RETURN.				Arizona Form 140NR		N	onresic	lent Po	erso	nal In	come Ta	ах	Return		_	LENDAR YEAR <b>021</b>	₹
Æ	82F		Check f filin	k box 82F g under extensi	on (	OR FISC	AL YEAR E	BEGINNIN	NG ∟		12,0,2,	1 .	AND ENDING L				. 66F
뿓				ame and Middle Ini					Last N	lame			Entor	You	Socia	Security N	umber
	_			LAKRISHNA RE						JRUMAL	LI		Enter your	89		58 <sub> </sub> 841	
<b>ANY ITEMS TO</b>				rst Name and Midd		`		(ed)	Last N	lame			SSN(s).		1	Social Securi	ity No.
世	<u>س</u>			me Address - numb		street, ru	ral route				Apt. No.					area code)	
≥	2			EXAS RANGERS or Post Office	DR.		State			ZIP Code	1207	1.	ast Names Used in		41-5		forent)
		•	SCO	or Post Office		•	TX			5034		'	ast Names Oseu m	Lasi FU	ui Filoi	real(s) (ii uii	97
STAPLE	一	4	_	Married filing joint r	oturn	40 🗆		uaa Drata			rerpayment	R	REVENUE USE ONL	Y. DO N	IOT MA	RK IN THIS	
ST	ATU	5	_	Head of household:							еграуппетіі	88	8R				
10	3 ST	·			. Littor i	iamo or q	admynig orma	- aopona									
DO NOT	FILING STATUS	6		Married filing separ	ate retu	rn: Enter	spouse's na	me and So	cial Sec	urity Numb	er above.						
2	匝	7		Single	alaima	d Done	t put a ab	a a le mante				-					
	10b	_		Enter the number						also comr	olete lines 47		<sub>1P</sub> PM		000	RCVD	
	and	8 9		Age 65 or over (yoા Blind (you and/or sį		spouse)					ete line 59.	8	19		808		
	Ja	10a		Dependents: Unde	,	17.	10b	Depende	ents: Ac	ge 17 and	over.						
	ts			dency Status <i>(che</i>	Ü		·					12 	Composite Retu	ırn (so	n inetru	etions nag	28)
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	- 6 5			FIRST AN (Do not list y				SOCIA	AL SECU	RITY NO.	RELATIONSH	HIP	NO. OF MONTHS ✓ [	epender included	l in:	if you did nothing this person of	ot claim n your
	8 and			(Bo not not)	youroon o	п орошоо.,							HOME IN 2021 (Bo	1 x 10a) (I	2 Box 10b)	federal return educational o	due to redits
	ons	<b>10</b> c												]			
	Exemptions	<b>10</b> d											L	<u></u>	井		
Ä	Exel	10e											<u> </u>	1	井	<u> </u>	
40	ı	10f	Chec	k box 14 if married	and vol	ı are the	enguee of	an active (	duty mi	ilitary mer	mher		2021 FEDERAI		20	D21 ARIZON	IΔ
nts after Form 140NR		14										An	nount from Federal F		II	urce Amount (	
- - -		15										15	40,07	5 00		5,05	0 00
er		who qualifies for relief under the Military Spouses Residency Relief Act14										00			00		
aft											i	17 18		00			00
nts	ome			na income tax refur										00			00
	n l			s or (losses) from fe	•							19 20		00			00
II O	Arizona In	21		royalties, partnership								21		00			00
9	Ari	22		income reported o								22		00			0 00
hei		23	Total	income: Add lines 1	5 through	n 22						23	i			5,05	
rot				federal adjustment		-					T I	24					0 00
S O				ral adjusted gross ir na gross income: S												5,05	0 00
schedules or other docume				na gross income. S												0.13	
hed				Business Income: 28		-			•								00
Sc		29	Modifi	<u>ied Arizona gross ir</u>	come.	Subtract	line 28 fror	m 26						29		5,05	
AZ	ons	30	Total d	lepreciation include by be blank or may cor	d in Ariz	zona gro	ss income	rom vour re	a friend								00
nd	Addition			this be blank of may con	Main a pi	V W N	Karuman'	MY:I#GNI	.∎⊪'		-	-	ment. See instruction				00
a 9	Ă		NU N				C 17 17 1	W.W.W.					. See instructions 30, 31 and 32			5,05	00
der	2		(Q)(V		7170		000 877 004				ced gain/loss			00			100
Ę	page		ME					<u>trerow</u>	{         3	35 Short-te	erm gain/loss	35		00			
red	on.		Will						T	_	rm gain/loss			00	1		
Place any required federal and AZ	Subtractions – cont. on page 2		KW X								gain. See instr.			00			00
v re	- SI		/XIV			WW.					-		25) ified small business				00
an	ctior												reciation				00
99	btra			<del></del> / / // <b>= !!!!</b> []									instructions				00
P	Su								4	12 Subtrac	t lines 38 throu	ugh 4	41 from line 33	42		5,05	0 00

