Department of the Treasury Calendar Year -Internal Revenue Service

Due 04/18/2022

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.

1,858.

1555 REV 04/09/22 PRO

209-88-5582 JHANSI MOUNICA UNDAVALLI

2427 APRIL LIU LANE APT 201 CHARLOTTE NC 28213

Department of the Treasury Calendar Year -Internal Revenue Service

Due 06/15/2022

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.

1,858.

1555 REV 04/09/22 PRO

209-88-5582 JHANSI MOUNICA UNDAVALLI

2427 APRIL LIU LANE APT 201 CHARLOTTE NC 28213

Department of the Treasury Calendar Year -Internal Revenue Service

Due 09/15/2022

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.

1,858.

1555 REV 04/09/22 PRO

209-88-5582 JHANSI MOUNICA UNDAVALLI

2427 APRIL LIU LANE APT 201 CHARLOTTE NC 28213

Department of the Treasury Calendar Year -Internal Revenue Service

Due 01/17/2023

2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

d	Amount of estimated tax you are paying by check or money order	Г

REV 04/09/22 PRO

-858·

1555

209-88-5582 JHANSI MOUNICA UNDAVALLI

2427 APRIL LIU LANE APT 201 CHARLOTTE NC 28213

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

ERO must obtain and retain completed Form 8879.
 Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name

Taxpay	er's name	Social securi	ty numb	ber
JHA	NSI MOUNICA UNDAVALLI	209-88	-5582	2
Spouse	s's name	Spouse's soc	ial secu	urity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	year you a	ire aut	thorizing.)
Enter	whole dollars only on lines 1 through 5.			-
Note	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	110,605.
2	Total tax		2	17,487.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11,804.
4	Amount you want refunded to you		4	
5	Amount you owe		5	5,762.
Par	II Taxpayer Declaration and Signature Authorization (Be sure you get and k	keep a cop	y of y	our return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. 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 the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpay	er's PIN: che	ck one bo	ox only								8	5	5 8	2 2		
X	l authorize	GLOBAL	TAXES	LLC		to enter or g	genera	ate m	וא P	'IN ^L	-	-	-		as	my
				ERO firm name										s, but zeros		
	signature or	1 the incom	ne tax ret	urn (original or amer	nded) I am now a	authorizing.										
				ture on the income												
	if you are e	ntering you	ir own Pl	N and your return is	s filed using the	Practitioner I	PIN m	etho	d. 1	The E	RO	mu	st co	mplet	te Pa	rt III
	below.		ĩ	1).												
Your sig	nature 🕨			1 m		1	Date 🕨	•	(04/	13	3/2	02	2		
			L	J						•				<u> </u>		
Spouse	's PIN: chec	k one box	only							г					1	
	l authorize					to enter or o	nenera	nte m	יע P						as	my
	1 ddfhoh20			ERO firm name			gonoro		'y '		Ente	r fiv	e diait	s, but	40	y
	signature or	1 the incorr	ne tax ret	urn (original or amer	nded) I am now a	authorizing.								zeros		
	-			ture on the income		-	d) I an	n no	w a	uthor	izina	a. C	heck	(this	box (onlv
				N and your return is			,					•				-
	below.	0,		5	5											
0																
Spouse	s signature	<u> </u>					Date 🕨									
				ctitioner PIN Met				ow								
Part II	Certific	ation and	d Auther	ntication – Prac	titioner PIN M	ethod Only										
ERO's F	FIN/PIN. Fn	ter vour siz	x-diait FF	IN followed by your	five-digit self-se	elected PIN	5	8	7	2 7	8	6	1	9	8 9	
		, 501 01	t sight Er					-		Don't e	enter	all z	zeros			1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above 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		Date 🕨	
ERO Must Retain This F Don't Submit This Form to the I	-		
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 04/09/22 PRO	Form 8879 (Rev. 01-2021)

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form 1040-V 2021

Detach Here and Mail With Your Payment and Return

Department of the Treasury Internal Revenue Service

JHANSI MOUNICA

Form 1040-V Payment Voucher

Use this voucher when making a payment with Form 1040.

Do not staple this voucher or your payment to Form 1040.

Make your check or money order payable to the 'United States Treasury.'

(99)

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment.

5.762.

