ξ¶	1	0	Department of the Treasury-Internal Revenue Service	(99)
Ē		U4U	Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Retu	urn

2021

OMB No. 1545-007

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

Home address (number and street). If you have a P.O. box, see instructions. 10803 FOUNTAIN GROVE DRIVE City, town, or post office. If you have a foreign address, also complete spaces below. CHARLOTTE Foreign country name Foreign province/state/county Foreign province/state	Filing Status Check only one box.	If yo	Single Married filing jointly checked the MFS box, enter the non is a child but not your dependent	ame of y	ed filing separately (Novour spouse. If you c								
If joint return, spouse's first name and middle initial. Last name	Your first name and middle initial				ne					Your social security number			
Home address (number and streed). If you have a P.O. box, see instructions. 10803 FOUNTAIN GROVE DRIVE City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code Social security Foreign postal code You Spouse if filling jointly, want \$3 to go to fills fund. Checkhory You Spouse filling jointly, want \$3 to go to fills fund. Checkhory You Spouse country name Foreign province/state/country Foreign postal code You Spouse have a foreign address, also complete spaces below. State ZIP code NC 28 2 6 2 ZiP code You Spouse country name Foreign province/state/country Foreign postal code You Spouse have been been contained a post below will not change You Spouse as a dependent Your spouse as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes on a separate return or you were a dual-status allern Spouse itemizes (see instructions): If more If mo	GMVVR PHANI KUMAR				ULA			_		386-67-4880			
City, town, or post office. If you have a foreign address, also complete spaces below. CHARLOTTE Foreign country name Foreign country name Foreign province/state/county Foreign postal code Yes No Standard Deduction Standard Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1957 Are blind Spouse itemizes on a separate return or you were a dual-status alien Dependents (see instructions): (I) First name Last name Last name Last name Attach Sch. B if required. Attach Sch. B if required. Attach Age/Blinded dividends San Qualified dividends San Qualified dividends San Attach Capital gain or (loss), Attach Schedule D if required; if not required, these here Deduction for Capital gain or (loss), Attach Schedule D if required. If not required, these here 10 Adjustments to income from Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 26 Child tax credit Capital gain or (loss), Attach Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 10 Capital gain or (loss), Attach Schedule 1, line 26 Charlotter or ther dependents in the required of the charled deduction (see instructions) 12 Standard deduction or itemized deduction (see instructions) 13 Qualified business income deduction from Form 8995-A 14 Add lines 12a and 12b 15 Capital gain or (loss), Attach Schedule 1, line 26 Capital gain or (loss), Attach Schedule 1, line 26 Capital gain or (loss), Attach Schedule 1, line 26 Capital gain or (loss), Attach Schedule 1, line 26 Capital gain or (loss), Attach Schedule 1, line 26 Capital gain or (loss), Attach Schedule A) Lag a 12,550. Lag a 12,	If joint return, s	oouse's	first name and middle initial	Last nar	me		F			Spouse's social security number			
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CHARLOTTE NC 28262 box below will not change Foreign province/state/county Foreign postal code victor change your tax or refund. You Spouse Standard Someone can claim: You as a dependent Your spouse as a dependent Your spouse as a dependent Spouse: Was born before January 2, 1957 Is blind Dependents Spouse: Was born before January 2, 1957 Is blind Dependents (4) V if qualifies for (see instructions): (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (1) First name Last name number (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (3) Social security (4) V if qualifies for (see instructions): (5) Social security (4) V if qualifies for (see instructions): (4) V if qualifies for (see instructions): (5) Social security (6) V if qualifies for (see instructions): (7) Social security (8) Relationship (9) V if qualifies for (see instructions): (1) First name Last name (1) First name Last name (1) Social security (1) Social security (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (1) First name Last name (1) Social security (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (2) Social security (3) Relationship (4) V if qualifies for (see instructions): (3) Relationship (4) V if qualifies for (see instructions): (5) Social security (6) V if qualifies for (see instructions): (6) V if qualifies for (see instructions): (6) V if qualifies for (see instructions): (6) V if qualifies for				mnlete sr	naces helow	State		7IP	code	spouse if filing jointly, want \$3			
Foreign country name Foreign province/state/county Foreign postal code You Spouse You Spouse At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No Standard Someone can claim: You as a dependent Your spouse as a dependent Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1957 Are blind Spouse: Was born before January 2, 1957 Is blind Dependents (see instructions): (2) Social security (3) Relationship (4) If qualifies for (see instructions): If more (1) First name Last nam			oc. II you have a foloigh address, also so	miploto opadoo bolom				00000					
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? \[\text{Yes} \] \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \									_				
Standard Deduction Someone can claim: You as a dependent Your spouse as a dependent Sopouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1957 Are blind Spouse: Was born before January 2, 1957 Is blind Dependents (see instructions): (2) Social security (3) Relationship to you Child tax credit Credit for other dependents (4) in qualifies for (see instructions): Child tax credit Credit for other dependents (4) in qualifies for (see instructions): Child tax credit Credit for other dependents (5)		rianie		Poreign province/state/county				i oreigii postai code					
