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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 Check only one box.	If you	Single X Married filing jointly under the nation is a child but not your dependent	ame o	ried filing separately (If you c	,	_		,	<i>'</i> —		, ,	. , . ,
Your first name	and mi	ddle initial	Last name			Yo	Your social security number					
KIRAN KU	MAR		PAKALA			8	863-78-5578					
If joint return, sp	ouse's	first name and middle initial	Last name			Sp	Spouse's social security number					
MOUNIKA	MOUNIKA REVANURU			ANURU					9	971-97-9529		
Home address (number and street). If you have a P.O. box, see i			instructions. Apt. no.				Apt. no.	Pr	eside	ntial Electio	n Campaign	
48 S ARCADIAN CIRCLE								202			ere if you,	
City, town, or post office. If you have a foreign address, also con MEMPHIS							ZIP code to			spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign country	reign country name Foreign pro			Foreign province/state/	rovince/state/county Fo					your tax or refund.		Spouse
At any time du	ing 20	21, did you receive, sell, exchange,	or oth	nerwise dispose of any	/ finar	ncial interest	in any	/ virtual cu	rrency	?	X Yes	☐ No
Standard Deduction		eone can claim:				dependent						
Age/Blindness	You:	☐ Were born before January 2, 1	957	Are blind Spe	ouse:	☐ Was bo	rn be	fore Januai	ry 2, 1	957	☐ Is bli	nd
Dependents	(see i	nstructions):		(2) Social security	,	(3) Relationsh	nip	(4)	if quali	fies for	(see instruc	ctions):
If more	(1) Fi	rst name Last name		number	_4	to you		Child ta	x credi	t	Credit for oth	er dependents
than four					4]
dependents, see instructions												
and check												
here 🕨 💹							-					
	1_	Wages, salaries, tips, etc. Attach F	orm(s) W-2						1	10	<u>5,753.</u>
Attach	2a	Tax-exempt interest	2a b Taxable interest					2b		1.		
Sch. B if required.	3a	Qualified dividends	3a	52.	b Or	dinary divide	nds			3b		79.
roquirou.	4a	IRA distributions	b Taxable amount					100	4b			
	5a	Pensions and annuities	5a		b Ta	xable amoun	t.			5b		
Standard	6a	Social security benefits	6a /		b Ta	xable amoun	t.			6b		
Deduction for—	7	Capital gain or (loss). Attach Sched	dule D	if required. If not requ	ired,	check here		🕨		7		<u>4,793.</u>
Single or Married filing	8	Other income from Schedule 1, lin	e 10							8	-1	0,226.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome					9	10	0,400.
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	10	0,400.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	ctions (from Schedule	A)	12	а	25,1	100.			
Head of	b	Charitable contributions if you take	the sta	andard deduction (see	instru	ctions) 12	b	6	500.			
household, \$18,800	C	Add lines 12a and 12b						120	: 2	5,700.		
If you checked	13	Qualified business income deducti	on fro	m Form 8995 or Form	8995	i-A				13		5.
any box under Standard	14	Add lines 12c and 13						14	2	5 , 705.		
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0					15	7	4,695.			

	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	8 , 557.
	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	8 , 557.
	19	Nonrefundable child tax credit or credit for or	ther depender	nts 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, e	enter -0				22	8,557.
	23	Other taxes, including self-employment tax, f	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax				▶	24	8,557.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 19	9,388.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	19,388.
If you have a	26	2021 estimated tax payments and amount ap	oplied from 20	20 return			26	
qualifying child,	27a	Earned income credit (EIC)			27a			
attach Sch. EIC.		Check here if you were born after January 2, 2004, and you satisfy all the taxpayers who are at least age 18, to claim the taxpayers who are taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18, to claim the taxpayers who are at least age 18	e other requirements of the etc. See in	rements for				
	b	Nontaxable combat pay election						
	С	Prior year (2019) earned income						
	28	Refundable child tax credit or additional child t			28		-	
	29	American opportunity credit from Form 8863	A CONTRACTOR OF THE CONTRACTOR		29		-	
	30	Recovery rebate credit. See instructions .			30		-	
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27a and 28 through 31. These are					32	
	33	Add lines 25d, 26, and 32. These are your to		7		🕨	33	19,388.
Refund	34	If line 33 is more than line 24, subtract line 24			A CONTRACTOR OF THE CONTRACTOR		34	10,831.
	35a	Amount of line 34 you want refunded to you					35a	10,831.
Direct deposit? See instructions.	▶b	Routing number 0 1 1 9 0 0 2			Checking	Savings		
Coo inotractione.	►d	Account number 3 8 5 0 1 8 8						
	36	Amount of line 34 you want applied to your 2			36			
Amount	37	Amount you owe. Subtract line 33 from line			T T		37	
You Owe	38	Estimated tax penalty (see instructions) .			38			
Third Party		you want to allow another person to disc cructions		n with the IRS?	See Vos C	omplete b	olow	X No
Designee		ignee's	Phone			sonal identif		INO
		ne ►	no.			ber (PIN)		
Sign Here		ler penalties of perjury, I declare that I have examine of, they are true, correct, and complete. Declaration of						
ricic	You	r signature	Date	Your occupation				nt you an Identity
Joint return?				SOFTWARE I		(see i	nst.) ►	N, enter it here
See instructions. Keep a copy for	Spo	buse's signature. If a joint return, both must sign.	Date	Spouse's occupat	ion			nt your spouse an ection PIN, enter it here
your records.							nst.)	
	Pho	ne no. (860) 402-4470	Email address		Y432@GMAIL.C	OM		
D-1-I	Pre	parer's name Preparer's signatu	ure		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/13/2022	P02082	2703	Self-employed
Preparer								678) 965-9522
Use Only		n's address ▶ 2530 Pebble Creek L	n Cummino	g GA 30041			s EIN ▶	(C) (B) (B)
Go to www.irs.go	$\overline{}$	1040 for instructions and the latest information.		BAA	REV 03/07/22 PRO			Form 1040 (2021)

Form 1040 (2021)

Page 2