ADOR 10413 (21) 1555

FOR CALENDAR YEAR

		· · · · · · · · · · · · · · · · · · ·	our Social Security Nu			
	SA.	I BALAKRISHNA REDD NEDURUMALLI	899-58-8419			$\perp$
ns – age 1	43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills		43		00
Subtractions ont. from pag	44	Agricultural crops contributed to Arizona charitable organizations		44		00
ubtra	45	Other Subtractions from Income: Complete Other Subtractions from Arizona Gross Income sched	ule on page 6	45		00
ي ي	46	Subtract lines 43 through 45 from line 42. Enter the difference		46	5,050	00
	47	Age 65 or over: Multiply the number in box 8 by \$2,100		00		
ons	48	Blind: Multiply the number in box 9 by \$1,500		00		
npti	49	Other Exemptions: See instructions49E Multiply the number in box 49E by \$2,300 4		00		
Exemptions	50	Add lines 47, 48, and 49. Enter the total		00		100
ш	51	Multiply line 50 by the Arizona ratio on line 27		51	Г 0Г0	00
	52	Arizona adjusted gross income: Subtract line 51 from line 46. If less than zero, enter "0"		52	5,050 1,669	00
	53	Deductions: Check box and enter amount. See instructions				
	54	If you checked box 53S and claim charitable contributions, check 54C Complete page 3. See in		54	3,371	00
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero, enter "0"				
of Tax		Compute the tax using amount from line 55 and Tax TableS X and Y			8 /	00
		If line 55 is \$250,001 or more (single/mfs) or \$500,001 or more (mfj/hoh) compute the tax surcharge.		I .		00
Balance	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 30			97	00
Bal	58	Subtotal of tax: Add lines 56a, 56b and 57. Enter the total  Dependent Tax Credit. See instructions		58	07	00
	59	Nonrefundable credits from Arizona Form 301, Part 2, line 61		59 60		00
	60 61	Balance of tax: Subtract lines 59 and 60 from line 58. If the sum of lines 59 and 60 is more than line 58, ent		61	87	00
nd its	62	2021 AZ income tax withheld		62	136	
Total Payments and Refundable Credits	63	2021 AZ estimated tax payments63a 00 Claim of Right 63b		_	130	00
/mer	64	2021 AZ extension payment (Form 204)		64		00
I Pa	65	Other refundable credits: Check the box(es) and enter the total amount		· · · —		00
Tota Refu	66	Total payments and refundable credits: Add lines 62 through 65. Enter the total		66	136	
	67	TAX DUE: If line 61 is larger than line 66, subtract line 66 from line 61. Enter amount of tax due. Skip lines 68		67		00
Tax Due or Overpayment	68	<b>OVERPAYMENT:</b> If line 66 is larger than line 61, subtract line 61 from line 66. Enter amount of overpayment		68	49	00
ix Du	69	Amount of line 68 to be applied to 2022 estimated tax		69		00
Š ä	70	Balance of overpayment: Subtract line 69 from line 68. Enter the difference		70	49	00
Ŋ		- 81 Voluntary Gifts to: Solutions Teams Assigned to Schools71 00 Arizona Wildlife				, , ,
Gifts		Child Abuse Prevention73 00 Domestic Violence Services 74 00 Political Gift	75 00	]		
tary		Neighbors Helping Neighbors <b>76</b> 00 Special Olympics <b>77</b> 00 Veterans' Donations Fur	d 78 00			
Voluntary		I Didn't Pay Enough Fund <b>79</b> OO Sustainable State Parks and Road Fund	81 00			
8	82	Political Party (if amount is entered on line 75 - check only one): 821 Democratic 822 Libertarian 823	Republican			
Ę	83	Estimated payment penalty		83		00
Penal	84	841 Annualized/Other 842 Farmer or Fisherman 843 Form 221 included				
	85	Add lines 71 through 81 and 83. Enter the total		85		00
Þ	86	REFUND: Subtract line 85 from line 70. If less than zero, enter amount owed on line 87		86	49	00
Refund or Amount Owed		Direct Deposit of Refund: Check box 86A if your deposit will be ultimately placed in a foreign account; see in ACCOUNT NUMBER  ROUTING NUMBER  ACCOUNT NUMBER	nstructions. 86A			
efun		CX Checking or				
Am A						100
		AMOUNT OWED: Add lines 67 and 85. Make check payable to Arizona Department of Revenue; write your Under penalties of perjury, I declare that I have read this return and any documents with it, and to the contract of the con		87	and balief they ar	00
		true, correct and complete.  Declaration of preparer (other than taxpayer) is based on all information				e
l					,	
2	<b>→</b>	SC	FTWARE ENG	INEER		
ᄪ	;	YOUR SIGNATURE DATE OCC	CUPATION			_
SIGN HERE						
9	→	SPOUSE'S SIGNATURE DATE SPC	USE'S OCCUPATION			-
	'					
SE	,	SYAM PRIYA RAM SAGAR GUPTA TALLAM 03222022 GLOBAL TAXES LI PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF:				_
EA		PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF:	30-10171	96		
PLEASE		PAID PREPARER'S STREET ADDRESS	- 30-101/1 PAID PREPARER'S			-
_	'	Cumming GA 30041	(678)965			
	;	PAID PREPARER'S CITY STATE ZIP CODE	PAID PREPARER'S			-

