E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly Use the checked the MFS box, enter the non is a child but not your dependen	ame of y	d filing separately (Nour spouse. If you c								
Your first name and middle initial			Last nar	Last name						Your social security number		
ANITHA				KESIREDDY					700-67-1129			
If joint return, s	pouse's	first name and middle initial	Last nar	ne				Sį	Spouse's social security number			
				HIRIGIRI					955-91-2348			
Home address	(numbe	r and street). If you have a P.O. box, see	ns.	Apt. no.	Pi	reside	tial Election Campaign					
98 HOYT	STR	EET					5K			nere if you,		
City, town, or post office. If you have a foreign address, also complete s				e spaces below. State		Z	IP code			9.	tly, want \$3 Checking a	
STAMFORD				CT			06905		ow will not			
Foreign country name				Foreign province/state/county For				code yo	your tax or refund. You Spouse			
At any time du	ring 20	020, did you receive, sell, send, exc	hange, o	r otherwise acquire	any financia	al interest	in any virtua	al curre	ncy?	Yes	X No	
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur				ndent						
Age/Blindness	You:	☐ Were born before January 2, 1	956	Are blind Spo	ouse: 🔲 V	Vas born	before Janu	ary 2, 1	956	☐ Is bli	ind	
Dependents	s (see	instructions):		(2) Social security	(3) Re	elationship	(4)	if quali	fies for	r (see instru	ctions):	
If more		rst name Last name		number to you			Child	tax cred	it	Credit for oth	her dependents	
than four	SWA	RAJ REDDY CHIRIGIRI		955-91-2384 Son						[X	
dependents, see instructions	s ——									[
and check										[<u> </u>	
here ▶										[
	1	Wages, salaries, tips, etc. Attach I	orm(s) V	V-2					1	2	22,633.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a		b Taxable	interest			2b			
	3a	Qualified dividends 3a b Ordinary dividends						3b				
	4a	IRA distributions	4a		b Taxable	amount .			4b			
	5a	Pensions and annuities	5a		b Taxable	amount .			5b			
Standard Deduction for— Single or Married filing separately, \$12,400	6a	Social security benefits	6a		b Taxable	amount .		· <u>·</u>	6b			
	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ired, check	here .		▶ □	7			
	8	Other income from Schedule 1, lin	e9						8			
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total inco	ome			. ▶	9	2	22,633.	
Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions.	10	Adjustments to income:										
	а	From Schedule 1, line 22										
	b	Charitable contributions if you take	the stan	dard deduction. See	instructions	10b						
	С	Add lines 10a and 10b. These are	your tota	al adjustments to i	ncome .			. ▶	100	_		
	11	Subtract line 10c from line 9. This	is your a	djusted gross inco	me			. ▶	11	2	22,633.	
	12	Standard deduction or itemized	deducti	ons (from Schedule	A)				12		24,800.	
	13	Qualified business income deduction. Attach Form 8995 or Form 8995-A										
	14	Add lines 12 and 13							14		24,800.	
	15	Taxable income. Subtract line 14	from line	e 11. If zero or less,	enter -0				15		0.	

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

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	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	0.					
	17	Amount from Schedule 2, line 3	17						
	18	Add lines 16 and 17	18	0.					
	19	Child tax credit or credit for other dependents	19	0.					
	20	Amount from Schedule 3, line 7	20						
	21	Add lines 19 and 20	21	0.					
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	0.					
	23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.					
	24	Add lines 22 and 23. This is your total tax	24	0.					
	25	Federal income tax withheld from:							
	а	Form(s) W-2							
	b	Form(s) 1099							
	С	Other forms (see instructions)							
	d	Add lines 25a through 25c	25d	3,473.					
If you have a qualifying child, attach Sch. EIC. If you have	26	2020 estimated tax payments and amount applied from 2019 return	26						
	27	Earned income credit (EIC)							
	28	Additional child tax credit. Attach Schedule 8812							
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8							
see instructions.	30	Recovery rebate credit. See instructions							
	31	Amount from Schedule 3, line 13							
	32	Add lines 27 through 31. These are your total other payments and refundable credits	32						
	33	Add lines 25d, 26, and 32. These are your total payments	33	3,473.					
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,473.					
Horana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here >	35a	3,473.					
Direct deposit? See instructions.	►b	Routing number 1 2 5 0 0 0 2 4 ► c Type: X Checking Savings							
	►d	Account number 1 3 8 1 1 7 0 1 4 5 3 4							
	36	Amount of line 34 you want applied to your 2021 estimated tax ► 36							
Amount	37	Subtract line 33 from line 24. This is the amount you owe now	37						
You Owe For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all of the taxes you owe for							
how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.							
instructions.	38	Estimated tax penalty (see instructions)							
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	alow	× No					
Designee		signee's Phone Personal identifi							
		me ► no. ► number (PIN) ►							
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to							
Here		ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which		, ,					
	Yo			t you an Identity N, enter it here					
Joint return?			nst.) ▶ [
See instructions.	Sp		IRS sen	t your spouse an					
Keep a copy for your records.				ction PIN, enter it here					
your records.		HOMEMAKER (see i	nst.) ►						
		one no. Email address		0					
Paid Preparer Use Only		eparer's name Preparer's signature Date PTIN		Check if:					
		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/19/2021 P02082		Self-employed					
				678)965-9522					
			s EIN 🕨						
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 03/13/21 PRO		Form 1040 (2020)					