

# IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.  
▶ Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name BALAKRISHNA KUNTURI	Social security number 010-79-9764
Spouse's name	Spouse's social security number

## Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter year you are authorizing.)

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	56,715.
2	Total tax	2	5,248.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	8,034.
4	Amount you want refunded to you	4	2,786.
5	Amount you owe	5	

## Part II 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 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.

### Taxpayer's PIN: check one box only

I authorize GLOBAL TAXES LLC to enter or generate my PIN 9 9 7 6 4 as my signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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 ▶ Balakrishna.k Date ▶ 02/20/2023

### Spouse's PIN: check one box only

I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. 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 ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

## 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. 2 2 2 4 9 6 6 1 9 8 9  
Don't enter all zeros

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 Form – See Instructions  
Don't Submit This Form to the IRS Unless Requested To Do So**

Filing Status [X] Single [ ] Married filing jointly [ ] Married filing separately (MFS) [ ] Head of household (HOH) [ ] Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Personal information section including name, social security number, and address.

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [ ] Yes [X] No

Standard Deduction Someone can claim: [ ] You as a dependent [ ] Your spouse as a dependent [ ] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [ ] Were born before January 2, 1958 [ ] Are blind Spouse: [ ] Was born before January 2, 1958 [ ] Is blind

Table for Dependents with columns for name, social security number, relationship, and tax credits.

Income section table with rows 1a through 1z and columns for description and amount.

Table for Tax-exempt interest, Qualified dividends, IRA distributions, Pensions and annuities, Social security benefits.

Table for Capital gain or loss, Other income from Schedule 1, Adjustments to income, Subtract line 10 from line 9, Standard deduction or itemized deductions, Qualified business income deduction, Add lines 12 and 13, Subtract line 14 from line 11.

<b>Tax and Credits</b>	<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	<b>16</b>	5,248.
	<b>17</b>	Amount from Schedule 2, line 3	<b>17</b>	
	<b>18</b>	Add lines 16 and 17	<b>18</b>	5,248.
	<b>19</b>	Child tax credit or credit for other dependents from Schedule 8812	<b>19</b>	
	<b>20</b>	Amount from Schedule 3, line 8	<b>20</b>	
	<b>21</b>	Add lines 19 and 20	<b>21</b>	
	<b>22</b>	Subtract line 21 from line 18. If zero or less, enter -0-	<b>22</b>	5,248.
	<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line 21	<b>23</b>	0.
	<b>24</b>	Add lines 22 and 23. This is your <b>total tax</b>	<b>24</b>	5,248.

<b>Payments</b>	<b>25</b>	Federal income tax withheld from:		
	<b>a</b>	Form(s) W-2	<b>25a</b>	8,034.
	<b>b</b>	Form(s) 1099	<b>25b</b>	
	<b>c</b>	Other forms (see instructions)	<b>25c</b>	
	<b>d</b>	Add lines 25a through 25c	<b>25d</b>	8,034.
	<b>26</b>	2022 estimated tax payments and amount applied from 2021 return	<b>26</b>	
	<b>27</b>	Earned income credit (EIC)	<b>27</b>	
	<b>28</b>	Additional child tax credit from Schedule 8812	<b>28</b>	
	<b>29</b>	American opportunity credit from Form 8863, line 8	<b>29</b>	
	<b>30</b>	Reserved for future use	<b>30</b>	
	<b>31</b>	Amount from Schedule 3, line 15	<b>31</b>	
	<b>32</b>	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	<b>32</b>	
	<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b>	<b>33</b>	8,034.

<b>Refund</b>	<b>34</b>	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b>	2,786.
	<b>35a</b>	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>35a</b>	2,786.
	<b>b</b>	Routing number 1 2 1 0 0 0 3 5 8 <b>c</b> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	<b>d</b>	Account number 3 2 5 0 6 8 6 5 2 6 6 7		
	<b>36</b>	Amount of line 34 you want <b>applied to your 2023 estimated tax</b>	<b>36</b>	

<b>Amount You Owe</b>	<b>37</b>	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions	<b>37</b>	
	<b>38</b>	Estimated tax penalty (see instructions)	<b>38</b>	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS? See instructions  **Yes**. Complete below.  **No**

Designee's name \_\_\_\_\_ Phone no. \_\_\_\_\_ Personal identification number (PIN) \_\_\_\_\_

**Sign Here** 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 complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature _____	Date _____	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____
Spouse's signature. If a joint return, <b>both</b> must sign. _____	Date _____	Spouse's occupation _____	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) _____
Phone no. (203) 727-0906	Email address BALA.KUNTURI@GMAIL.COM		

**Paid Preparer Use Only**

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 02/08/2023	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816		Phone no. (678) 965-9522	Firm's EIN 84-3171965

**SCHEDULE 1  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2022**  
Attachment  
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR  
BALAKRISHNA KUNTURI

Your social security number  
010-79-9764

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .		<b>1</b>	
<b>2a</b>	Alimony received . . . . .		<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions): _____			
<b>3</b>	Business income or (loss). Attach Schedule C . . . . .		<b>3</b>	
<b>4</b>	Other gains or (losses). Attach Form 4797 . . . . .		<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . . . .		<b>5</b>	-6,942.
<b>6</b>	Farm income or (loss). Attach Schedule F . . . . .		<b>6</b>	
<b>7</b>	Unemployment compensation . . . . .		<b>7</b>	
<b>8</b>	Other income:			
<b>a</b>	Net operating loss . . . . .	<b>8a</b> ( )		
<b>b</b>	Gambling . . . . .	<b>8b</b>		
<b>c</b>	Cancellation of debt . . . . .	<b>8c</b>		
<b>d</b>	Foreign earned income exclusion from Form 2555 . . . . .	<b>8d</b> ( )		
<b>e</b>	Income from Form 8853 . . . . .	<b>8e</b>		
<b>f</b>	Income from Form 8889 . . . . .	<b>8f</b>		
<b>g</b>	Alaska Permanent Fund dividends . . . . .	<b>8g</b>		
<b>h</b>	Jury duty pay . . . . .	<b>8h</b>		
<b>i</b>	Prizes and awards . . . . .	<b>8i</b>		
<b>j</b>	Activity not engaged in for profit income . . . . .	<b>8j</b>		
<b>k</b>	Stock options . . . . .	<b>8k</b>		
<b>l</b>	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property . . . . .	<b>8l</b>		
<b>m</b>	Olympic and Paralympic medals and USOC prize money (see instructions) . . . . .	<b>8m</b>		
<b>n</b>	Section 951(a) inclusion (see instructions) . . . . .	<b>8n</b>		
<b>o</b>	Section 951A(a) inclusion (see instructions) . . . . .	<b>8o</b>		
<b>p</b>	Section 461(l) excess business loss adjustment . . . . .	<b>8p</b>		
<b>q</b>	Taxable distributions from an ABL account (see instructions) . . . . .	<b>8q</b>		
<b>r</b>	Scholarship and fellowship grants not reported on Form W-2 . . . . .	<b>8r</b>		
<b>s</b>	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d . . . . .	<b>8s</b> ( )		
<b>t</b>	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan . . . . .	<b>8t</b>		
<b>u</b>	Wages earned while incarcerated . . . . .	<b>8u</b>		
<b>z</b>	Other income. List type and amount: _____	<b>8z</b>		
<b>9</b>	Total other income. Add lines 8a through 8z . . . . .		<b>9</b>	
<b>10</b>	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		<b>10</b>	-6,942.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

