1040		rtment of the Treasury—Internal Revenue		(99) urn	202		OMB No. 1545	-0074	IRS Use Only	r−Do not v	vrite or staple	in this space.		
Filing Status Check only one box.	lf yo	Single D Married filing jointly u checked the MFS box, enter on is a child but not your depen	the name of	-			Head of the HOH o							
Your first name	and mi	ddle initial	Last na	me						Your so	cial securi	ity number		
BHANU PRASANTH			YARI	YARLAGADDA								707-89-9729		
If joint return, spouse's first name and middle initial				Last name							Spouse's social security number			
Home address 418 LUC		r and street). If you have a P,O. bo:	k, see instructi	ons.				A	pt. no.	Check	here if you			
City, town, or p	ost offic	e. If you have a foreign address, a	lso complete s	te spaces below. State			te	1 / 1P CODE			spouse if filing jointly, want \$3 to go to this fund. Checking a			
SOUTH PLAINFIELD				N			1 0.				box below will not change			
Foreign country name				Foreign province/state/cou			ity For		Foreign postal code y		your tax or refund.			
											You	Spouse		
At any time du	ring 20	21, did you receive, sell, excha				-		n any v	virtual curre	ncy?	Ves	X No		
Standard Deduction		eone can claim: You as Spouse itemizes on a separate	a dependen return or you				a dependent							
Age/Blindness	S You:	Were born before January	/ 2, 1957	Are bl	nd Sp	ouse	: 🗌 Was bor	n befo	re January 2	2, 1957	🗌 ls b	lind		
Dependents	s (see i	nstructions):		(2) 5	ocial securit	v	(3) Relationsh	ip	(4) ✔ if q	ualifies fo	r (see instru	uctions):		
If more	•	(1) First name Last name						to you Child tax cred						
than four														
dependents, see instruction:														
and check	S ———													
here 🕨 🗌														
	1	Wages, salaries, tips, etc. Att	ach Form(s)	W-2 .						. 1		95,248.		
Attach	2a	Tax-exempt interest	2a			bТ	axable interest	t.		. 2b)			
Sch. B if required.	3a	Qualified dividends	3a	b(b O	rdinary divide	nds .	nds)			
	4a	IRA distributions	4a	b Taxable amount					. 4k					
	5a	Pensions and annuities	5 a			b T	axable amoun	t		. <mark>5</mark> b				
Standard	6a	Social security benefits	<u>6a</u>			b T	axable amoun	t		. 6b				
 Deduction for – Single or 	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7				
Married filing	8	Other income from Schedule	1, line 10							. 8		-5,450.		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income								▶ 9		89,798.		
Married filing	10	Adjustments to income from Schedule 1, line 26							. 10)				
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income							▶ 11		89,798.			
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A) 12a 12,550.												
Head of household, \$18,800	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300.												
	с	Add lines 12a and 12b										12,850.		
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A									3			
any box under Standard	14	Add lines 12c and 13								. 14	۱	12,850.		
Deduction, see instructions.	15	Taxable income. Subtract lin	e 14 from lin	ne 11. If zero or less, enter -0					. 15	5	76,948.			

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

Form 1040 (2021)

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Form 1040 (202	1)			Page 2						
	16	Tax (see instructions). Check if any from Form(s): 1	16	12,672.						
	17	Amount from Schedule 2, line 3	17							
	18	Add lines 16 and 17	18	12,672.						
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19							
	20	Amount from Schedule 3, line 8	20							
	21	Add lines 19 and 20	21							
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	12,672.						
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.						
	24	Add lines 22 and 23. This is your total tax	24	12,672.						
	25	Federal income tax withheld from:								
If you have a qualifying child, attach Sch. EIC.	а	Form(s) W-2								
	b	Form(s) 1099								
	с	Other forms (see instructions)								
	d	Add lines 25a through 25c	25d	13,942.						
	26	2021 estimated tax payments and amount applied from 2020 return	26							
	27a	Earned income credit (EIC)								
		Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ►								
	b	Nontaxable combat pay election 27b								
	С	Prior year (2019) earned income 27c								
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28	_							
	29	American opportunity credit from Form 8863, line 8	_							
	30	Recovery rebate credit. See instructions .	_							
	31	Amount from Schedule 3, line 15	_							
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. These are your total payments		13,942.						
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,270.						
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		1,270.						
Direct deposit? See instructions.	►b	Routing number 3 2 1 7 1 1 8 4 ► c Type: X Checking □ Savings	\$							
	Þα	Account number 4 2 0 2 0 9 8 2 8 6 6 6								
	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	37							
You Owe	38	Estimated tax penalty (see instructions)		C						
Third Party Designee	ins	by you want to allow another person to discuss this return with the IRS? See structions		X No						
			'ersonal identification umber (PIN) ►							
Sign	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.									
Here	Yo			nt you an Identity						
				N, enter it here						
Joint return? See instructions. Keep a copy for your records.			e inst.) ►							
	Sp	Ide		IRS sent your spouse an ity Protection PIN, enter it here inst.) ►						
	Ph	one no. (510) 422-9345 Email address YARLAGADDABHANU999@GMAIL.COM								
		eparer's name Preparer's signature Date PTIN		Check if:						
Paid Preparer			72867	Self-employed						
				678)965-9522						
Use Only			m's EIN ▶	· · · · ·						
Go to www.irs.ou		<i>n1040</i> for instructions and the latest information. BAA REV 01/10/22 PRO		Form 1040 (2021)						

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