REV 04/09/22 PRO 1555

►

INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

209885582 UR UNDA 30 0 202112 610

UNDAVALLI

2427 APRIL LIU LANE 201 CHARLOTTE NC 28213



104		artment of the Treasury-Internal Revenue Serv S. Individual Income Ta		(99) urn	202	21	OMB No.	1545-00	74 IRS Use Only	∕—Do not v	write or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly u checked the MFS box, enter the r on is a child but not your depender	name of	your spo	ouse. If you				usehold (HOH) W box, enter th			
Your first name	e and mi	ddle initial	Last na	me						Your so	ocial securi	ty number
JHANSI 1	MOUN	ICA	UNDA	VALLI	[209-	88-558	2
lf joint return, s	spouse's	first name and middle initial	Last na	ime						1 .	e 's social se ∙55 - 803	curity number
	RIL I	er and street). If you have a P.O. box, see				1.			Apt. no. 201	Check	here if you,	on Campaign , or your htly, want \$3
City, town, or p	oost offi	ce. If you have a foreign address, also co	omplete s	paces be	low.	Stat			P code	· ·		Checking a
CHARLOT	TE					NC	2	2	8213		low will not	
Foreign countr	y name			Foreign p	rovince/state	count/	ty	Fc	preign postal code	your ta	x or refund	
At any time du	uring 20	021, did you receive, sell, exchange	, or othe	erwise di	spose of ar	ny fina	ncial inter	est in a	ny virtual curre	ncy?	Yes	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retu	•		Your spou dual-status			ent				
		Were born before January 2, 1	1957	Are b	lind S p	ouse	: 🗌 Was	born b	pefore January		🗌 ls b	-
Dependent		,		(2) 5	Social securi	ty	(3) Relation				or (see instru	-
If more	(1) Fi	rst name Last name	number		number	to you		bu	Child tax o	redit	Credit for ot	ther dependents
than four dependents,												
see instruction	IS											
and check												
here 🕨 📃			- ())									
Attach	1	Wages, salaries, tips, etc. Attach	I	W-2.	· · ·	• •		• •		. 1		10,605.
Sch. B if	2a	Tax-exempt interest	2a			b T	axable inte	erest		. 2k		
required.	<u>3a</u>	Qualified dividends	3a				ordinary div		s	. 3ł	-	
	/ 4a	IRA distributions	4a				axable am			. 4k	-	
	5a		5a				axable am			. 5k	-	
Standard Deduction for —	6a	Social security benefits	6a				axable am			. 6k		
Single or	7	Capital gain or (loss). Attach Sche		require	a. If not rec	luirea	, cneck ne	re.	· · · ►			
Married filing separately,	8	Other income from Schedule 1, lir								. 8		10 005
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,						• •		▶ 9		10,605.
 Married filing jointly or 	10	Adjustments to income from Sche			· · ·			• •		. 10		10 005
Qualifying widow(er),	11	Subtract line 10 from line 9. This i	-		-		· · ·	· ·		▶ <u>1</u> 1	1 1	10,605.
\$25,100	12a	Standard deduction or itemized				,	•••	12a	12,55			
 Head of household, 	b	Charitable contributions if you take						12b	30			
\$18,800	C 10							• •		. 12		12,850.
 If you checked any box under 	13	Qualified business income deduct						• •		. 13		10 050
Standard Deduction,	14									. 14	_	12,850.
see instructions.	15	Taxable income. Subtract line 14		IE I I. IT 2	Lero or less	, ente	r-U	• •		. 1	D	97,755.

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

Form **1040** (2021)

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 🗌 4972	3		16	17,487.
	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	17,487.
	19	Nonrefundable child tax cree	dit or credit for c	other depende	nts from Schedule	8812		19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	17,487.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	17,487.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				25a 11	,804.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	11,804.
If you have a	26	2021 estimated tax payment						26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a			
		Check here if you were b							
		January 2, 2004, and you taxpayers who are at least a							
	b	Nontaxable combat pay elec	-	1 1					
	c	Prior year (2019) earned inco				-			
	28	Refundable child tax credit or			Schedule 8812	28			
	29	American opportunity credit				29		-	
	30	Recovery rebate credit. See				30		-	
	31	Amount from Schedule 3, lin				31		-	
	32	Add lines 27a and 28 throug				refundable cred	its 🕨	32	
	33	Add lines 25d, 26, and 32. T						33	11,804.
Refund	34	If line 33 is more than line 24						34	
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here		35a	
Direct deposit?	►b	Routing number X X X							
See instructions.	►d	Account number X X X	X X X X	XXXX	X X X X X	XX			
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36			
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37	5,762.
You Owe	38	Estimated tax penalty (see in				38	79.		
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee	ins	structions				. 🕨 🗌 Yes. Co	mplete b	elow.	X No
		signee's		Phone Personal id					
		me ►		no. ►			er (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation				nt you an Identity
		ar oignataro		Buio					N, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see	inst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
your records.	,							inst.) 🕨	ection PIN, enter it here
	Dh	00000 (660) 000 066	2	Email address		TACMATT COM	(000		
<u>-</u>		one no. (669) 220-966 eparer's name	3 Preparer's signat	Email address	MOUNICA.U.	J@GMAIL.COM Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM					P02082	2702	Self-employed
Preparer				IVARI SAGAK	GUFIA IALLAM	04/13/2022			· ,
Use Only		m's name ► GLOBAL TAX m's address ► 2530 Pebb		n Cummin	A CZ 300/1				678) 965-9522
Co to united in					-			's EIN ▶	
GO TO WWW.Irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 04/09/22 PRO			Form 1040 (2021)