**Part II Adjustments to Income**

<b>11</b>	Educator expenses . . . . .		<b>11</b>	
<b>12</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .		<b>12</b>	
<b>13</b>	Health savings account deduction. Attach Form 8889 . . . . .		<b>13</b>	
<b>14</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .		<b>14</b>	
<b>15</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .		<b>15</b>	
<b>16</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .		<b>16</b>	
<b>17</b>	Self-employed health insurance deduction . . . . .		<b>17</b>	
<b>18</b>	Penalty on early withdrawal of savings . . . . .		<b>18</b>	
<b>19a</b>	Alimony paid . . . . .		<b>19a</b>	
<b>b</b>	Recipient's SSN . . . . .			
<b>c</b>	Date of original divorce or separation agreement (see instructions): _____			
<b>20</b>	IRA deduction . . . . .		<b>20</b>	
<b>21</b>	Student loan interest deduction . . . . .		<b>21</b>	
<b>22</b>	Reserved for future use . . . . .		<b>22</b>	
<b>23</b>	Archer MSA deduction . . . . .		<b>23</b>	
<b>24</b>	Other adjustments:			
<b>a</b>	Jury duty pay (see instructions) . . . . .	<b>24a</b>		
<b>b</b>	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit . . . . .	<b>24b</b>		
<b>c</b>	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m . . . . .	<b>24c</b>		
<b>d</b>	Reforestation amortization and expenses . . . . .	<b>24d</b>		
<b>e</b>	Repayment of supplemental unemployment benefits under the Trade Act of 1974 . . . . .	<b>24e</b>		
<b>f</b>	Contributions to section 501(c)(18)(D) pension plans . . . . .	<b>24f</b>		
<b>g</b>	Contributions by certain chaplains to section 403(b) plans . . . . .	<b>24g</b>		
<b>h</b>	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) . . . . .	<b>24h</b>		
<b>i</b>	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations . . . . .	<b>24i</b>		
<b>j</b>	Housing deduction from Form 2555 . . . . .	<b>24j</b>		
<b>k</b>	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) . . . . .	<b>24k</b>		
<b>z</b>	Other adjustments. List type and amount: _____	<b>24z</b>		
<b>25</b>	Total other adjustments. Add lines 24a through 24z . . . . .		<b>25</b>	
<b>26</b>	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a . . . . .		<b>26</b>	

**SCHEDULE E  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.  
Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

OMB No. 1545-0074

**2022**  
Attachment  
Sequence No. **13**

Name(s) shown on return

BALAKRISHNA KUNTURI

Your social security number

010-79-9764

**Part I Income or Loss From Rental Real Estate and Royalties**

**Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

- A** Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . .  Yes  No  
**B** If "Yes," did you or will you file required Form(s) 1099? . . . . .  Yes  No

**1a** Physical address of each property (street, city, state, ZIP code)

**A** H:NO.2-109,BALARAJPALY JULAPALLY,KARIMNAGAR TELANGANA IN 505525

**B**  
**C**

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days	QJV
		A	B	C	
<b>A</b> 3		365		0	<input type="checkbox"/>
<b>B</b>					<input type="checkbox"/>
<b>C</b>					<input type="checkbox"/>

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental  
 2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe) \_\_\_\_\_

Income:		Properties:		
		A	B	C
<b>3</b>	Rents received . . . . .	3	632.	
<b>4</b>	Royalties received . . . . .	4		
<b>Expenses:</b>				
<b>5</b>	Advertising . . . . .	5		
<b>6</b>	Auto and travel (see instructions) . . . . .	6		
<b>7</b>	Cleaning and maintenance . . . . .	7	1,331.	
<b>8</b>	Commissions . . . . .	8		
<b>9</b>	Insurance . . . . .	9		
<b>10</b>	Legal and other professional fees . . . . .	10		
<b>11</b>	Management fees . . . . .	11	1,140.	
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	12		
<b>13</b>	Other interest . . . . .	13		
<b>14</b>	Repairs . . . . .	14	2,205.	
<b>15</b>	Supplies . . . . .	15	1,627.	
<b>16</b>	Taxes . . . . .	16		
<b>17</b>	Utilities . . . . .	17	1,271.	
<b>18</b>	Depreciation expense or depletion . . . . .	18		
<b>19</b>	Other (list) _____	19		
<b>20</b>	Total expenses. Add lines 5 through 19 . . . . .	20	7,574.	
<b>21</b>	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .	21	-6,942.	
<b>22</b>	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .	22	( 6,942. )	( )
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties . . . . .	23a	632.	
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties . . . . .	23b		
<b>c</b>	Total of all amounts reported on line 12 for all properties . . . . .	23c		
<b>d</b>	Total of all amounts reported on line 18 for all properties . . . . .	23d		
<b>e</b>	Total of all amounts reported on line 20 for all properties . . . . .	23e	7,574.	
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .	24		
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	25	( 6,942. )	
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . . . . .	26		-6,942.

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-6,942.

Schedule E (Form 1040) 2022



MISSOURI DEPARTMENT OF REVENUE

REV 01/20/23 PRO

2022 Individual Income Tax Payment Voucher (Form MO-1040V)

Please print. Make check payable to Missouri Department of Revenue. Mail Form MO-1040V and payment to the Missouri Department of Revenue, P.O. Box 371, Jefferson City, MO 65105-0371.

Name		
BALAKRISHNA KUNTURI		
Spouse's Name		
Street Address		
24710 E WOODSIDE CT		
City	State	ZIP Code
FARMINGTON HILLS	MI	48335
Full payment of taxes must be submitted by April 18, 2023 to avoid interest and additions to tax for failure to pay. If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically.		
1555 (12-2022)		

Social Security Number 010 - 79 - 9764

Name Control KUNT

Spouse's Social Security Number

Spouse's Name Control

Amount of Payment (U.S. funds only) \$ 18.00



22347011555

Department Use Only

Department Use Only

055 555 000000 0107997644 112114202 0000000000 22 000001800 0



MISSOURI DEPARTMENT OF  
**REVENUE**  
2022 Individual Income  
Tax Return - Long Form



For Calendar Year January 1 - December 31, 2022

Print in BLACK ink only and DO NOT STAPLE.

**Amended Return**     **Composite Return**  
(For use by S corporations or Partnerships)

**Federal Extension** - Select this box if you have an approved federal extension. Attach a copy Federal Extension (Form 4868).

If filing a fiscal year return enter the beginning and ending dates here.

Fiscal Year Beginning (MM/DD/YY)		Fiscal Year Ending (MM/DD/YY)		Vendor Code	Department Use Only		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	1555	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Filing Status**

Single     Claimed as a Dependent     Married Filing Combined     Married Filing Separately     Head of Household     Qualifying Widow(er)

Age 62 through 64	Age 65 or Older	Blind	100% Disabled	Non-Obligated Spouse
Yourself <input type="checkbox"/> Spouse <input type="checkbox"/>	Yourself <input type="checkbox"/> Spouse <input type="checkbox"/>	Yourself <input type="checkbox"/> Spouse <input type="checkbox"/>	Yourself <input type="checkbox"/> Spouse <input type="checkbox"/>	Yourself <input type="checkbox"/> Spouse <input type="checkbox"/>

**Name**

Social Security Number:  010 -  79 -  9764    Deceased in 2022:     Spouse's Social Security Number:  -  -     Deceased in 2022:

First Name:  BALAKRISHNA    M.I.:     Last Name:  KUNTURI    Suffix:

Spouse's First Name:     M.I.:     Spouse's Last Name:     Suffix:

In Care Of Name (Attorney, Executor, Personal Representative, etc.):

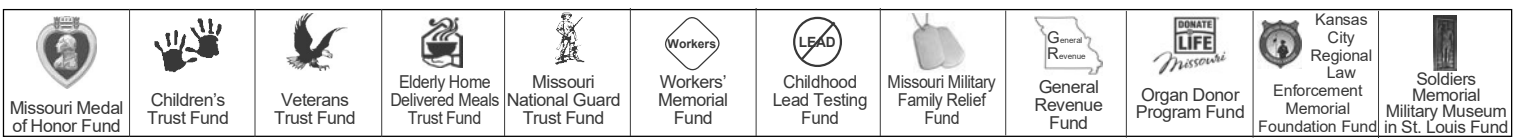
**Address**

Present Address (Include Apartment Number or Rural Route):  24710 E WOODSIDE CT

City, Town, or Post Office:  FARMINGTON HILLS    State:  MI    ZIP Code:  48335 -

County of Residence:  NONR

You may contribute to any one or all of the trust funds on Line 50. See pages 11-12 of the instructions for more trust fund information.