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode). If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).

# 2021 Form 140NR - Standard Deduction Increase for Charitable Contributions

You must complete this worksheet if you are taking an increased standard deduction for charitable contributions. Include the completed worksheet with your tax return, when filed. If you do not include the completed worksheet, your standard deduction will not be increased.

Taxpayers electing to take the Standard Deduction may *increase* the standard deduction amount by 25% (.25) of the total amount of the taxpayer's charitable deductions that would have been allowed if the taxpayer elected to claim itemized deductions on the Arizona tax return.

Charitable contributions (lines 1C, 2C, and 3C) are those gifts allowed on federal Form 1040 Schedule A (Gifts to Charity) that you would have claimed had you elected to take itemized deductions on your federal return.

**NOTE 1:** As a nonresident filing Form 140NR, you are required to apportion your allowable increased standard deduction based on your Arizona income ratio computed on page 1, line 27.

**NOTE 2:** You must reduce your contribution amount by the total charitable contributions you made during January 1, 2021 through December 31, 2021 for which you are claiming an Arizona tax credit under Arizona law for the current tax year return or claimed on the prior tax year return. Enter this amount on line 5C.

**NOTE 3:** If you itemized deductions on your federal return (1040 Schedule A) and were required to adjust the amount of your allowable contributions on your federal 1040 Schedule A for the amount claimed as a tax credit on your Arizona income tax return, include the amount of the federal contribution adjustment to line 1C and enter the amount of the Arizona tax credit on line 5C.

Complete the worksheet to determine your allowable increased standard deduction for charitable contributions.

1C	2021 Gifts by cash or check	1C	300	00
2C	2021 Other than by cash or check	2C		00
3C	Carryover from prior year	3C		00
4C	Add lines 1C through 3C and enter the total	4C	300	00
5C	Total charitable contributions made in 2021 for which you are claiming a credit under Arizona law for the current (2021) or prior (2020) tax year	5C		00
6C	Subtract line 5C from line 4C and enter the difference. If less than zero, enter "0"	6C	300	00
7C	Multiply line 6C by 25% (.25) and enter the result	7C	75	00
8C	Enter your Arizona income ratio from page 1, line 27	8C	0.133	
9C	Multiply line 7C by the ratio on line 8C and enter the result	9C	10	00
7C 8C	"0"	7C 8C	75	t

- Enter the amount shown on line 9C on page 2, line 54
- Be sure to check box 53S for Standard Deduction on line 53.
- Check box **54C** for charitable contributions on line 54. If you do not check this box, you may be denied the increased standard deduction.

