	s 🔀 S	Single Married filing jointly	] Marrie	ed filing separately (	MFS)  Hea	d of househol	d (HOH)	Qualifyi	ng widow(er) (QW	
Check only one box.		ou checked the MFS box, enter the roon is a child but not your dependen		your spouse. If you	checked the HO	OH or QW box	, enter the	child's naı	me if the qualifying	
Your first name and middle initial Last name							,	Your social security number		
SHIVARAM REDDY CHI				INTA_REDDY				114-91-0499		
If joint return, s	pouse's	s first name and middle initial	Last na	me		- 11	•	Spouse's so	ocial security numbe	
		er and street). If you have a P.O. box, see TON LANE,	instructi	ons.		Apt.		Check here	Il Election Campaig	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	ZIP code			ling jointly, want \$3		
CHARLOTTE					2826			s fund. Checking a will not change		
Foreign country name				Foreign province/state	Foreign p		our tax or			
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of an	y financial inter	rest in any vir	ual currence	cy?	Yes X No	
Standard Deduction		neone can claim:			se as a depend alien	ent	7			
Age/Blindness	You:	: Were born before January 2, 1	957	Are blind Sp	ouse: 🗌 Was	s born before	January 2,	1957	s blind	
Dependents	s (see	instructions):		(2) Social securit	y (3) Relat	ionship	(4) 🗸 if qua	lifies for (se	ee instructions):	
If more		irst name Last name		number	to y	ou	Child tax cre	dit Cre	dit for other dependent	
than four										
dependents, see instructions	s									
and check										
here ►										
	_1_	Wages, salaries, tips, etc. Attach I	orm(s)	W-2				1	56,499.	
Attach	2a	Tax-exempt interest		erest	t					
Sch. B if required.	3a	Qualified dividends 3a b Ordinary dividends								
Toquirou.	4a	IRA distributions 4a b Taxable amount						4b		
	5a	Pensions and annuities	5a	4-0	<b>b</b> Taxable am	nount		5b		
Standard	6a	Social security benefits	6a		<b>b</b> Taxable am	nount		6b		
• Single or	uction for 7 Capital gain or (loss). Attach Schedule D if required, If not required, check here							7		
Married filing	8	Other income from Schedule 1, lin	e 10					8		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total inc	ome		▶	9	<u>5</u> 6,499.	
Married filing	10	Adjustments to income from Schedule 1, line 26								
jointly or Qualifying	11	Subtract line 10 from line 9. This is your adjusted gross income							56,499.	
widow(er), \$25,100	12a	Standard deduction or itemized		-						
• Head of	b	Charitable contributions if you take								
household, \$18,800	С	Add lines 12a and 12b	12c	12,550.						
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Forn	n 8995-A		1 1 1	13		
any box under Standard	14	Add lines 12c and 13							12,550.	
Deduction,	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less.	enter -0			15	43.949.	

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

Form 1040 (2021)



Form 1040 (2021	1)							Page 2			
	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	5,412.			
	17	Amount from Schedule 2, line 3					17				
	18	Add lines 16 and 17					18	5,412.			
	19	Nonrefundable child tax credit or credit for o	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,					22	5,412.			
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23 24	0.			
	24	Add lines 22 and 23. This is your total tax						5,412.			
	25	Federal income tax withheld from:									
	a							A-1			
	b										
	С	Other forms (see instructions)									
	d	Add lines 25a through 25c	25d	6,654.							
If you have a	26	2021 estimated tax payments and amount a	26								
qualifying child, attach Sch. EIC. [	27a	Earned income credit (EIC)									
dituon com Ero.		Check here if you were born after Janu January 2, 2004, and you satisfy all the									
		taxpayers who are at least age 18, to claim t									
	b	Nontaxable combat pay election	1 1								
	С	Prior year (2019) earned income									
	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	32	<u> </u>							
	33	Add lines 25d, 26, and 32. These are your to	tal payments				33	6,654.			
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	1,242.			
Horana	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here ▶ □						1,242.			
Direct deposit?	<b>▶</b> b	Routing number X X X X X X X									
See instructions.	<b>▶</b> d	Account number X X X X X X X									
	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	s on how to pay,	see instructions	, <b>+</b>	37				
You Owe	38			<i>,</i> <b>&gt;</b>	38						
Third Party		Do you want to allow another person to discuss this return with the IRS? See									
Designee		structions			▶ ∐ Yes. Cor			X No			
		signee's me ▶	Phone no.			al identifi r (PIN)					
Sign	Un	der penalties of perjury, I declare that I have examine		d accompanying sch				t of my knowledge and			
-	bel	ief, they are true, correct, and complete. Declaration	of preparer (other	r than taxpayer) is ba	ased on all information	of which	prepare	er has any knowledge.			
Here	Yo	ur signature	Date	Your occupation				nt you an Identity			
	<b>k</b>				NGTHEED	2 22	ction PI nst.) ▶	N, enter it here			
Joint return? See instructions.	Cn	ouse's signature. If a joint return, <b>both</b> must sign.	SOFTWARE I					at vous apoues an			
Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupation				nt your spouse an ection PIN, enter it here			
your records.						(see i	nst.) ►				
	Ph	one no. (603) 203-2022	Email address	SHIVARAMRED	DYC@GMAIL.COM	I					
Paid	Pre	eparer's name Preparer's signat	ure			PTIN		Check if:			
	UMA	UMA MAHESHWARI BOYINI UMA MAHESHWARI BOYINI 01/05/2022 P024					867	Self-employed			
Preparer	Fire	Firm's name ► GLOBAL TAXES LLC					e no. (	678) 965-9522			
Use Only	Fin	m's address ▶ 2530 Pebble Creek L	n Cummin	g GA 30041		Firm'	s EIN ►	30-1017196			
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 12/20/21 PRO			Form <b>1040</b> (2021)			

## DO NOT FILE