Income

	Yourself (Y)		Spouse (S)		
1. Federal adjusted gross income from federal return (see worksheet on page 7 of the instructions) . . . . .	1Y	56715	.00	1S	.00
2. Total additions (from <b>Form MO-A</b> , Part 1, Line 7) . . . . .	2Y		.00	2S	.00
3. Total income - Add Lines 1 and 2. . . . .	3Y	56715	.00	3S	.00
4. Total subtractions (from Form MO-A, Part 1, Line 18) . . . . .	4Y		.00	4S	.00
5. Missouri adjusted gross income - Subtract Line 4 from Line 3. . . . .	5Y	56715	.00	5S	.00
6. Total Missouri adjusted gross income - Add columns 5Y and 5S . . . . .	6	56715	.00		
7. Income percentages - Divide columns 5Y and 5S by total on Line 6. (Must equal 100%) . . . . .	7Y	100	%	7S	%

Exemptions and Deductions

8. Pension, Social Security and Social Security Disability exemption (from Form MO-A, Part 3, Section D) . . . . .	8		.00		
9. Tax from federal return . . . . .	9	5248	.00		
10. Other tax from federal return. . . . .	10		.00		
11. Total tax from federal return. Do not enter federal income tax withheld. . . . .	11	5248	.00		
12. Federal tax percentage – Enter the percentage based on your Missouri Adjusted Gross Income, Line 6. Use the chart below to find your percentage . . . . .	12	15.00	%		

Missouri Adjusted Gross Income Range, Line 6:      Federal Tax Percentage:

\$25,000 or less . . . . .	35%
\$25,001 to \$50,000 . . . . .	25%
\$50,001 to \$100,000 . . . . .	15%
\$100,001 to \$125,000 . . . . .	5%
\$125,001 or more . . . . .	0%

13. Federal income tax deduction – Multiply Line 11 by the percentage on Line 12. Enter this amount not to exceed \$5,000 for an individual or \$10,000 for combined filers. . . . .	13	787	.00		
14. Missouri standard deduction or itemized deductions. (If itemizing, See Form MO-A, Part 2) • Single or Married Filing Separate-\$12,950      • Head of Household-\$19,400 • Married Filing Combined or Qualifying Widow(er)-\$25,900 . . . . .	14	12950	.00		
15. Additional Exemption for Head of Household and Qualified Widow(er) . . . . .	15		.00		
16. Long-term care insurance deduction . . . . .	16		.00		
17. Health care sharing ministry deduction. . . . .	17		.00		
18. Active Duty Military income deduction . . . . .	18		.00		
19. Inactive Duty Military income deduction . . . . .	19		.00		
20. Bring jobs home deduction . . . . .	20		.00		
21. Transportation facilities deduction . . . . .	21		.00		

A. Port Cargo Expansion     B. International Trade Facility     C. Qualified Trade Activities



Deductions Continued

22. First time home buyers deduction.	A. <input type="text"/>	B. <input type="text"/>	22	<input type="text"/>	<input type="text"/>
23. Long term dignity savings account deduction . . . . .			23	<input type="text"/>	<input type="text"/>
24. Foster parent tax deduction . . . . .			24	<input type="text"/>	<input type="text"/>
25. Total deductions - Add Lines 8 and 13 through 24 . . . . .			25	13737	<input type="text"/>
26. Subtotal - Subtract Line 25 from Line 6 . . . . .			26	42978	<input type="text"/>
27. Multiply Line 26 by appropriate percentages (%) on Lines 7Y and 7S . . . . .	27Y	42978	<input type="text"/>	00	27S <input type="text"/>
28. Enterprise zone or rural empowerment zone income modification . . . . .	28Y	<input type="text"/>	<input type="text"/>	00	28S <input type="text"/>

Tax

29. Taxable income - Subtract Line 28 from Line 27 . . . . .	29Y	42978	<input type="text"/>	00	29S <input type="text"/>
30. Tax (see tax chart on page 26 of the instructions). . . . .	30Y	2094	<input type="text"/>	00	30S <input type="text"/>
31. Resident credit - Attach <b>Form MO-CR</b> and other states' income tax return(s). . . . .	31Y	<input type="text"/>	<input type="text"/>	00	31S <input type="text"/>
32. Missouri income percentage - Enter 100% unless you are completing <b>Form MO-NRI</b> . Attach Form MO-NRI and a copy of your federal return if less than 100% . . . . .	32Y	100	%		32S <input type="text"/>
33. Balance - Subtract Line 31 from Line 30; OR multiply Line 30 by percentage on Line 32 . . . . .	33Y	2094	<input type="text"/>	00	33S <input type="text"/>
34. Other taxes - Select box and attach federal form indicated.					
<input type="checkbox"/> Lump sum distribution ( <b>Form 4972</b> )					
<input type="checkbox"/> Recapture of low income housing credit ( <b>Form 8611</b> )	34Y	<input type="text"/>	<input type="text"/>	00	34S <input type="text"/>
35. Subtotal - Add Lines 33 and 34 . . . . .	35Y	2094	<input type="text"/>	00	35S <input type="text"/>
36. Total Tax - Add Lines 35Y and 35S . . . . .			36	2094	<input type="text"/>

Payments and Credits

37. MISSOURI tax withheld - Attach Forms W-2 and 1099. . . . .	37	2076	<input type="text"/>	00
38. 2022 Missouri estimated tax payments - Include overpayment from 2021 applied to 2022 . . . . .	38	<input type="text"/>	<input type="text"/>	00
39. Missouri tax payments for nonresident partners or S corporation shareholders - Attach Forms <b>MO-2NR</b> and <b>MO-NRP</b> . . . . .	39	<input type="text"/>	<input type="text"/>	00
40. Missouri tax payments for nonresident entertainers - Attach <b>Form MO-2ENT</b> . . . . .	40	<input type="text"/>	<input type="text"/>	00
41. Amount paid with Missouri extension of time to file ( <b>Form MO-60</b> ). . . . .	41	<input type="text"/>	<input type="text"/>	00
42. Miscellaneous tax credits (from <b>Form MO-TC</b> , Line 13) - Attach Form MO-TC . . . . .	42	<input type="text"/>	<input type="text"/>	00
43. Property tax credit - Attach <b>Form MO-PTS</b> . . . . .	43	<input type="text"/>	<input type="text"/>	00
44. Total payments and credits - Add Lines 37 through 43 . . . . .	44	2076	<input type="text"/>	00