Age/Blindness You: Were born before January 2, 1957 Are blind Spouse: Was born before January 2, 1957 Is blind Dependents (see instructions): (2) Social security number to you Child tax credit Credit for other dependents four dependents, see instructions and check here	At any time du	ring 20	21, did you receive, sell, exchange,	or other	wise dispose of any	finan	cial interest i	in an	y virtual curre	ncy?	Yes	⊠ No	
Age/Blindness You: Were born before January 2, 1957 Are blind Spouse: Was born before January 2, 1957 Is blind Dependents (see instructions): (2) Social security to you Child tax credit Credit for other dependents than four dependents, see instructions and check here Image:	Standard	Som	neone can claim: You as a dependent Your spouse as a dependent										
Dependents (see instructions): If more than four dependents, see instructions and check here ▶ □ Attach Sch. B if required. Standard Bandard Form Standard Form Schedule 1, line 10 Separately, \$12,550 Head of household, \$15,500 Head of household, \$15,000 If more (1) First name Last name (2) Social security (3) Relationship to you (2) Child tax credit (2) Credit for other dependents (2) Credit for oth	Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
If more than four dependents see instructions and check here ► 1	Age/Blindness	You:	Were born before January 2, 1	957	Are blind Spo	use:	☐ Was bo	rn be	fore January 2	2, 1957	☐ Is b	lind	
If more than four dependents, see instructions and check here ▶ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Dependents	s (see i	nstructions):	1			(3) Relationsh		nip (4) √ if qu		r (see instru	ictions):	
than four dependents, see instructions and check here Tax-exempt interest	If more	(1) Fi	rst name Last name			to you		Child tax cr		credit Credit for other dependen			
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and check here ▶ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	dependents,												
Attach Sch. B if required. 1 Wages, salaries, tips, etc. Attach Form(s) W-2 2a Tax-exempt interest . 2a b Taxable interest . 2b Sch. B if required. 2a Qualified dividends . 3a b Ordinary dividends . 3b IRA distributions . 4a b Taxable amount		S ——											
Attach Sch. Bif required. 2a Tax-exempt interest	here ▶ □												
Attach Sch. Bif required. 2a Tax-exempt interest		1	Wages salaries tips etc Attach F	orm(s) V	V-2			ļ		1	<u> </u>	84.509	
Sch. B if required. 3a Qualified dividends	Attach		· ·	1		h Tox	· · · ·					01/003.	
A	Sch. B if		· ·							. –			
5a Pensions and annuities 5a b Taxable amount	required.									•			
Standard Deduction for Deduction for Single or Married filing separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 If you checked any box under Standard Deduction, \$25,000 If you checked any box under Standard Deduction, \$25,000 Deduction for Capital gain or (loss). Attach Schedule D if required. If not required, check here To Ada b Taxable amount Deficiency or less enter -0- 6a Social security benefits . 6a b Taxable amount													
Peduction for—Single or Married filing separately, \$12,550													
Single or Married filing separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 If you checked any box under Standard Peduction, Peduction, Peduction, Peduction, Peduction, Peduction, Peduction, Page Add lines 12c and 13 Taxable income. Subtract line 10 in required. If not required, check nere 7 -3,000. 8 Other income from Schedule 1, line 10								τ.		_		0.000	
separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 If you checked any box under Standard Peduction, Peduction, Peduction, Peduction, Peduction, Peduction, Paduction, 15 Married filing jointly or Qualifying widow(er), \$12,550 and Adjustments to income from Schedule 1, line 26 Subtract line 10 from line 9. This is your adjusted gross income 10 To Adjustments to income from Schedule 1, line 26 11 Subtract line 10 from line 9. This is your adjusted gross income 11 To Adjustments to income from Schedule 1, line 26 11 Subtract line 10 from line 9. This is your adjusted gross income 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 12 To Adjustments to income from Schedule 1, line 26 11 To Adjustments to income from Schedule 1, line 26 12 To Adjustments to income from Schedule A) 12 To Adjustments to income from Sched	• Single or				required. It not requ	iired, d	check here	•	• \				
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jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 If you checked any box under Standard Peduction, \$25 and \$20 and \$12 and \$13 and \$14 and		9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						9		76 , 359.			
Qualifying widow(er), \$25,100 12a Standard deduction or itemized deductions (from Schedule A) 12a 12a 12,550 Head of household, \$18,800 c Add lines 12a and 12b 12a 12b 300 If you checked any box under Standard Peduction, Deduction, Deduction, 1 14 12a 12,550 13 14 15 15 15 15 16 you checked 1 (any box under Standard Peduction) 15 16 you checked 1 (any box under Standard Peduction) 15 15 16 you checked 1 (any box under Standard Peduction) 15 15 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 16 you checked 1 (any box under Standard Peduction) 17 you checked 1 (any box under Standard Peduction) 18 you checked 1 (any box under Standard Peduction) 18 you checked 1 (any box under Standard Peduction) 18 you checked 1 (any box under Standard Peduction) 18 you checked 1 (any box under Standard Peduction) 18 you checked 1 (any box under Standard	Married filing iointly or	10	Adjustments to income from Sche	dule 1, li	ne 26					. 10			
second of household, \$18,800	Qualifying	Subtract line 10 from line 9. This is your adjusted gross income								76 , 359.			
b Charitable contributions if you take the standard deduction (see instructions) c Add lines 12a and 12b		12a	Standard deduction or itemized deductions (from Schedule A) 12a 12, 550.										
\$18,800	Head of	b	Charitable contributions if you take	the stan	dard deduction (see	instruc	ctions) 12	b	30	0.			
13 Qualified business income deduction from Form 8995 or Form 8995-A		С	Add lines 12a and 12b							. 12	С	12,850.	
Standard 14 Add lines 12c and 13 1	If you checked	13	Qualified business income deducti	on from	Form 8995 or Form	8995-	-A			. 13			
Deduction, 15 Taxable income. Subtract line 14 from line 11 If zero or less enter -0-		14	Add lines 12c and 13									12 , 850.	
	Deduction,									. 15			

