1040		rtment of the Treasury—Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 202	1	OMB No. 1545	5-0074	IRS Use	e Only–	-Do not w	rite or staple	in this space.	
Filing Status Check only one box.	If yo	Single \mathbf{X} Married filing jointly u checked the MFS box, enter the national statements on is a child but not your dependent	ame of y	ed filing separately (I vour spouse. If you o	,								
Your first name	and mi	ddle initial	Last nar	me						Your so	cial securit	ty number	
NEELESH			GHOSALKAR *							***-**-7440			
If joint return, spouse's first name and middle initial			Last name						Spouse's social security number				
MANJUSHA			GHOSALKAR							***-**-8983			
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			A	pt. no.		Preside	ntial Election	on Campaign	
13361 S	OTSN	IORE WAY									nere if you,		
City, town, or post office. If you have a foreign address, also cor				mplete spaces below. State							spouse if filing jointly, want \$3 to go to this fund. Checking a		
HERNDON Foreign country name					VA				box below will not change your tax or refund.				
			Foreign province/state/c			county F							
											You	Spouse	
At any time du	ring 20	21, did you receive, sell, exchange,	or other	rwise dispose of an	y fina	ancial interest	in any	virtual c	urren	cy?	Yes	X No	
Standard	Som	eone can claim: 🗌 You as a de	pendent	Your spous	e as	a dependent							
Deduction		pouse itemizes on a separate return	n or you	were a dual-status	alien								
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Sp	ouse	: 🗌 Was bo	rn befo	ore Janu	iary 2,	1957	Is bl	lind	
Dependents	s (see i	nstructions):		(2) Social security	/	(3) Relations	hip	(4) 🗸	if qua	alifies fo	r (see instru	ictions):	
If more	(1) Fi	rst name Last name	number to you				Child tax credit			Credit for ot	her dependents		
than four	AAD	ITYA GHOSALKAR	***-**-1234		4							×	
dependents, see instruction	ANU	SHA GHOSALKAR	***-**-1236		6	Daughter		×					
and check													
here 🕨 🔄													
	1	Wages, salaries, tips, etc. Attach F	orm(s) V	N-2	• •			· ·		1	2	02,927.	
Attach	2a	Tax-exempt interest	2a		bТ	axable interes	st.			2 b	1	364.	
Sch. B if required.	3a	Qualified dividends	3a	435.	bC	ordinary divide	ends .			3b	1	435.	
	4a	IRA distributions	4a		bТ	axable amour	nt	· ·		4b	0		
	5a	Pensions and annuities	5a b Taxable amount					• •		5b			
Standard	6a	ocial security benefits 6a b Taxable amount							6b				
 Deduction for— Single or 	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here $\ . \ . \ .$) \blacktriangleright								7			
Married filing	8	Other income from Schedule 1, line 10							8		18,224.		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	1	85,502.		
 Married filing jointly or Qualifying 	10	Adjustments to income from Sche			• •		<u>.</u> .	• •	a . a	10			
	11	Subtract line 10 from line 9. This is your adjusted gross income							· 11	1	85 <mark>,</mark> 502.		
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A) 12a 25,100.								•			
 Head of household, \$18,800 	b	Charitable contributions if you take the standard deduction (see instructions) 12b 600.											
	С	Add lines 12a and 12b								120		25,700.	
 If you checked any box under Standard 	13	Qualified business income deduction from Form 8995 or Form 8995-A								13			
	14	Add lines 12c and 13								14	_	25,700.	
Deduction, see instructions.	15	5 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0									1	59,802.	
)													

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

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Form 1040 (2021)

Form 1040 (2021)							Page 2	
	16	Tax (see instructions). Check if any from Form	n(s): 1 🗌 881	4 2 4972	3		16	26,623.	
	17	Amount from Schedule 2, line 3					17		
	18	Add lines 16 and 17					18	26,623.	
	19	Nonrefundable child tax credit or credit for o	other depender	nts from Schedule	8812		19	500.	
	20	Amount from Schedule 3, line 8							
	21	Add lines 19 and 20					21	500.	
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	26,123.	
	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	26,123.	
	25	Federal income tax withheld from:							
	а	Form(s) W-2							
	b	Form(s) 1099	<mark>.</mark>		25b	104.			
	С	Other forms (see instructions)			25c	149.			
	d	Add lines 25a through 25c					25d	29,926.	
If you have a	26	2021 estimated tax payments and amount a	applied from 20			.C.	26		
qualifying child,	27a	Earned income credit (EIC)		No	27a				
attach Sch. EIC.		Check here if you were born after Janu							
		January 2, 2004, and you satisfy all th taxpayers who are at least age 18, to claim					1		
	b	Nontaxable combat pay election	1 1						
	c	Prior year (2019) earned income							
	28	Refundable child tax credit or additional child		Schedule 8812	28 1	,500.			
	29	American opportunity credit from Form 8863, line 8							
	30	Recovery rebate credit. See instructions .			30		-		
	31	Amount from Schedule 3, line 15			31		1		
	32	Add lines 27a and 28 through 31. These are				lits 🕨	32	1,500.	
	33	Add lines 25d, 26, and 32. These are your to					33	31,426.	
	34	If line 33 is more than line 24, subtract line 2					34	5,303.	
Refund	35a	Amount of line 34 you want refunded to you					35a	5,303.	
Direct deposit?	►b	Routing number $ * * * * * X X X X F C Type: \Box Checking \Box Savings$						10 P 11 P 2 P	
See instructions.	►d			* * * X X					
	36	Amount of line 34 you want applied to your	2022 estimate	ed tax 🕨	36				
Amount	37	Amount you owe. Subtract line 33 from line	e 24. For detail	s on how to pay, s	see instructions	. 🕨	37		
You Owe	38	Estimated tax penalty (see instructions)			38				
Third Party Designee	Do	you want to allow another person to disc			See				
	ins	instructions							
		Designee's Phone Personal iden							
	name ► no. ► number (PIN) ■ Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to								
Sign		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration							
Here								nt you an Identity	
						Protection PIN, enter it here			
Joint return?				SOFTWARE NEGINEER			see inst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, both must sign.	Date Spouse's occupat		on			nt your spouse an	
your records.	,			HOMEMAKER			Identity Protection PIN, enter it here (see inst.) ►		
	Ph	Phone no. (703) 652–3857 Email address NEELESH.GHOSALKAR@GMAIL.COM							
		eparer's name Preparer's signal			Date	PTIN		Check if:	
Paid		Preparer's name Preparer's signature Self-Prepared Date PTIN						Self-employed	
Preparer	Ein	Firm's name Phone							
Use Only		n's address	's EIN ►						
Go to wave in a		1040 for instructions and the latest information.	Form 1040 (2021)						
GO LO WWW.IIS.go	SVIPOIN	note for instructions and the latest information.		BAA	REV 02/16/22 PRO			Form 1040 (2021)	
		_							