ADOR 10413 (21) 1555 AZ Form 140NR (2021) REV 02/19/22 PRO Page 3 of 6

## Instructions for Form MI-1040-V 2021 Michigan Individual Income Tax Payment Voucher

#### **Important Information**

Use this voucher only if making your payment after you file your MI-1040 return.

**Do not** use this voucher to do any of the following:

- Make any other payments to the State of Michigan
- Make estimated income tax payments. Estimated income tax payments should be made using the MI-1040ES
- Pay tax owed on your City of Detroit return. The City of Detroit tax due should be paid using the CITY-V.

#### Failure to provide a complete Social Security number on Form MI-1040-V will result in processing delays.

Enter on Form MI-1040-V below the tax due as shown on your Individual Income Tax Return (MI-1040), line 33.

Your payment and MI-1040-V are due April 18, 2022. If your payment is late, you will owe interest and penalty in addition to the tax due. The annual interest rate is 1 percent above the current prime rate. Penalty is 5 percent of the tax due for the first two months, then 5 percent for each month thereafter until the full payment is received, up to a maximum penalty of 25 percent. If you pay late, you may calculate and add interest and penalty to your payment or Treasury will send you a bill for any additional amount due. Interest rates are adjusted on July 1 and January 1. For current interest rates visit www. michigan.gov/taxes.

If you do not owe any tax on your MI-1040, do not file this form.

#### **Electronic Payments**

You may choose to make your Individual Income Tax payment electronically. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card.

You can also make your Individual Income Tax payment using direct debit when supported by your e-file software provider.

If you choose to make your payment electronically, you do not need to mail the MI-1040-V to Treasury. Visit www.michigan.gov/iit for more information.

#### **Mailing Instructions**

- Make your check payable to the "State of Michigan." Print "2021 MI-1040-V" and the last four digits of your Social Security number on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's Social Security number on the check.
- Detach Form MI-1040-V along the dotted line.
- Do not attach your payment to Form MI-1040-V. Instead, place both items loose in the envelope and mail to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

- Do not attach a copy of your return to the MI-1040-V. Attaching a copy of your return will delay the application of payment to your account.
- Do not write notes on the MI-1040-V or submit the voucher without payment.
- If you mail your payment with your paper filed return, you do not need to mail the MI-1040-V to Treasury.

If you have questions, you may call 517-636-4486. Assistance is available using TTY through the Michigan Relay Service by calling 711.

Visit www.michigan.gov/taxes for additional information.

## Mail this form with payment for your MI-1040 return. Do not file with your paper return.

Detach here and mail with your payment. Do not fold or staple the voucher.

Michigan Department of Treasury (Rev. 03-21)

## 2021 MICHIGAN Individual Income Tax Payment Voucher

MI-1040-V

Issued under authority of Public Act 281 of 1967, as amended. See instructions for filing guidelines.

Mail Form MI-1040-V with your payment after you file your MI-1040 return. Do not use this form to make any other payments to the State of Michigan.

REV 03/01/22 PRO

Filer's Name(s) (First, Middle Initial, Last) and Home Address (Street, City, State, ZIP Code)	Filer's Full Social Security Number 899-58-8419	Spouse's Full Social Security Number
SAI BALAKRISHNA REDD NEDURUMALLI	WRITE PAYMENT AMOUNT HERE	\$ 50 .00
7255 TEXAS RANGERS DR APT 1207 FRISCO TX 75034	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Make check payable to "State of Michigan." Write the last four digits of filer's Social Security number and "2021 MI-1040-V" on the check. Do not fold or staple.