**Skip Lines 45 through 47 if you are not filing an amended return.**

45. Amount paid on original return. . . . . 45  .00

46. Overpayment as shown (or adjusted) on original return . . . . . 46  .00

**Indicate Reason for Amending**

Amended Return

A. Federal audit. . . . .           
 Enter date of IRS report (MM/DD/YY)

B. Net Operating Loss carryback . . . . .     
 Enter year of loss (YY)

C. Investment tax credit carryback . . . . .     
 Enter year of credit (YY)

D. Correction other than A, B, or C. . . . .           
 Enter date of federal amended return, if filed. (MM/DD/YY)

47. Amended return total payments and credits - Add Lines 44 and 45; subtract Line 46. Enter on Line 47. . . . . 47  .00

48. If Line 44, or if amended return, Line 47, is larger than Line 36, enter the difference. Amount of OVERPAYMENT . . . . . 48  .00

49. Amount of Line 48 to be applied to your 2023 estimated tax . . . . . 49  .00

50. Enter the amount of your donation in the trust fund boxes below. See instructions for additional trust fund codes.

Refund

50a. Children's Trust Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50b. Veterans Trust Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50c. Elderly Home Delivered Meals Trust Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50d. Missouri National Guard Trust Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>
50e. Workers' Memorial Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50f. Childhood Lead Testing Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50g. Missouri Military Family Relief Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50h. General Revenue Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>
50i. Organ Donor Program Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50j. Kansas City Regional Law Enforcement Memorial Foundation Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50k. Soldiers Memorial Military Museum in St. Louis Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50l. Missouri Medal of Honor Fund <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>
50m. Additional Fund Code <span style="border: 1px solid black; padding: 2px;">  </span> Additional Fund Amount <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>	50n. Additional Fund Code <span style="border: 1px solid black; padding: 2px;">  </span> Additional Fund Amount <span style="border: 1px solid black; padding: 2px;">  </span> <span style="border: 1px solid black; padding: 2px;">.00</span>		

Total Donation - Add amounts from Boxes 50a through 50n and enter here . . . . . 50  .00

51. Amount of Line 48 to be deposited into a Missouri 529 Education Plan (MOST) account. Enter the total deposit amount from **Form 5632**. . . . . 51  .00

52. **REFUND** - Subtract Lines 49, 50, and 51 from Line 48 and enter here . . . . . 52  .00

a. Routing Number  c.  Checking  Savings

b. Account Number



Amount Due

53. If Line 36 is larger than Line 44 or Line 47, enter the difference.  
 Amount of UNDERPAYMENT . . . . . 53 18 .00

54. Underpayment of estimated tax penalty - Attach **Form MO-2210**. Enter penalty amount here . . . 54 .00

Select this box if you are a farmer exempt from the underpayment of estimated tax penalty.

55. **AMOUNT DUE** - Add Lines 53 and 54.  
 If you pay by check, you authorize the Department of Revenue to process the check electronically. Any returned check may be presented again electronically . . . . . 55 18 .00

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. By signing or entering my name in the "Signature" field(s) below, I am providing the Department of Revenue with my signature as required under **Section 143.561, RSMo**. Declaration of preparer (other than taxpayer) is based on all information of which he or she has knowledge. As provided in **Chapter 143, RSMo**, a penalty of up to \$500 shall be imposed on any individual who files a frivolous return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit, or abatement if I employ such aliens. I am aware of any applicable reporting requirements of **Section 135.805, RSMo**, and the penalty provisions of **Section 135.810, RSMo**.

Signature

Signature	Date (MM/DD/YY)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse's Signature (If filing combined, BOTH must sign)	Date (MM/DD/YY)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-mail Address	Daytime Telephone		
SYAM@GTAXFILE.COM	2037270906		
Preparer's Signature	Date (MM/DD/YY)		
SYAM PRIYA RAM SAGAR GUPTA TALLAM	02	08	23
Preparer's FEIN, SSN, or PTIN	Preparer's Telephone		
84-3171965	6789659522		
Preparer's Address	State	ZIP Code	
245 ROONEY CT E BRUNSWICK	NJ	08816	

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm . . . . .  Yes  No

Did you pay a tax return preparer to complete your return, but the preparer failed to sign the return or provide an Internal Revenue Service preparer tax identification number? If you marked yes, please insert the preparer's name, address, and phone number in the applicable sections of the signature block above. . . . .  Yes  No



22322051555

**Department Use Only**

A  FA  E10  DE  F  .

Form MO-1040 (Revised 12-2022)

**Mail to: Balance Due:**  
 Missouri Department of Revenue  
 P.O. Box 3370  
 Jefferson City, MO 65105-3370  
**Phone:** (573) 751-7200

**Refund or No Amount Due:**  
 Missouri Department of Revenue  
 P.O. Box 3222  
 Jefferson City, MO 65105-3222  
**Phone:** (573) 751-3505

**Fax:** (573) 522-1762  
**Email:** [incometaxprocessing@dor.mo.gov](mailto:incometaxprocessing@dor.mo.gov)  
**Submission of Individual Income Tax Returns**  
**Email:** [income@dor.mo.gov](mailto:income@dor.mo.gov)  
**Inquiry and correspondence**

**Ever served on active duty in the United States Armed Forces?**  
 If yes, visit [dor.mo.gov/military/](http://dor.mo.gov/military/) to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found at [veteranbenefits.mo.gov/state-benefits/](http://veteranbenefits.mo.gov/state-benefits/).



IN  
 REV 01/20/23 PRO  
 MO-1040 Page 5



**Resident/Nonresident Status - Select your status in the appropriate box below.**

Social Security Number

-  -

Name

Address

City, State, ZIP Code

1. Nonresident of Missouri  
State of residence during 2022 MICHIGAN

Remote Work (See instructions on Form MO-NRI, page 3)

2. Part-Year Missouri Resident

Remote Work (See instructions on Form MO-NRI, page 3)

Indicate the dates you were a Missouri Resident in 2022.

A. Date From: \_\_\_\_\_ Date To: \_\_\_\_\_

B. Indicate the other state of residence and dates you resided there \_\_\_\_\_

Date From: \_\_\_\_\_ Date To: \_\_\_\_\_

Spouse's Social Security Number

-  -

Spouse's Name

Address

City, State, ZIP Code

1. Nonresident of Missouri  
State of residence during 2022 \_\_\_\_\_

Remote Work (See instructions on Form MO-NRI, page 3)

2. Part-Year Missouri Resident

Remote Work (See instructions on Form MO-NRI, page 3)

Indicate the dates you were a Missouri Resident in 2022.

A. Date From: \_\_\_\_\_ Date To: \_\_\_\_\_

B. Indicate the other state of residence and dates you resided there \_\_\_\_\_

Date From: \_\_\_\_\_ Date To: \_\_\_\_\_

Part A

Based on the **Military Spouse's Residency Relief Act**, if you are the spouse of a military servicemember residing outside of Missouri solely because your spouse is there on military orders, and Missouri is your state of residence, any income you earn is taxable to Missouri. **Do not complete Form MO-NRI.** You must report 100% on Line 32 of Form MO-1040.

3. Military/Nonresident Tax Status - Indicate your tax status below and complete Part C - Missouri Income Percentage.

Missouri Home of Record  
I did not at any time during the tax year 2022 maintain a permanent place of abode in Missouri, nor did I spend more than 30 days in Missouri during the year. I did maintain a permanent place of abode in the state of \_\_\_\_\_.

Non-Missouri Home of Record  
I resided in Missouri during 2022 solely because my spouse or I was stationed at \_\_\_\_\_ on military orders. My home of record is in the state of \_\_\_\_\_.

3. Military/Nonresident Tax Status - Indicate your tax status below and complete Part C - Missouri Income Percentage.

Missouri Home of Record  
I did not at any time during the tax year 2022 maintain a permanent place of abode in Missouri, nor did I spend more than 30 days in Missouri during the year. I did maintain a permanent place of abode in the state of \_\_\_\_\_.

