or:
-----	------	-----	-----

Anusha Konchada Peachtree St NE Ste 1500 Apt. No. 191 Atlanta, GA 30303

Prepared By:

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

Amount of Tax:

Total tax	\$ 19,701
Less: payments and credits	\$ 21,472
Plus: interest and penalties	\$ 0
Overpayment	\$ 1,771

Overpayment:

Credited to your estimated tax	\$ 0
Refunded to you	\$ 1,771

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 April 17, 2018.

Special Instructions:

IRS e-file Signature Authorization

Return completed Form 8879 to your ERO. (Do not send to IRS.)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form8879 for the latest information. Submission Identification Number (SID) Taxpayer's name Social security number ANUSHA KONCHADA 181 | 31 | 8586 Spouse's name Spouse's social security number Tax Return Information - Tax Year Ending December 31, 2017 (Whole dollars only) Part I 105,823. Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Form 1040NR, line 37) Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR, line 61) 2 19,701. Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7; Form 1040NR, line 62a) 21,472. Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a; 1,771. Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1040NR, line 75) Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2017, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury 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 federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. 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 further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only X | authorize DELOITTE TAX SERVICES INDIA PVT. LT to enter or generate my PIN |6|8|5|8| Enter five digits, but **ERO firm name** as my signature on my tax year 2017 electronically filed income tax return. don't enter all zeros I will enter my PIN as my signature on my tax year 2017 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Your signature Spouse's PIN: check one box only __ I authorize to enter or generate my PIN **ERO firm name** Enter five digits, but as my signature on my tax year 2017 electronically filed income tax return. don't enter all zeros I will enter my PIN as my signature on my tax year 2017 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Spouse's signature

Practitioner PIN Method Returns Only - continue below

Certification and Authentication - Practitioner PIN Method Only Part III

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

9 8 1 1 0 7 1 7

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2017 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► RAHUL KUMAR BAJORIA

Date > 03/08/2018

719995 11-10-17

ERO Must Retain This Form - See Instructions Don't Submit This Form to the IRS Unless Requested To Do So

Tax Year 2017 e-file Jurat/Disclosure for Form 1040, 1040A, 1040EZ, or 1040NR using Practitioner PIN method (with or without Electronic Funds Withdrawal)

ERO Declaration

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

ERO Signature

I am signing this Tax Return by entering my PIN below.

ERO's PIN <u>98110717751</u>

(enter EFIN plus 5 self-selected numerics)

Taxpayer Declarations Perjury Statement

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 accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Consent to Disclosure

I consent to allow my Intermediate Service Provider, transmitter, or Electronic Return Originator (ERO) to send my return/form to IRS and to receive the following information from IRS: a) an acknowledgment of receipt or reason for rejection of transmission; b) the reason for any delay in processing or refund; and, c) the date of any refund.

I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.

Taxpayer's PIN: 68586 Date 03082018

Spouse's PIN: _____

CALIFORNIA INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2017

Pre	pare	d F	or:
-----	------	-----	-----

Anusha Konchada Peachtree St NE Ste 1500 Apt. No. 191 Atlanta, GA 30303

Prepared By:

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

Amount of Tax:

Total tax	\$ 547
Less: payments and credits	\$ 640
Plus: interest and penalties	\$ 0
Overpayment	\$ 93

Overpayment:

Miscellaneous donations	\$ 0
Credited to your estimated tax	\$ 0
Refunded to you	\$ 93

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 California Form 8879 to our office. We will submit your electronic return to the FTB.

Return Must Be Mailed On Or Before:

Return California Form 8879 to us by April 17, 2018.

Special Instructions:

022	DO NOT N	MAIL THIS FORM TO THE FTB
2017 California e-file Signature Authorization	for Individuals	8879
Your name	Your SS	SN or ITIN
ANUSHA KONCHADA	181	-31-8586
Spouse's/RDP's name		s's/RDP's SSN or ITIN
Double To Date of Life works		
Part I Tax Return Information (whole dollars only)		1 8.652.
 California Adjusted Gross Income. See instructions Amount You Owe. See instructions 		$\frac{1}{2}$ $\frac{8,652}{0}$.
2 Amount You Owe. See instructions3 Refund or No Amount Due. See instructions		3 93.
Part II Taxpayer Declaration and Signature Authorization (Be sure you o	btain and keep a copy of	your return.)
estimated tax payments as shown on my return and on form FTB 8455, California e-file Payme applicable, I declare that direct deposit refund amount on line 3 agrees with the direct deposit return, this is an irrevocable appointment of the other spouse/RDP as an agent to authorize an authorize my ERO, transmitter, or intermediate service provider to transmit my complete return of my return or refund is delayed, I authorize the FTB to disclose to my ERO, intermediate for the delay or the date when the refund was sent. If I am filing a balance due return, I und payment of my tax liability, I remain liable for the tax liability and all applicable interest and pen Electronic Funds Withdrawal Consent included on the copy of my electronic income tax return as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Funds Withdrawal Consent included on the copy of my electronic Fund	authorization stated on many electronic funds withdrawn to the Franchise Tax Boars service provider, and/or lerstand that if the FTB does alties. I acknowledge that all have selected a personal	y return. If I have filed a joint val or direct deposit. I rd (FTB). If the processing r transmitter the reason(s) es not receive full and timely I have read and consent to the
Taxpayer's PIN: check one box only		
	to enter my PIN	68586
ERO firm name		Do not enter all zeros
as my signature on my 2017 e-filed California individual income tax return.		
I will enter my PIN as my signature on my 2017 e-filed California individual income tax res PIN and your return is filed using the Practitioner PIN method. The ERO must complete I		if you are entering your own
Your signature	Date >	
Spouse's/RDP's PIN: check one box only I authorize	to enter my PIN	
ERO firm name		Do not enter all zeros
as my signature on my 2017 e-filed California individual income tax return.		
I will enter my PIN as my signature on my 2017 e-filed California individual income tax ref PIN and your return is filed using the Practitioner PIN method. The ERO must complete I		if you are entering your own
Spouse's/RDP's signature	Date >	
Prostitioner PIN Method Petura Only, contin	wa balaw	
Practitioner PIN Method Returns Only - contin Part III Certification and Authentication - Practitioner PIN Method Onl		
	-	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 98	8110717751	
		ter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the 2017 California in above. I confirm that I am submitting this return in accordance with the requirements of the Pra Handbook for Authorized e-file Providers.		
ERO's signature ► RAHUL KUMAR BAJORIA	Date ▶	03/08/2018

GEORGIA INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2017

Prepared For:

Anusha Konchada Peachtree St NE Ste 1500 Apt. No. 191 Atlanta, GA 30303

Prepared By:

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

Amount of Tax:

Total tax	\$ 1,433
Less: payments and credits	\$ 1,645
Plus: interest and penalties	\$ 0
Overpayment	\$ 212

Overpayment:

Miscellaneous donations	\$ 0
Credited to your estimated tax	\$ 0
Refunded to you	\$ 212

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 April 17, 2018.

Special Instructions:

PLEASE DO NOT MAIL!

GA-8453 (REV 06/27/17)

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

UNLESS REQUESTED TO DO SO.

IRS DCN O	R SUBM	ISSION	IID									,							_	20	17
																				20	. ,
							<u> </u>					1									
GEORGIA																					
SUMMAR			ME	NT BI	ETWE	EN	TAXI				ERO	OI	RPAIL	D PRE	PARER	1,	2 ' - 1 (2	. NI	l	
First Name		l							ast Na		_							Security	•		
ANUSHA	_							-	ONC									31-3			
If Joint Retu	ırn, Spou	se's Firs	st Na	me and	i Initial			Sp	oouse	's Las	t Nan	ne					Spouse	e's Soci	al Sec	urity N	umber
Home Addre	ess (num	ber and	stre	et)											Apt Numbe	r [Daytim	e Telep	hone I	Numbe	r
PEACHT	CREE	ST N	ΙE	STE	150	0									191						
City, Town o	or Post C	ffice													State	- 2	ZIP Co	de			
ATLAN	ΓA														GA		303	03			
P _{ART} I															TAX F	RETU	JRN I	NFOF	₹MAT	ΓΙΟΝ	
Federal Action	djusted G	Gross In	come	e (Form	500 o	r Form	500X	(, Line	8; Fo	rm 50	OEZ,	Line	e 1)				1.		-	105,	823
2. Georgia T																				27,	056
3. Net Georg																				1,	433
4. Balance D																					
5. Refund (F	orm 500,	Line 41	1; Foi	rm 500)	K, Line	37, Fo	orm 50	00EZ,	Line 2	21)							5.				212
															DECLARA			TAV	DAVE	D/6)	
P _{ART} II																					
Under penalt and/or Trans Georgia Inco knowledge a Service Provi	mitter an me Tax F nd belief,	d the ar Return. I , my reti	mour I decl urn is	nts shov lare tha	vn in P t I have	art I a	gree v nined	vith th my ta	ne amo	ounts rn, inc	show ludin	n o g a	n the co	orrespon	ding lines of chedules and	the e	electror ements	nic port	ion of to	my 20 ⁻ est of	
S.c., A																					
S _{IGN} H _{ERE}	AXPAYE	R'S SIG	ΤΔΙΑ	URF			— i	Date			—)) <u>-</u>	POLISE	F'S SIGI	NATURE (if id	int retur	n hoth mus	et cian)	Date		
	ANUSH							Date				Ì		_ 0 0101	TATORIE (II)	iiit i Gtuii	ii, Duiii iii us	t sigii)	Date		
	RINT NA		JINC	пара	1							Ē	MAII A	ADDRES	ss						
P _{ART} III		<u>-</u>		DF	CI AR	ΔΤΙΟ	N O	FFI	FCT	BON	IIC F				GINATOR	ΔΝΙ	η ΡΔΙ	D PR	FΡΔΙ	RFR	
I DECLARE	TUATIL	IV/E DI	EV/IE																		
AND CORRE								A I L I I	JIL	I OI III	I AIIL	, ,,	171 111	IL LIVIII	IILS ON IIII	_	04007	uil oc	JIVII LI		
ERO's	ERO's															[Date C	3/0	8/1	8	
Use	Firm's N	Name <u>I</u>	DEL	OIT	re 1	'AX	SEF	RVI	CES	IN	DIA	I	VT.	LTD	•	(Check	also if p	aid pr	eparer	X
Only Address BPTP CREST, PLOT 15, UDYOG VIHAR					1	FEIN/P	tin <u>9</u>	8-0	4325	69											
City, State, & ZIP Code GURGAON 122015 INDIA						SSN/TI	N <u>P0</u>	147	7751	_											
IF PREPARE PREPARER					R THA	N THE	TAX	PAYE	R, TH	IIS DE	CLA	RA	TION IS	BASE	ON ALL IN	FORI	MATIO	N OF V	VHICH	THE	
	T															ı	Date				
Paid	Firm's N		2 01														FID/TIN				
Preparer's	Addres	_															SSN/TI				
Use Only	City. St	_	IP C	nde												— `	JU14/11				