## 2021 MICHIGAN Individual Income Tax Return MI-1040

20 <i>2</i> 1 WIICHIGAN INGI Return is due April 18, 2022.					rn IVII-1	1040	J		•		ended Return ude Schedule AMD)			
1. Filer's First Name	M.I.	Last Name	DIACK II	IIK.		12	Filer's	Full	Social Sec	curity	No. (Example: 123-45-67	89)		
SAI BALAKRISHNA RE		NEDURUM	ALLI			2.			Social Sec	-		09)		
If a Joint Return, Spouse's First Name	M.I.	Last Name				┪	8 	99 —		58	<del></del>			
Home Address (Number, Street, or P.O. Bo						3.	Spous	se's F	ull Social	Secur	rity No. (Example: 123-45	-6789)		
7255 TEXAS RANGERS		. APT. 12	207											
City or Town		,		ZIP Code		4.	Schoo	ol Dis	trict Code	(5 dig	its – see page 60)			
FRISCO			TX	7503	4				0000	, ,	, ,			
5. STATE CAMPAIGN FUND					6. FAR	MERS	, FISI	HER	MEN, OR	SEA	AFARERS			
Check if you (and/or your spous filing a joint return) want \$3 of yo to go to this fund. This will not in your tax or reduce your refund.	ur taxes	, <u></u>	iler Spouse			Check fishing				our ir	ncome is from farming			
7. 2021 FILING STATUS. Check o	ne.				8. <b>202</b> 1	RES	DEN	CY S	TATUS.	Chec	k all that apply.			
a. X Single		ou check box "c,"			a	Resi	dent							
b. Married filing jointly	line 3 and enter spouse's full name below: b. X										* If you check box "b" or "c," you must complete and include Schedule			
c. Married filing separately*					с	Part-	Year l	Resi	dent *		NR.			
9. <b>EXEMPTIONS. NOTE:</b> If some	eone els	e can claim you a	as a dep	endent, ch	eck box 9e,	enter	0 on li	ine 9	a and en	ter \$	1,500 on line 9e (see i	nstr.).		
Number of exemptions (see	instructi	ons)			9a	a.	1	х	\$4,900	9a.	4900	00		
<ul> <li>b. Number of individuals who q blind, hemiplegic, paraplegic</li> </ul>	ualify for	one of the followi	ing specia	al exemption	ons: deaf,			х	\$2,800	9b.		00		
c. Number of qualified disabled		-		-				x	\$400	9c.		00		
d. Number of Certificates of St								х	\$4,900	9d.		00		
e. Claimed as dependent, see	line 9 N	OTE above			9e	e. [				9e.		00		
f. Add lines 9a, 9b, 9c, 9d and	9e. En	er here and on lir	ne 15							9f.	4900	00		
10. Adjusted Gross Income from	your U.S	6. Form <i>1040</i> (see	e instruc	tions)					10.		37875	5 00		
11. Additions from Schedule 1, line	9. <b>Incl</b> u	ide Schedule 1							11.			00		
12. <b>Total.</b> Add lines 10 and 11									12.		37875	5 00		
13. Subtractions from Schedule 1,	ine 29.	Include Schedu	le 1						13.		36512	2 00		
14. Income subject to tax. Subtra	ct line 1	3 from line 12. If	line 13 is	s greater th	an line 12,	enter "	0"		14.		1363	3 00		
15. <b>Exemption allowance.</b> Enter a	ımount f	rom line 9f or Sch	nedule N	R, line 19					15.		176	5 00		
16. <b>Taxable income.</b> Subtract line	15 from	line 14. If line 15	ō is great	ter than line	e 14, enter "	0"			16.		1187	7 00		
17. <b>Tax.</b> Multiply line 16 by 4.25% ION-REFUNDABLE CREDITS	0.0425)				AMOU				17.		5 (	00		
Income Tax Imposed by govern Include a copy of the return (see				Ba.	Airiou			00	18b.		CALDII	00		
Michigan Historic Preservation instructions)	Tax Cre	dit carryforward (	see	9a.				00	19b.			00		
20. Income Tax. Subtract the sum If the sum of lines 18b and 19b	of lines	18b and 19b from	n line 17.						20.		5(	00		

