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

2021

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space

Filing Status Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶											
Your first name and middle initial Last name			me	e				Your social security number			
VIKRAM MAC			MACH	IARLA					089-85-0889		
If joint return, s	oouse's	first name and middle initial	Last nar	me					Spouse	's social se	curity number
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.				Apt. no.	Preside	ntial Election	on Campaign
									Check here if you, or your		
City, town or nost office. If you have a foreign address, also complete spaces below. State 7/P code								spouse if filing jointly, want \$3 to go to this fund. Checking a			
SANDY				UT			84	070		this fund. low will not	
Foreign country name			F	Foreign province/state/county			Fore			x or refund.	•
Totagh occurs, hamo						3 pro		You	Spouse		
Λ±		201 did			. c						
At any time du	ring 20	021, did you receive, sell, exchange,	or otne	rwise dispose of any	/ tina	inciai intere	st in an	y virtuai currei	ncy?	Yes	⊠ No
Standard	Som	eone can claim: You as a de	pendent	Your spous	e as	a depende	nt				
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien	l					
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Spo	use	: Was	born be	fore January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social security		(3) Relatio	nship	(4) 🗸 if q	ualifies fo	r (see instru	ıctions):
If more	(1) Fi	First name Last name		number to you		ı	Child tax cre		Credit for ot	her dependents	
than four	_										
dependents,											
see instructions ————————————————————————————————————											
here ▶ □											
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2					. 1		84,480.
Attach	2a	Tax-exempt interest 2a b Taxable interest							2b		
Sch. B if	За								3b		
required.	4a_	IRA distributions 4a b Taxable amount						4b			
	b Taxable amount				. 5b						
								6b			
• Single or							-6,140.				
Married filing separately,		Other income from Schedule 1, line 10							. <u>8</u>		78,340.
\$12,550 Add lines 1, 20, 30, 40, 50, 60, 7, and 8. This is your total income								70,340.			
 Married filing jointly or 	10 11	•	-						. <u>10</u>	_	78 , 340.
Qualifying widow(er),		Subtract line 10 from line 9. This is your adjusted gross income Standard deduction or itemized deductions (from Schedule A) 12a 12,550.									18,340.
\$25,100	12a	Standard deduction or itemized		,	,	-	12a	-			
 Head of household. 	b	Charitable contributions if you take	tne stan	laara deduction (see	ınstr	uctions)	12b	30			10 050
\$18,800	С	Add lines 12a and 12b							. 12		12,850.
 If you checked any box under 	13	Qualified business income deducti	ion from	Form 8995 or Form	899	5-A			. 13		
Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less,	ente	r-0			. 15	5	65 , 490.

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

Form 1040 (2021)

DO NOT FILE

Form 1040 (202	1)								Page 2	
	16	Tax (see instructions). Check if a	ny from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	10,153.	
	17	Amount from Schedule 2, line 3						. 17		
	18	Add lines 16 and 17						. 18	10,153.	
	19	Nonrefundable child tax credit of	. 19							
	20	Amount from Schedule 3, line 8								
	21	Add lines 19 and 20						. 21		
	22	Subtract line 21 from line 18. If a	zero or less, e	enter -0				. 22	10,153.	
	23	Other taxes, including self-empl	oyment tax,	from Schedule	2, line 21 .			. 23	0.	
	24	Add lines 22 and 23. This is your total tax							10,153.	
	25	Federal income tax withheld fro								
	а	Form(s) W-2	`			25a	12,843	3.		
	b	Form(s) 1099								
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						. 25d	12,843.	
If you have a	26	2021 estimated tax payments a			NT -			. 26		
qualifying child, attach Sch. EIC. I	27a	Earned income credit (EIC) .				27a				
attacii Scii. Elc.		Check here if you were born								
		January 2, 2004, and you staxpayers who are at least age								
	b	Nontaxable combat pay election		1 1	_					
	С	Prior year (2019) earned income								
	28	Refundable child tax credit or add								
	29	American opportunity credit from								
	30	American opportunity credit from Form 8863, line 8								
	31	Amount from Schedule 3, line 15								
	32	Add lines 27a and 28 through 3	32	462.						
	33	Add lines 25d, 26, and 32. These are your total payments							13,305.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid							3,152.	
nerana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here >							3,152.	
Direct deposit?	▶b									
See instructions.	▶d	Account number 3 3 9 2		_						
	36	Amount of line 34 you want applied to your 2022 estimated tax ► 36								
Amount	37	Amount you owe. Subtract line	33 from line	24. For details	on how to pay,	see instructions	3	37		
You Owe	38	Estimated tax penalty (see instru	uctions) .		, -	38				
Third Party		you want to allow another pe	rson to disc	uss this retur	n with the IRS?					
Designee	ins	tructions						te below.	X No	
		Designee's name ►		_			ersonal ide ımber (PIN	entification		
Ciana		der penalties of perjury, I declare that	I have evamine	no.	accompanying sol				et of my knowledge and	
Sign		ief, they are true, correct, and complete								
Here	Yo	Your signature		Date		If	the IRS ser	nt you an Identity		
	k	-							IN, enter it here	
Joint return?				SOFTWARE E				see inst.) 🕨		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both	must sign.	Date	Spouse's occupa	tion			nt your spouse an ection PIN, enter it here	
your records.								see inst.)		
	———Ph	one no. (385) 775-6857		Email address	M.VIKRAM34	121@GMATT.	~OM			
			eparer's signati		11. ATI((VII))	Date	PTIN		Check if:	
Paid				HWARI BOY	ZINI	01/18/202	2 P024	472867	Self-employed	
Preparer								(678) 965-9522		
Use Only								irm's EIN ▶		
Go to www.irs.a		1040 for instructions and the latest in			BAA	REV 01/10/22 PR			Form 1040 (2021)	
3									- (-= -)	

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