D-4(< Stap	ole Ali	• •	s of Yo	bur	2021			<u>li</u> na De		Tax Retuin t of Revenue		DOR Use Only			
1				e or fiscal yea	r <u>beginnin</u>	q		_	ded Return d ending		Are	e you a ve	eteran?	Yes 🛛 No	
JHAI	NSI	MOUN	IC	UND	AVALLI						ls	your spou	se a veteran?	Yes 🗌 No	<u>, </u>
		RIL :		LANE 3 MECKL				201	Your S Spouse's S	SN : 20988558 SN :				atic extension to fil urn, e.g., Form 104	-
Filing			1. Sing			2. Marri	ed Filing			ied Filing Separately		i loue.c.		lo X	τ υ .
Mara				ad of Househo			ifying Wie Yes X				Ye		ise died:		
	•			C. for the ent ent for the e	•		Yes X Yes C	No No No No		Return for decease Return for decease		-	Date of dea Date of dea		
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		•								your payment of ctions for informati		0 out the F	•	e your overpayr	nent
										on April 15, 2022			zen or reside	nt.	
	elect		iurn is	Theo and sig	gnea by E	xecutor,	Adminis	<u>strator, or</u>	Court-App	ointed Personal R	eprese	ntative.			
FS	3	PP	Y		DT	Ν	OC	N .	[PRES	Y SPRI	ES	N	VT N	SVT	Ν
UNDA	L	242	7	28213	DS	N	EA	N .	ΓD		SD)		FDEXT	' N
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												NC	28213		
2427	AI	PRIL	LIU	J LANE					201	CHARLO	TE				
06		-	1106	505		16			0	260	2		0		
07				0		18	Y		0	261	2		0		
09				0		20A			5350	EU					5002
10A				0		20B			0	27			0		ώ
10B				0		21A			0	29			0		
11	S	Y	I	Ν		21B			0	30			0		
11			107	750		21C			0	31			0		
13			000)00		21D			0	32			0		
14			998	355		26A			0	34			108		
15			52	242		26B			0						
TN	6	56922	2096	563		PN	6	578965	59522	PP		P02	082703		
		turn B		mined this retur	efund D		hodulos a	108		yment Due			0		
the best	of my kr	nowledge a	and belie	f, they are true,	correct, and	complete.	neuules al	iu statement	s, anu lu	to discuss this r	eturn ar	nd attachr	nents with the p	Department of Rev baid preparer below	venue w.
Your Sig	nature					Date	<u> </u>	use's Signat	re (If filing ioi	nt return, both must sigr	.)	Date	<u>66922</u>	09663 one No. (Include area	
		R USE ON	NLY If	prepared by a p	person other t			•		ormation of which the p	,			110 110. (INGLUE A/EA	
		IYA F Signature	RAM S	SAGAR GU	UPT O	4 13 Date		67896 arer's Conta		per (Include area code)				82703 EIN, SSN, or PTIN	

Paid Preparer's Signature

Preparer's FEIN, SSN, or PTIN

If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001 If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

REV 03/29/22 PRO

D-400 2021 Page 2 (50)

Last Name	(First 10 Characters) UNDAVALLI
Luot Humo		

Your Social Security Number

209885582

6.	Federal Adjusted Gross Income	6.	110605
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	110605
9.	Deductions From Federal Adjusted Gross Income	9.	0
10.	Child Deduction		
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	0
	b. Enter the amount of the child deduction	10b.	0
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	10750
12.	a. Add Lines 9, 10b, and 11	12a.	10750
	b. Subtract amount on Line 12a from Line 8	12b.	99855
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	99855
15.	N.C. Income Tax	15.	5242
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	5242
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	5242
North	Carolina Income Tax Withheld		
20a.	Your tax withheld	20a.	5350
20b.	Spouse's tax withheld	20b.	0
<u>Other</u>	Tax Payments		
21a.	2021 estimated tax	21a.	0
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Amended Returns Only - Previous payments	22.	0
23.	Total Payments	23.	5350
24.	Amended Returns Only - Previous refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	5350
26a.	Tax Due	26a.	0
26b.	Penalties	26b.	0
26c.	Interest	26c.	0
26d.	Add Lines 26b and 26c and enter the total on 26d	26d.	0
EU	Exception to Underpayment of Estimated Tax	EU	
26e.	Interest on the Underpayment of Estimated Income Tax	26e.	0
27.	Pay this Amount	27.	0
28.	Overpayment	28.	108
<u>Amou</u>	int of Refund to Apply to:		
_			_
29.	Amount of Line 28 to be applied to 2022 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	30.	0
31.	N.C. Education Endowment Fund	31.	0
32.	N.C. Breast and Cervical Cancer Control Program	32.	0
33.	Add Lines 29 through 32	33.	0
34.	Amount to be Refunded	34.	108

This page must be filed with the first page of this form.

D-400 Line-by-Line Information