Non-Missouri Home of Record  
I resided in Missouri during 2022 solely because my spouse or I was stationed at \_\_\_\_\_ on military orders. My home of record is in the state of \_\_\_\_\_.

**Worksheet for Missouri Source Income**

Part B

Adjusted Gross Income Computations	Federal Form 1040 or Federal Form 1040-SR Line No.	Yourself or One Income Filer		Spouse (On A Combined Return)			
		Missouri Sources		Missouri Sources			
A. Wages, salaries, tips, etc. . . . .	1z	A	63657	00	A		00
B. Taxable interest income. . . . .	2b	B		00	B		00
C. Dividend income . . . . .	3b	C		00	C		00
D. State and local income tax refunds (from schedule 1, part 1) . . . . .	1	D		00	D		00
E. Alimony received (from schedule 1, part 1) . . . . .	2a	E		00	E		00
F. Business income or (loss) (from schedule 1, part 1) . . . . .	3	F		00	F		00
G. Capital gain or (loss) . . . . .	7	G		00	G		00
H. Other gains or (losses) (from schedule 1, part 1) . . . . .	4	H		00	H		00
I. Taxable IRA distributions . . . . .	4b	I		00	I		00
J. Taxable pensions and annuities . . . . .	5b	J		00	J		00
K. Rents, royalties, partnerships, S corporations, etc. (from schedule 1, part 1) . . . . .	5	K	0	00	K		00
L. Farm income or (loss) (from schedule 1, part 1) . . . . .	6	L		00	L		00
M. Unemployment compensation (from schedule 1, part 1) . . . . .	7	M		00	M		00
N. Taxable social security benefits . . . . .	6b	N		00	N		00
O. Other income (from schedule 1, part 1) . . . . .	9	O		00	O		00
P. Total - Add Lines A through O . . . . .		P	63657	00	P		00
Q. Minus: federal adjustments to income . . . . .	10	Q		00	Q		00
R. SUBTOTAL (Line P - Line Q) If no modifications to income, enter this amount on Part C, Line 1. . . . .	11	R	63657	00	R		00
S. Missouri modifications - additions to federal adjusted gross income (Missouri source from Form MO-1040, Line 2) . . . . .		S		00	S		00
T. Missouri modifications - subtractions from federal adjusted gross income (Missouri source from Form MO-1040, Line 4) . . . . .		T		00	T		00
U. MISSOURI INCOME (Missouri sources) Line R plus Line S, minus Line T. Enter this amount on Part C, Line 1. . . . .		U		00	U		00

**Missouri Income Percentage**

Part C

	Yourself or One Income Filer		Spouse (On A Combined Return)			
1. <b>Missouri Income</b> - Enter wages, salaries, etc. from Missouri. (You must file a Missouri return if the amount on this line is more than \$600) . . . . .	1Y	63657	00	1S		00
2. Taxpayer's total adjusted gross income (from Form MO-1040, Lines 5Y and 5S or from your federal form if you are a military nonresident and you are not required to file a Missouri return) . . . . .	2Y	56715	00	2S		00
3. <b>Missouri Income Percentage</b> - Divide Line 1 by Line 2. If greater than 100%, enter 100%. (Round to a whole percent such as 91% instead of 90.5% and 90% instead of 90.4%. However, if percentage is less than 0.5%, use the exact percentage.) Enter percentage here and on Form MO-1040, Lines 32Y and 32S . . . . .	3Y	100	%	3S		%

Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge and believe it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any individual who files a frivolous return.

Signature

Signature	Date (MM/DD/YY)
<input type="text"/>	<input type="text"/>
Spouse's Signature (if filing combined, BOTH must sign)	Date (MM/DD/YY)
<input type="text"/>	<input type="text"/>

**Ever served on active duty in the United States Armed Forces?**

If yes, visit [dor.mo.gov/military/](http://dor.mo.gov/military/) to see the services and benefits we offer to all eligible military individuals. A list of all state agency resources and benefits can be found [veteranbenefits.mo.gov/state-benefits/](http://veteranbenefits.mo.gov/state-benefits/).

## 2023 MI-1040ES, Michigan Estimated Income Tax for Individuals

### Important Information

If you are married and plan to file your annual return as “married filing separately,” DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

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

### Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2023 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2023 withholding to be at least:

- 90 percent of your total 2023 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2022 tax, or
- 110 percent of your total 2022 tax if your 2022 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

**Do not submit this form for any quarter that you do not have estimated tax due.**

### Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2023. You may also pay in equal installments due on or before April 18, 2023, June 15, 2023, September 15, 2023, and January 16, 2024.

**NOTE: You will not receive reminder notices; save this set of forms for all of your 2023 payments.**

### How to Pay Estimated Tax

#### e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. 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. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit [www.michigan.gov/it](http://www.michigan.gov/it) for more information.

#### Mail Your Payment

If you choose to mail your payment, make your check payable to “State of Michigan.” Print the last four digits of your SSN and “2023 MI-1040ES” on the check. If paying on behalf of another filer, write the filer’s name and the last four digits of the filer’s SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

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

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

### 2023 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher

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

Due Date for Calendar Year Filers  
 04-18-2023

Filer's Name(s) BALAKRISHNA KUNTURI	Filer's Full Social Security Number 010-79-9764	Spouse's Full Social Security Number
Address (Street, City, State, ZIP Code) 24710 E WOODSIDE CT FARMINGTON HILLS MI 48335	<b>WRITE PAYMENT AMOUNT HERE</b>	
	\$	133 .00
	<b>MAIL TO:</b> Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Enclose check payable to “ <b>State of Michigan.</b> ” Write last four digits of filer’s <b>SSN</b> and “ <b>2023 MI-1040ES</b> ” on the front of your check. Do not fold or staple.

DO NOT WRITE IN THIS SPACE

# 2023 MI-1040ES, Michigan Estimated Income Tax for Individuals

## Important Information

If you are married and plan to file your annual return as “married filing separately,” DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

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

## Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2023 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2023 withholding to be at least:

- 90 percent of your total 2023 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2022 tax, or
- 110 percent of your total 2022 tax if your 2022 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

**Do not submit this form for any quarter that you do not have estimated tax due.**

## Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2023. You may also pay in equal installments due on or before April 18, 2023, June 15, 2023, September 15, 2023, and January 16, 2024.

**NOTE: You will not receive reminder notices; save this set of forms for all of your 2023 payments.**

## How to Pay Estimated Tax

### e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. 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. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit [www.michigan.gov/it](http://www.michigan.gov/it) for more information.

### Mail Your Payment

If you choose to mail your payment, make your check payable to “State of Michigan.” Print the last four digits of your SSN and “2023 MI-1040ES” on the check. If paying on behalf of another filer, write the filer’s name and the last four digits of the filer’s SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

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

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

## 2023 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher

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

Due Date for Calendar Year Filers  
 06-15-2023

Filer's Name(s) BALAKRISHNA KUNTURI	Filer's Full Social Security Number 010-79-9764	Spouse's Full Social Security Number
Address (Street, City, State, ZIP Code) 24710 E WOODSIDE CT FARMINGTON HILLS MI 48335		<p><b>WRITE PAYMENT AMOUNT HERE</b>      \$      133 .00</p> <p><b>MAIL TO:</b>                  Michigan Department of Treasury                  P.O. Box 30774                  Lansing, MI 48909</p> <p>Enclose check payable to “<b>State of Michigan.</b>” Write last four digits of filer’s <b>SSN</b> and “<b>2023 MI-1040ES</b>” on the front of your check. Do not fold or staple.</p>

DO NOT WRITE IN THIS SPACE



# 2023 MI-1040ES, Michigan Estimated Income Tax for Individuals

## Important Information

If you are married and plan to file your annual return as “married filing separately,” DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

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

## Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2023 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2023 withholding to be at least:

- 90 percent of your total 2023 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2022 tax, or
- 110 percent of your total 2022 tax if your 2022 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

**Do not submit this form for any quarter that you do not have estimated tax due.**

## Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2023. You may also pay in equal installments due on or before April 18, 2023, June 15, 2023, September 15, 2023, and January 16, 2024.