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

Form **1040** (2021)

DO NOT FILE

Form 1040 (202	1)									Pag	e ∠
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	9,724	
	17	Amount from Schedule 2, lin	e3						17		
	18	Add lines 16 and 17							18	9,724	
	19	Nonrefundable child tax cred	dit or credit for o	ther depender	nts from Schedul	e 8812 .			19		
	20	Amount from Schedule 3, lin							20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	•						22	9,724	
	23	Other taxes, including self-e	from Schedule	e 2, line 21 .				2 3			
	24	Add lines 22 and 23. This is							24	9,724	•
	25										
	а	Form(s) W-2				25a	11,	/13.	-		
	b	Form(s) 1099				25b					
	С	Other forms (see instructions				25c				44 540	
	d	Add lines 25a through 25c							25d	11,713	<u>•</u>
If you have a	26	2021 estimated tax payment			Nο				26		—
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a					
)		Check here if you were to January 2, 2004, and you taxpayers who are at least a	satisfy all the	e other requi	rements for						
	b	Nontaxable combat pay elec	_	1 1	_						
	С	Prior year (2019) earned inco									
	28	Refundable child tax credit or			Schedule 8812	28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Recovery rebate credit. See	instructions .			30					
	31	Amount from Schedule 3, lin	e 15			31					
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundab	le credits	s ►	32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. ▶	33	11,713	
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amou	ınt you ove	rpaid		34	1,989	
110101110	35a	Amount of line 34 you want			is attached, che	ck here .		▶ 🔲	35a	1,989	•
Direct deposit?	▶b	Routing number 1 1 1			► c Type:	Checking	Sa	vings			
See instructions.	▶d	Account number 3 1 2									
	36	Amount of line 34 you want a				36					
Amount You Owe	37 38	Amount you owe. Subtract Estimated tax penalty (see in				see instruc	tions		37		
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?					_	
Designee	ins	structions				. ▶ ∐`	Yes. Com	plete be	elow.	× No	
	Designee's name ▶						al identific (PIN) ►	cation [\neg	
Sign	Un	der penalties of perjury, I declare tief, they are true, correct, and com		ed this return and			statements	, and to t			
Here		ur signature		Date	Your occupation					it you an Identity	,
	rour signature			Date	τουι οσσαρατίοιτ					N, enter it here	
Joint return?		pouse's signature. If a joint return, both must sign.		IT ENGINEER Date Spouse's occupation		ER		(see in	nst.) ▶		
See instructions. Keep a copy for your records.	Sp					tion	Ide			at your spouse an ection PIN, enter it h	iere
	Ph	one no. (425) 516-125	9	Email address	GMVVRPHAN	тасматт	. COM	1.	· [
		eparer's name	Preparer's signat		OLIV VIXI IIAIN	Date		TIN		Check if:	_
Paid								02472	867	Self-employed	d
Preparer	Firm's name ► GLOBAL TAXES LLC			HWARI BOYINI 01/12/2022 Po					678) 965-952		
Use Only				n Cummin	g GA 30041			Firm's EIN ► 30-1017196			
	Firm's address ▶ 2530 Pebble Creek In Cumming GA 30041							1 11111 3			

Go to www.irs.gov/Form1040 for instructions and the latest information.

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Form **1040** (2021)

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