GA-8453

KEEP A COPY WITH YOUR RECORDS

⁷⁹⁹⁰⁶¹ 08-17-17 CCH 03 050 2017

ILLINOIS INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2017

Prepared For:

Anusha Konchada Peachtree St NE Ste 1500 Apt. No. 191 Atlanta, GA 30303

Prepared By:

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

Amount of Tax:

Total tax	\$ 3,527
Less: payments and credits	\$ 3,665
Plus: interest and penalties	\$ 0
Overpayment	\$ 138

Overpayment:

Miscellaneous donations	\$ 0
Credited to your estimated tax	\$ 0
Refunded to you	\$ 138

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 Form IL-8453 to our office. We will submit your electronic return to the IDOR.

Return Must Be Mailed On Or Before:

Return Form IL-8453 to us by April 17, 2018.

Special Instructions:

Illir	nois Department of Revenue				-	
2017 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration						
	onot mail Form IL-8453 to the Illinois Department of					
Step	1: Provide taxpayer information					
	ANUSHA KONCHADA				181-31-8	3586
וט	First name and middle initial Spouse's first name (and last name if differe	•	Last name		Social Security number	per
	PEACHTREE ST NE STE 1500 APT. NO.	191			Spouse's Social Sec	ik mmala au
	Mailing address ATLANTA		GA 30303		Spouse's Social Sec	urity number
	AT LIAN LA City			ZIP	Daytime phone num	ber
Step	2: Complete information from tax return					
1 N	et income from Form IL-1040, Line 11, or Schedule NR, Step 5, Lin	ne 51			1 80	0,987 ₁ 00
	ax from Form IL-1040, Line 13	16 5 1				3,527,00
	nois Income Tax withheld from Form IL-1040, Line 26 only (enter '	" 0 " if none)				3,665,00
4 0	verpayment from Form IL-1040, Line 36				4	138 ₁ 00
5 To	otal amount due from Form IL-1040, Line 40				5	<u> 00</u>
6 Fi	ling status: X Single/head of household Married filing	jointly _	 Married filing separa 	ately W	/idowed	
8 Ai 9 Ty 10 Di 111 El 112 N Step X Under	count no. (RN): 122100024	d in Step 3 a e other spour gnated finan ne Tax return ation necess withdrawal (orm IL-1040 a true, correctorize IDOR to	nd declare the information as an agent to receiption and the information I protect debit) of my balant the information I protect, and complete. I constitution my ERO and/o	tion on Lines 7 ve the refund. ACH electronical institutions and resolve is need ue. Evided to my event that my refer the transmitters	through 9 is corn c funds withdraw involved in the pr sues related to th lectronic return rurn, this declaration when my return	al as desig- ocessing of e payment. ion,
Sign here	Your signature Date	<u></u>	pouse's signature (if joint retur	n hoth must sian)		Date
	5: Electronic return originator (ERO) and paid prep					
decla follow	are that I have examined this taxpayer's electronic Form IL-1040, the ed all requirements of this program and declare, under penalties of appanying information are true, correct, and complete.	- ne informatio	n on this Form IL-8453	, and accompa		
	RAHUL KUMAR BAJORIA	(3/08/18	Check if paid (oreparer: X (Se	e instructions.)
	ERO's signature		Date			
ERO	DELOITTE TAX SERVICES INDIA PVT.	LTD.			1477751	
use	Firm's name or your name if self-employed			Your		
only	BPTP CREST PLOT 15 UDYOG VIHAR Mailing address				0432569 ral employer identificati	on number (FFIA)
	GURGAON 122015 INDIA				78) 299-3	
	City	State	ZIP		me phone number	, , , , ,

Step 6: Attach required documents (e.g., W-2 forms, 1099 forms, IL-1310).

Do not mail Form IL-8453 and these documents unless requested for review.

ID: 2BX ||L-8453 (R-12/17) | 749091 01-22-18