2021 M	II-1040, Page 2 of 2									
		Filer	's Full Social S	Security Number	8	99 —	- 5	58 <del></del> 8	8419	
24	Enter amount of Income Tay from line	- 20					24 [		50	Ιοο
21.	Enter amount of Income Tax from line						21.		50	00
22.	Voluntary Contributions from Form 46	642, line 6. <b>include</b> l	Form 4642				22.			100
23.	<b>USE TAX.</b> Use tax due on Internet, m Worksheet 1 (see instructions)						23.		0	00
24.	Total Tax Liability. Add lines 21, 22	and 23				24.			50	00
REFU	INDABLE CREDITS AND PAYME	ENTS					Г			_
25.	Property Tax Credit. Include MI-104	40CR or MI-1040CR	R-2				25.			00
26.	Farmland Preservation Tax Credit.	Include MI-1040CF	2-5				26.			00
20.	rammana r reservation rax oreat.	11101000011111 104001	•		DERAL		20.	MICH	HIGAN	100
	Farmand In agency Tays Consults Maritimbalis	07- h., 00/ (0.00)	Г				Г			Π
27.	Earned Income Tax Credit. Multiply lienter result on line 27b	ne 27a by 6% (0.06)	27a			00	27b.			00
28.	Michigan Historic Preservation Tax C		_	3581			28.			00
29.	Credit for allocated share of tax paid	,					29.			00
20.	Creak for allocated chare of tax paid	by an electing new t	an ough onar	y (ooo moa ao			-0.			
30.	Michigan tax withheld from Schedule	W, line 6. Include S	Schedule W	(do not subn	nit W-2s)		30.			00
21	Estimated tax, extension payments a	and 2020 arodit forwa	ard				31.			00
31.	, , ,						31.F			100
32.	2021 AMENDED RETURNS ONLY. The Amended returns must include School			2021 return s	should skip to	line 33.				
	Amended returns must <b>merdue sene</b>	edule AMD (See IIIS	uucuons).							
	32a. If you had a refund and/or or negative number on line 32c		ginal return, ch	eck box 32a an	d enter this amo	ount as a				
	If you paid with the original r	eturn, check box 32b a	nd enter the a	mount paid with	the original retu	ırn, plus				
	32b. any additional tax paid after	filing, as a positive nun	nber on line 32	c. Do not includ	le interest or per	nalty.	32c.			00
22	Takal makim dalah amadika anad manimanak	t- Add II OF OC	075 00 00	20 24 20	1_	22				امما
	Total refundable credits and payment	is. Add lines 25, 26,	270, 20, 29,	30, 31 and 32	:C	33.				00
_	JND OR TAX DUE	4 lin - 22 form lin - 24	lf ammliaahl	: : : : : : : : :	:					_
34.	If line 33 is less than line 24, subtract	t line 33 from line 24		e, see mstruct	ions.					
	Include interest	nd penalty	00	\	/OU OWE	34.			50	00
	Include interest	id penalty [		l	OU OWE	34.				100
35.	Overpayment. If line 33 is greater th	an line 24. subtract	line 24 from I	line 33		35.				00
	3	,				_				
36.	Credit Forward. Amount of line 35 to	be credited to your	2022 estima	ited tax for yo	ur 2022 tax re	turn	36.			00
	Subtract line 36 from line 35				REFUND	37.				00
	ECT DEPOSIT	a. Routing Transi	t Number	b. A	ccount Numbe	er 	<b>」</b>	c. Type of	Account	
	it your refund directly to your financial ion! See instructions and complete a, b						1.	Checking	2. Savin	ngs
and c.				ļ <u>.</u>						
Dece	eased Taxpayer. If Filer and/or Spouse	e died after December 3	31, 2020, enter					leclare under per		
ENTE	R DATE OF DEATH ONLY. Example: 0	04-15-2021 (MM-DD-Y	YYY)					ion of which I hav	re any knowled	ge.
Filer		Spouse -		_	Preparer's PTII		or SSN			
	<u> </u>	Opened			P02082					
	ayer Certification. I declare under potachments is true and complete to the best		e information ii	n this return	Preparer's Nan SYAM PI	**	• • •	SAGAR (	JUPTA T	A
Filer's	Signature	<del>-</del>	Date		Preparer's Sigr	nature				
					SYAM PI	RIYA	RAM	SAGAR C	JUPTA T	A
Spous	se's Signature		Date		•			ess and Telephon	e Number	
					GLOBAL	TAX	ES LI	LC		
					2530 PI	EBBL:	E CRI	EEK LN		
	By checking this box, I authorize Trea	asury to discuss my	return with m	y preparer.	CUMMING	G GA	3004	41		
╷╵	, ,	, ,,		· ·	678-96					