**NOTE: You will not receive reminder notices; save this set of forms for all of your 2023 payments.**

## How to Pay Estimated Tax

### e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. 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. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit [www.michigan.gov/it](http://www.michigan.gov/it) for more information.

### Mail Your Payment

If you choose to mail your payment, make your check payable to “State of Michigan.” Print the last four digits of your SSN and “2023 MI-1040ES” on the check. If paying on behalf of another filer, write the filer’s name and the last four digits of the filer’s SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

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

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

## 2023 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher

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

Due Date for Calendar Year Filers  
 09-15-2023

Filer's Name(s) BALAKRISHNA KUNTURI	Filer's Full Social Security Number 010-79-9764	Spouse's Full Social Security Number
Address (Street, City, State, ZIP Code) 24710 E WOODSIDE CT FARMINGTON HILLS MI 48335		<p><b>WRITE PAYMENT AMOUNT HERE</b>      \$      133 .00</p> <p><b>MAIL TO:</b>                  Michigan Department of Treasury                  P.O. Box 30774                  Lansing, MI 48909</p> <p>Enclose check payable to “<b>State of Michigan.</b>” Write last four digits of filer’s <b>SSN</b> and “<b>2023 MI-1040ES</b>” on the front of your check. Do not fold or staple.</p>

DO NOT WRITE IN THIS SPACE

# 2023 MI-1040ES, Michigan Estimated Income Tax for Individuals

## Important Information

If you are married and plan to file your annual return as “married filing separately,” DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

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

## Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2023 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2023 withholding to be at least:

- 90 percent of your total 2023 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2022 tax, or
- 110 percent of your total 2022 tax if your 2022 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

**Do not submit this form for any quarter that you do not have estimated tax due.**

## Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2023. You may also pay in equal installments due on or before April 18, 2023, June 15, 2023, September 15, 2023, and January 16, 2024.

**NOTE: You will not receive reminder notices; save this set of forms for all of your 2023 payments.**

## How to Pay Estimated Tax

### e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. 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. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit [www.michigan.gov/it](http://www.michigan.gov/it) for more information.

### Mail Your Payment

If you choose to mail your payment, make your check payable to “State of Michigan.” Print the last four digits of your SSN and “2023 MI-1040ES” on the check. If paying on behalf of another filer, write the filer’s name and the last four digits of the filer’s SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

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

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

## 2023 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher

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

Due Date for Calendar Year Filers  
 01-16-2024

Filer's Name(s) BALAKRISHNA KUNTURI	Filer's Full Social Security Number 010-79-9764	Spouse's Full Social Security Number
Address (Street, City, State, ZIP Code) 24710 E WOODSIDE CT FARMINGTON HILLS MI 48335		<b>WRITE PAYMENT AMOUNT HERE</b> \$      133 .00  <b>MAIL TO:</b> Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909  Enclose check payable to “ <b>State of Michigan.</b> ” Write last four digits of filer’s <b>SSN</b> and “ <b>202 MI-1040ES</b> ” on the front of your check. Do not fold or staple.

DO NOT WRITE IN THIS SPACE

# Instructions for Form MI-1040-V

## 2022 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 34.

Your payment and MI-1040-V are due April 18, 2023. 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](http://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](http://www.michigan.gov/iit) for more information.

### Mailing Instructions

- Make your check payable to the **“State of Michigan.”** Print **“2022 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](http://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. 03-22)

## 2022 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 01/21/23 PRO

Filer's Name(s) (First, Middle Initial, Last) and Home Address (Street, City, State, ZIP Code)  BALAKRISHNA KUNTURI  24710 E WOODSIDE CT FARMINGTON HILLS MI 48335	Filer's Full Social Security Number 010-79-9764	Spouse's Full Social Security Number  668 .00
	<b>WRITE PAYMENT AMOUNT HERE</b> ➡      \$	
	<b>MAIL TO:</b> Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Make check payable to <b>“State of Michigan.”</b> Write the last four digits of filer's <b>Social Security number</b> and <b>“2022 MI-1040-V”</b> on the check. Do not fold or staple.

DO NOT WRITE IN THIS SPACE

1555

75857884 02 2022 00000000 010799764 1

# 2022 MICHIGAN Individual Income Tax Return MI-1040

**Amended Return**   
(Include Schedule AMD)

**Return is due April 18, 2023.** Type or print in blue or black ink.

1. Filer's First Name <b>BALAKRISHNA</b>		M.I.	Last Name <b>KUNTURI</b>		2. Filer's Full Social Security No. (Example: 123-45-6789)  <b>010 — 79 — 9764</b>	
If a Joint Return, Spouse's First Name		M.I.	Last Name		3. Spouse's Full Social Security No. (Example: 123-45-6789)  — —	
Home Address (Number, Street, or P.O. Box) <b>24710 E WOODSIDE CT</b>					4. School District Code (5 digits – see page 60) <b>63200</b>	
City or Town <b>FARMINGTON HILLS</b>			State <b>MI</b>	ZIP Code <b>48335</b>		
5. <b>STATE CAMPAIGN FUND</b> Check if you (and/or your spouse, if filing a joint return) want \$3 of your taxes to go to this fund. This will not increase your tax or reduce your refund. a. <input type="checkbox"/> Filer b. <input type="checkbox"/> Spouse				6. <b>FARMERS, FISHERMEN, OR SEAFARERS</b>  <input type="checkbox"/> Check this box if 2/3 of your income is from farming, fishing, or seafaring.		
7. <b>2022 FILING STATUS.</b> Check one. a. <input checked="" type="checkbox"/> Single b. <input type="checkbox"/> Married filing jointly c. <input type="checkbox"/> Married filing separately*  * If you check box "c," complete line 3 and enter spouse's full name below: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>				8. <b>2022 RESIDENCY STATUS.</b> Check all that apply. a. <input checked="" type="checkbox"/> Resident b. <input type="checkbox"/> Nonresident * c. <input type="checkbox"/> Part-Year Resident *  * If you check box "b" or "c," you must complete and include Schedule NR.		

