E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	21	OMB No. 154	15-0074	IRS Us	se Only	—Do not v	vrite or staple	in this space.	
Filing Statu Check only one box.	lf yo	Single Married filing jointly ou checked the MFS box, enter the n son is a child but not your dependen	ame of	-	separately use. If you	. ,				,		, ,	low(er) (QW) he qualifying	
Your first name and middle initial				me							Your so	Your social security number		
ANUSHA				MAKKENA							736-42-9066			
If joint return, spouse's first name and middle initial				Last name							Spouse's social security number			
Home address (number and street). If you have a P.O. box, see 808 W ROYAL LN				instructions. Apt. no. 230							Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also co								ZIP code to				to go to this fund. Checking a		
IRVING							TX		75039		box below will not change			
Foreign countr	y name	Foreign province/stat			e/count	ty	Forei	Foreign postal code			your tax or refund.			
At any time du	uring 20	021, did you receive, sell, exchange,	, or othe	rwise dis	spose of a	ny fina	ancial interes	t in any	virtual	curre	ncy?	Ves	X No	
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	•		•		a dependent							
Age/Blindnes	s You:	: Were born before January 2, 1	957	Are bl	ind S	oouse	: 🗌 Was b	orn bef	ore Jan		-	ls b		
Dependent				(2) S	Social securi					qualifies for (see instructions):				
If more	(1) F	irst name Last name			number	to you			Child tax cre		redit	edit Credit for other depe		
than four dependents,														
see instructions														
and check here ►														
	1	Wages, salaries, tips, etc. Attach F	Form(s)	M-2							. 1	1	<u> </u>	
Attach Sch. B if required.	2a	U	2a		· · ·	 ьт	axable intere	· · ·	• •	·	· 1		11,137.	
	3a	· · –	3a				Ordinary divid		• •	•	 3b			
	4a		4a				axable amou				. 4b			
	5a		5a				axable amou				. 5b			
Standard	6a	Social security benefits	6a			b Taxable amount					. 6b	,		
Deduction for –	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here								7				
 Single or Married filing separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 	8	Other income from Schedule 1, line 10							. 8	-	11,330.			
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. This is your total income						▶ 9		03,109.			
	10	Adjustments to income from Schedule 1, line 26							. 10)				
	11	Subtract line 10 from line 9. This is	e 9. This is your adjusted gross in				ome				▶ 11	1	03,109.	
	12a	Standard deduction or itemized deductions (from Schedule A) 12a 1						12	,55	0.				
Head of household, \$18,800	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300.							0.					
	с	Add lines 12a and 12b							. 12	c	12,850.			
• If you checked any box under Standard	13	Qualified business income deduction from Form 8995 or Form 8995-A							. 13	3				
	14	Add lines 12c and 13									12,850.			
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0								. 15	5	90,259.		

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

Form **1040** (2021)

Form 1040 (202	1)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	15	,687.
	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	15	,687.
	19	Nonrefundable child tax cree	dit or credit for c	other depender	nts from Schedul	e8812		19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	15	,687.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	15	,687.
	25	Federal income tax withheld	from:			1 1				
	а	Form(s) W-2				25a 18	,879.	_		
	b	Form(s) 1099				25b		_		
	С	Other forms (see instructions	,			25c				
	d	Add lines 25a through 25c						25d	18	,879.
If you have a	26	2021 estimated tax payment						26		
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a		_		
		Check here if you were k January 2, 2004, and you								
		taxpayers who are at least a								
	b	Nontaxable combat pay elec	-	1 1						
	с	Prior year (2019) earned inco								
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	28				
	29	American opportunity credit	from Form 8863	3, line 8		29		1		
	30	Recovery rebate credit. See	instructions .			30		1		
	31	Amount from Schedule 3, lin	e15			31		1		
	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							18	,879.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						34	3	,192.
nerana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here						35a	3	,192.
Direct deposit?	►b	Routing number X X X X X X X X X X X F								
See instructions.	►d	Account number X X X X X X X X X X X X X X X X X X X								
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36				
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
Third Party		you want to allow another	person to disc	cuss this retu	rn with the IRS?				_	
Designee	ins	instructions				. 🕨 🗌 Yes. Co	omplete l	celow.	X No	
		signee's me ►	Phone Personal no. ► number (F				onal identi			
Ciara		der penalties of perjury, I declare t	hat I have examine						t of my know	
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation		If the	e IRS ser	nt you an Idei	ntity
									IN, enter it he	ere
Joint return?					~	CION ENGINEE		inst.) ►		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	Date	Spouse's occupa	tion			nt your spous		
your records.								entity Protection PIN, enter it here ee inst.) ►		
	Ph	one no. (313)423-521	4	Email address	ANUSHAMAKKE	NA14@GMAIL.CO	 M(
		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	1 02/08/2022	P0208	2703	Self-en	nployed
Preparer		m's name ► GLOBAL TAX							678)965	-9522
Use Only		m's address ► 2530 Pebb		n Cummin	g GA 30041			's EIN ▶		17196
Go to www.irs.a		n1040 for instructions and the late			BAA	REV 01/31/22 PRO				040 (2021)
5.9										