Refund, credit, or zero returns. Mail your return to:

 ${\bf Michigan\ Department\ of\ Treasury,\ Lansing,\ MI\ 48956}$ 

Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

## 2021 MICHIGAN Schedule 1 Additions and Subtractions

Issued under authority of Public Act 281 of 1967, as amended.

Inclu	de with Form MI-1040. Type or	print	in blue or black ink.				Attachmen	t 01
Filer'	s First Name	M.I.	Last Name	Filer's Full Soci	al Secu	rity No. (Exa	mple: 123-45-6789)	
SA	I BALAKRISHNA RE		NEDURUMALLI	899 -		58 –	<b>—</b> 8419	
Add	itions to Income (all entries	s mus	t be positive numbers)					
1.	Gross interest and dividends f	rom o	bligations issued by states					
			al subdivisions		1.			00
2.			by income, including self-employment tax, taken tax paid by an electing flow-through entity (see i		2.			00
3.	Gains from Michigan column	of MI-	1040D and MI-4797		3.			00
4.	Losses attributable to other st	ates (	see instructions)		4.			00
5.	Net loss from federal column of	of you	r Michigan MI-1040D or MI-4797		5.			00
	Oil, gas, and nonferrous meta	llic mi	neral expenses (Michigan sourced) deducted to	arrive at	6.			00
7.	Federal Net Operating Loss d	educti	on included in AGI		7.			00
8.	Other (see instructions). Desc	ribe: _			8.			00
9.	Total additions. Add lines 1	throu	gh 8. Enter here and on MI-1040, line 11		9.		0	00
Sub	tractions from Income (all	entri	es must be positive numbers)		_			
10.			s and other U.S. obligations included in MI-104		10.			00
11.			, from military retirement benefits due to service onal Guard, or taxable railroad retirement bene		11.			00
12.	Gains from federal column of	Michi	gan MI-1040D and MI-4797		12.			00
13.	Income attributable to another	state	Explain type and source: SCHEDULE NR		13.		36512	00
14.	Taxable Social Security benef	its or ı	military pay (not retirement) included on MI-104	0, line 10	14.			00
15.	Income earned while a reside	nt of a	Renaissance Zone (see instructions)		15.			00
16.			refunds received in 2021 and included		16.			00
17.	-	-	m, MI 529 Advisor Plan, and Michigan Achievir	-	17.			00
18.	Michigan Education Trust				18.			00
	<del>-</del>		nerals income (Michigan sourced) included in A	.GI	19.			00
20.			empted under a State/Tribal tax agreement or Bulletin 1988-47		20.			00
21	Miscellaneous subtractions (s.	aa inc	tructions) Describe:		21			ا

REV 03/01/22 PRO

#### 2021 MICHIGAN Schedule 1 Additions and Subtractions

Filer's First Name	M.I.	Last Name	Filer's Full Social Security No. (Example: 123-45-6789)
SAI BALAKRISHNA RE		NEDURUMALLI	899 — 58 — 8419

#### **Deduction Based on Year of Birth**

Complete 22A through 22H if claiming the Michigan Standard Deduction, the retirement benefits deduction or the senior investment income deduction on lines 23, 24, 25, or 26. Check box(es) 22C and/or 22G **only** if you or your spouse received retirement benefits from employment with a governmental agency not covered by the federal Social Security Act (SSA exempt employment). **See instructions before continuing**.