9. **EXEMPTIONS. NOTE:** If someone else can claim you as a dependent, check box 9e, enter 0 on line 9a and enter \$1,500 on line 9e (see instr.).

a. Number of exemptions (see instructions).....	9a.	1	x \$5,000	9a.	5000	00
b. Number of individuals who qualify for one of the following special exemptions: deaf, blind, hemiplegic, paraplegic, quadriplegic, or totally and permanently disabled.....	9b.		x \$2,900	9b.		00
c. Number of qualified disabled veterans.....	9c.		x \$400	9c.		00
d. Number of Certificates of Stillbirth from MDHHS (see instructions).....	9d.		x \$5,000	9d.		00
e. Claimed as dependent, see line 9 NOTE above.....	9e.	<input type="checkbox"/>		9e.		00
f. Add lines 9a, 9b, 9c, 9d and 9e. Enter here and on line 15.....	9f.			9f.	5000	00

10. <b>Adjusted Gross Income</b> from your U.S. Form 1040 (see instructions).....	10.	56715	00
11. Additions from Schedule 1, line 9. <b>Include Schedule 1</b> .....	11.		00
12. <b>Total.</b> Add lines 10 and 11.....	12.	56715	00
13. Subtractions from Schedule 1, line 30. <b>Include Schedule 1</b> .....	13.		00
14. <b>Income subject to tax.</b> Subtract line 13 from line 12. If line 13 is greater than line 12, enter "0".....	14.	56715	00
15. <b>Exemption allowance.</b> Enter amount from line 9f or Schedule NR, line 19.....	15.	5000	00
16. <b>Taxable income.</b> Subtract line 15 from line 14. If line 15 is greater than line 14, enter "0".....	16.	51715	00
17. <b>Tax.</b> Multiply line 16 by 4.25% (0.0425).....	17.	2198	00

**NON-REFUNDABLE CREDITS**

	AMOUNT	CREDIT				
18. Income Tax Imposed by government units outside Michigan. Include a copy of the return (see instructions).....	18a. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: right;">2094</td><td style="text-align: right;">00</td></tr></table>	2094	00	18b. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: right;">1666</td><td style="text-align: right;">00</td></tr></table>	1666	00
2094	00					
1666	00					
19. Michigan Historic Preservation Tax Credit (see instructions).....	19a. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td style="text-align: right;">00</td></tr></table>		00	19b. <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td></td><td style="text-align: right;">00</td></tr></table>		00
	00					
	00					
20. <b>Income Tax.</b> Subtract the sum of lines 18b and 19b from line 17. If the sum of lines 18b and 19b is greater than line 17, enter "0".....	20.	532 00				

Filer's Full Social Security Number

010 — 79 — 9764

21. Enter amount of Income Tax from line 20.....	21.	532	00
22. Voluntary Contributions from Form 4642, line 6. <b>Include Form 4642</b> .....	22.		00
23. <b>USE TAX.</b> Use tax due on Internet, mail order or other out-of-state purchases from Worksheet 1 (see instructions).....	23.	0	00
<b>24. Total Tax Liability.</b> Add lines 21, 22 and 23 .....	24.	532	00

**REFUNDABLE CREDITS AND PAYMENTS**

25. <b>Property Tax Credit.</b> Include MI-1040CR or MI-1040CR-2 .....	25.		00
26. <b>Farmland Preservation Tax Credit.</b> Include MI-1040CR-5 .....	26.		00
27. Earned Income Tax Credit. Multiply line 27a by 6% (0.06) and enter result on line 27b. ....	27a.		00
28. Michigan Historic Preservation Tax Credit (refundable). <b>Include Form 3581</b> .....	28.		00
29. Credit for allocated share of tax paid by an electing flow-through entity (see instructions).....	29.		00
30. Michigan tax withheld from Schedule W, line 6. <b>Include Schedule W (do not submit W-2s)</b> .....	30.		00
31. Estimated tax, extension payments and 2021 credit forward .....	31.		00
32. <b>2022 AMENDED RETURNS ONLY.</b> Taxpayers completing an original 2022 return should skip to line 33. Amended returns must <b>include Schedule AMD (see instructions)</b> .			
32a. <input type="checkbox"/> If you had a refund and/or credit forward on the original return, check box 32a and enter this amount as a negative number on line 32c.			
32b. <input type="checkbox"/> If you paid with the original return, check box 32b and enter the amount paid with the original return, plus any additional tax paid after filing, as a positive number on line 32c. Do not include interest or penalty.	32c.		00
33. Total refundable credits and payments. Add lines 25, 26, 27b, 28, 29, 30, 31 and 32c .....	33.		00

**REFUND OR TAX DUE**

34. If line 33 is less than line 24, subtract line 33 from line 24. If applicable, see instructions.			
Include interest <input type="text" value="16"/> <input type="text" value="00"/> and penalty <input type="text" value="120"/> <input type="text" value="00"/> .....	<b>YOU OWE</b>	34.	668 00
35. <b>Overpayment.</b> If line 33 is greater than line 24, subtract line 24 from line 33 .....	35.		00
36. <b>Credit Forward.</b> Amount of line 35 to be credited to your 2023 estimated tax for your 2023 tax return ...	36.		00
37. Subtract line 36 from line 35 .....	<b>REFUND</b>	37.	00

**DIRECT DEPOSIT**

Deposit your refund directly to your financial institution! See instructions and complete a, b and c.

<b>a. Routing Transit Number</b>	<b>b. Account Number</b>	<b>c. Type of Account</b>
		1. <input type="checkbox"/> Checking 2. <input type="checkbox"/> Savings

**Deceased Taxpayer.** If Filer and/or Spouse died after December 31, 2021, enter dates below. **ENTER DATE OF DEATH ONLY.** Example: 04-15-2022 (MM-DD-YYYY)

Filer	<input type="text" value="-"/> <input type="text" value="-"/>	Spouse	<input type="text" value="-"/> <input type="text" value="-"/>
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**Preparer Certification.** I declare under penalty of perjury that this return is based on all information of which I have any knowledge.

Preparer's PTIN, FEIN or SSN  
P02082703

**Taxpayer Certification.** I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.

Filer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

Preparer's Name (print or type)  
SYAM PRIYA RAM SAGAR GUPTA TA

Preparer's Signature  
SYAM PRIYA RAM SAGAR GUPTA TA

Preparer's Business Name, Address and Telephone Number  
GLOBAL TAXES LLC  
245 ROONEY CT  
E BRUNSWICK NJ 08816  
678-965-9522

By checking this box, I authorize Treasury to discuss my return with my preparer.

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

# 2022 MICHIGAN Underpayment of Estimated Income Tax MI-2210

Include with Form MI-1040 or MI-1041. Round all money items to whole dollars. Type or print in blue or black ink.

1. For calendar year 2022 or taxable year beginning:  and ending:

**Attachment 12**

2. Filer's Name Shown on Tax Return <b>BALAKRISHNA KUNTURI</b>	3. Identifying Number <b>010-79-9764</b>
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## PART 1: ESTIMATED TAX REQUIRED FOR THE YEAR

4. Enter 2021 tax. Subtract the sum of MI-1040 lines 25, 26, 27b, 28 and 29 from line 21 (see instructions).....	4.	<b>530</b>	
5. Enter 2022 tax. Subtract the sum of MI-1040 lines 25, 26, 27b, 28 and 29 from line 21 (Fiduciaries, see instructions). ....	5.	<b>532</b>	
6. Multiply amount on line 5 by 90% (0.9). ....	6.	<b>479</b>	<b>00</b>
7. Enter the smaller of lines 4 or 6.....	7.	<b>479</b>	<b>00</b>
8. <input type="checkbox"/> Check this box if you use the annualized income installment method. If your income varied during the year, this method may reduce the amount of one or more required installments.			

PAYMENT DUE DATES		A	B	C	D
<i>NOTE: Complete lines 10 through 21 one column at a time.</i>		April 18, 2022	June 15, 2022	Sept. 15, 2022	Jan. 17, 2023
9.	Divide the amount on line 7 by four. Enter in each column. <b>CAUTION: If annualizing, enter amount from Worksheet line 16.</b>	<b>119</b>	<b>120</b>	<b>120</b>	<b>120</b>
10.	<b>Estimated tax paid and withheld.</b> (For column A only, enter amount from line 10 on line 14.)				
11.	Enter amount, if any, from line 17 of the previous column.				
12.	Add lines 10 and 11.				
13.	Add lines 15 and 16 of the previous column and enter the result here.		<b>119</b>	<b>239</b>	<b>359</b>
14.	Subtract line 13 from line 12. If less than zero, enter "0" (For column A only, enter the amount from line 10.)		<b>0</b>	<b>0</b>	<b>0</b>
15.	Remaining underpayment from previous period. If amount on line 14 is zero, subtract line 12 from line 13 and enter result here. Otherwise, go to line 16.		<b>119</b>	<b>239</b>	<b>359</b>
16.	<b>UNDERPAYMENT.</b> If line 9 is greater than or equal to line 14, subtract line 14 from line 9 and enter the result here. Then go to line 10 of the next column. Otherwise, go to line 17.	<b>119</b>	<b>120</b>	<b>120</b>	<b>120</b>
17.	<b>OVERPAYMENT.</b> If line 14 is greater than line 9, subtract line 9 from line 14 and enter here. Then go to line 10 of next column.				