JCIU	———————											
22.		FI	ILER					SPO	USE			
	A.	B.	C.	D.		E.	F.		G.	H.		
	Year of Birth (19xx)	Age as of 12-31-2021	Check if filer received benefits from SSA exempt employment	Check if filer retired as of 01-01-2013 and born after 1952		Year of Birth (19xx)	Age as of 12-31-2021	ı	Check if spouse received benefits from SSA exempt employment	retired as 01-01-2013	Check if spouse retired as of 01-01-2013 and born after 1952	
	1995	26										
23.	(if married) wa	s born during the	duction. Complete e period January 1 plete lines 24, 25	l, 1946 through	De	cember 31, 19	52, and	23.			00	
24. <b>Tier 3 Michigan Standard Deduction.</b> Complete this line if the older of you or your spouse (if married) was born during the period January 1, 1953 through January 1, 1955, and reached age 67 on or before December 31, 2021. <b>Do not complete lines 23, 25 or 26.</b> Enter amount from line 6 of Worksheet 2												
25.			nount from line 16					25.			00	
26.	limited to \$12, any deduction	127 for single or for retirement be	deduction for taxp married filing sepa enefits (see instruc	arately filers an ctions)	d \$	24,254 for join	filers, less	26.			00	
			unremarried survivir born before 1946 w									
27.	Subtotal. Add	lines 10 through	າ 26					27.		36512	00	
28.			on. Enter amount f lude Form 5674 .					28.			00	
29.	Total Subtrac	tions. Add lines	27 and 28. Enter	here and on MI	-10	40, line 13		29.		36512	00	

#### **Schedule NR**

## 2021 MICHIGAN Nonresident and Part-Year Resident Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Include with Form MI-1040. Read all instructions before completing this form.

Attachment 02

1. File	er's First Name	me				2. Filer's Full Social Security No. (Example: 123-45-6789)							
SA	I BALAKRISHNA RE	   NED	URUMALLI				899 — 58 — 8419						
If a Jo	int Return, Spouse's First Name	M.I.	Last Na	me				3. Spouse's Full So	ocial S	Security No. (Example: 123-45-	6789)		
				-						_			
4.	2021 RESIDENCY STATUS: Check all that apply.	•		*Dates of <b>Michi</b> ç	gan resid	ency	/ in 2021		IM-D	D-YYYY, Example: 04-15-20	021)		
	a. X Nonresident			FROM:				2021			)21		
	b. Part-Year Resident of N			то.									
	Enter dates of Michigar	n resid	lency in 2	2021*				2021					
Incor	ne Allocation		A. Total In	come		B. M	ichigan Incom	e	C. Other State(s) Inco	ome			
5.	Wages, salaries, other payments	4(	0075	00		1363	00	38712	00				
6.	Interest and dividends					00			00		00		
7.	Business and farm income (included U.S. Schedules C and F)					00			00		00		
8.	Gains/losses from MI-1040D or U.S. Schedule D, and/or MI-4797 or U.S. Form 4797					00			00		00		
9.	Income reported on U.S. Schedul U.S. Schedule E and supporting	•				00			00		00		
10.	Pensions, IRA distributions, annu and Social Security (see Form 48					00			00		00		
11.	Other (see instructions)					00			00		00		
12.	Total income. Add lines 5 through	11		40075				1363	00	38712	00		
13.	Enter the total adjustments from to Describe: STUDENT LOA			2200 00				0	00	2200	00		
14.	Subtract line 13 from line 12. The a column A should equal MI-1040, lin amount in column C on Schedule a negative amount, enter as a posi	ne 10. 1, line	Enter 13 or, if	2.	7055			1262		26510			
	Schedule 1, line 4.			3	7875	00		1363	00	36512	[00]		
Exen	nption Allowance (If one spou	ıse is	a full-y	ear resident, and	the othe	r is	not, see i	instructions.)	Г		_		
15.	Enter amount from MI-1040, line	9f					<u></u>	1	5	4900	00		
16.	Enter Michigan source income fro	om line	e 14, colu	umn B 1	6.			1363 00					
17.	Enter total income from line 14, c	olumn	Α	1	7		3	37875 <sub>00</sub>	Г				
18.	Divide line 16 by line 17 (if line 16	eater tha	n line 17, enter 100%)					8.	3.6	%			
19.	If both spouses are part-year or n here and on MI-1040, line 15. If of	one sp	ouse is	a full-year resident,	complete	Wo	rksheet 6	and enter		176			
	here and on MI-1040, line 15							1	9.	1/0	100		