## PART 2: FIGURING THE INTEREST

18.	Underpayment from line 16.	<b>119</b>	<b>120</b>	<b>120</b>	<b>120</b>
19.	a. Rate Period 1: 4.25%. April 18, 2022 - June 30, 2022 Computation starting date for this period:	<b>April 18, 2022</b>	<b>June 15, 2022</b>		
	b. Number of days from date on line 19a to the date line 18 was paid or June 30, 2022, whichever is earlier. If June 30 is earlier, enter 73 and 15 respectively.				
	c. $0.0001164 \times$ days on line 19b $\times$ underpayment on line 18.				
20.	a. Rate Period 2: 4.27%. July 1, 2022 - Dec. 31, 2022 Computation starting date for this period:	<b>June 30, 2022</b>	<b>June 30, 2022</b>	<b>Sept. 15, 2022</b>	
	b. Number of days from date on line 20a to the date line 18 was paid or Dec. 31, 2022, whichever is earlier. If Dec. 31 is earlier, enter 184, 184 and 107 respectively.				
	c. $0.0001170 \times$ days on line 20b $\times$ underpayment on line 18.				

Identifying Number

010-79-9764

21.	a. Rate Period 3: 5.65%. Jan. 1, 2023 - June 30, 2023 Computation starting date for this period:	Dec. 31, 2022	Dec. 31, 2022	Dec. 31, 2022	Jan. 17, 2023
	b. Number of days from date on line 21a to the date line 18 was paid or April 18, 2023, whichever is earlier. If April 18 is earlier, enter 108, 108, 108 and 91 respectively.				
	c. $0.0001548 \times \text{days on line 21b} \times \text{underpayment on line 18}$ .				
22.	<b>TOTAL INTEREST.</b> Add amounts on lines 19c, 20c and 21c in all columns. Enter the total interest here and on the appropriate line on your MI-1040 or MI-1041 ..... SEE STMT.....				16 00

**PART 3: FIGURING THE PENALTY**

		A April 18, 2022		B June 15, 2022		C Sept. 15, 2022		D Jan. 17, 2023	
23.	Underpayment (see instructions).....	119	00	120	00	120	00	120	00
24.	Enter 25% (0.25) or 10% (0.10) (see instructions)	25	%	25	%	25	%	25	%
25.	Multiply amount on line 23 by line 24. ....	30	00	30	00	30	00	30	0
26.	<b>TOTAL PENALTY.</b> Add line 25, columns A through D. Enter the total penalty here and on the appropriate line on your MI-1040 or MI-1041 .....								120 00
27.	Add lines 22 and 26. This is your total penalty and interest to be added to your tax due. ....								136 00

This form computes penalty and interest for estimate vouchers to the date of payment or April 18, 2023, whichever is earlier. Additional penalty and interest for late filing accrues on your annual return from April 18 to the date of payment.

**ANNUALIZED INCOME WORKSHEET**

Complete one column at a time. Line numbers refer to this Worksheet unless another form is listed.

**Estates and trusts:** Use the following period ending dates: 2/28/22, 4/30/22, 7/31/22 and 11/30/22.

Do not use the dates in the column headings below.

		A First 3 months 1-1 to 3-31-22	B First 5 months 1-1 to 5-31-22	C First 8 months 1-1 to 8-31-22	D 12 months 1-1 to 12-31-22
1.	Enter total income subject to tax (reported on 2022 MI-1040, line 14) that is attributable to each period in the corresponding column .....				
2.	Annualization amounts (Fiduciaries, see instructions) .....	4	2.4	1.5	
3.	<b>Annualized total income.</b> Multiply line 1 by line 2.....				
4.	Enter total exemption allowance (MI-1040, line 15) .....				
5.	Subtract line 4 from line 3.....				
6.	Multiply line 5 by 2022 tax rate 4.25% (0.0425) .....				
7.	Enter the sum of your 2022 MI-1040 credits from lines 18b, 19b, 25, 26, 27b, 28 and 29 in each column .....				
8.	Tax after credits. Subtract line 7 from line 6 (if less than zero, enter "0").....				
9.	Multiply line 8 by 22.5% (1st period), 45% (2nd period), 67.5% (3rd period) and 90% (4th period). Enter the results in each column .....	(line 8 x 22.5%)	(line 8 x 45%)	(line 8 x 67.5%)	(line 8 x 90%)
10.	Enter combined amounts from line 16 of all previous columns .....				
11.	Subtract line 10 from line 9 (if less than zero, enter "0").....				
12.	Required quarterly payment. Divide the amount on MI-2210, line 7, page 1, by four and enter the result in each column ...				
13.	Enter the amount from line 15 of the previous column .....				
14.	Add lines 12 and 13.....				
15.	Subtract line 11 from line 14 (if less than zero, enter "0").....				
16.	<b>Required installments.</b> Enter the smaller of lines 14 or 11 here and on MI-2210, line 9, page 1.....				

Name as Shown on Return <u>BALAKRISHNA KUNTURI</u>	Social Security Number <u>010-79-9764</u>
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- **QuickZoom** to another copy of this worksheet . . . . . ➔
- **Part-year residents:** You can claim this credit only when your income from another state was earned while you were a Michigan resident.
- Jurisdiction code . . . . . ► MO  
Jurisdiction name . . . . . Missouri

<b>1</b>	Income earned in another state or locality subject to Michigan tax . . . . .	<b>1</b>	<u>42,978.</u>
<b>2</b>	Enter the amount from Form MI-1040, line 14. . . . .	<b>2</b>	<u>56,715.</u>
<b>3</b>	Divide line 1 by line 2 . . . . .	<b>3</b>	<u>0.7578</u>
<b>4</b>	Enter the amount from Form MI-1040, line 17. . . . .	<b>4</b>	<u>2,198.</u>
<b>5</b>	Multiply line 4 by line 3 . . . . .	<b>5</b>	<u>1,666.</u>
<b>6</b>	Enter the amount of tax imposed by another state or locality . . . . .	<b>6</b>	<u>2,094.</u>
<b>7</b>	Credit. Enter line 6 or the smaller of line 5 or line 6 . . . . .	<b>7</b>	<u>1,666.</u>



## Additional Information From 2022 Michigan Tax Return

### Form 2210: Underpayment Penalty Underpayment Statement

### Explanation Statement

Line 23							
Event	Date	Amount Due	Amount Paid	Running Balance	Percent	# of Days	Penalty
Amount Due	04/18/22	119		119	4.25	58	0.80
Amount Due	06/15/22	120		239	4.25	15	0.42
Rate Change	06/30/22			239	4.27	77	2.15
Amount Due	09/15/22	120		359	4.27	107	4.49
Rate Change	12/31/22			359	5.65	17	0.94
Amount Due	01/17/23	120		479	5.65	91	6.75
Date Filed	04/18/23			479	5.65		
<b>Total</b>							15.55