E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status Check only		Single  Married filing jointly  accepted the MFS box, enter the r	_	ried filing separately (N	, —		` '	_	, ,		` , ` ,	
one box.	•	son is a child but not your dependen		i your spouse. Ii you c	ilecked tile i	IOH OF QV	W DOX, enter	tile Cilli	u S Hallie	יוו נוופ	qualifying	
Your first name and middle initial			Last r	Last name						Your social security number		
Adithya R				Dwaram					515-65-3955			
				Last name					Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.			Apt. no.	Pres	idential E	lection	Campaign	
300 ne r	nobe	rly ln					14		Check here if you, or your spouse if filing jointly, want \$3			
City, town, or p	ost offi	ce. If you have a foreign address, also co				code			y, want \$3 hecking a			
BENTONVILLE				AR			2712	box	below wil	II not ch	•	
Foreign country name				Foreign province/state/county			reign postal coo	de your	tax or re	fund. <b>You</b>	Spouse	
At any time du	ıring 20	021, did you receive, sell, exchange	, or oth	nerwise dispose of any	/ financial int	erest in ar	ny virtual cur	rency?		⁄es	⊠ No	
Standard Deduction		neone can claim:  You as a de Spouse itemizes on a separate retur				dent						
	_	: Were born before January 2, 1				as born b	efore Januar	y 2, 195		Is bline	.d	
Dependents	s (see	instructions):		(2) Social security	(3) Rela	ationship	(4) 🗸 i	f qualifies	s for (see i	instruct	ions):	
If more	(1) F	irst name Last name		number	to	you	Child tax		I .		r dependents	
than four								]			]	
dependents, see instruction								]			]	
and check	·							]			]	
here ▶ □								]			]	
	_1_	Wages, salaries, tips, etc. Attach l	Form(s	) W-2					1	104	4,733.	
Attach	2a	Tax-exempt interest	2a	2a b Taxable inte					2b			
Sch. B if required.	3a	Qualified dividends	3a b Ordinary div						3b			
	4a	IRA distributions	4a	· ·	<b>b</b> Taxable a	mount .			4b			
	5a	Pensions and annuities			5b							
Standard	6a	Social security benefits 6a b Taxable amount							6b			
• Single or	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □										
Married filing separately, \$12,550	8	Other income from Schedule 1, line 10										
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9	104	4,733.	
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	104	4,733.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	ctions (from Schedule	A)	12a	12,5	50.				
Head of	b	Charitable contributions if you take	the sta	andard deduction (see	instructions)	12b	3	00.				
household, \$18,800	С	Add lines 12a and 12b							12c	12	2,850.	
• If you checked any box under Standard Deduction, see instructions.	13	Qualified business income deduction from Form 8995 or Form 8995-A										
	14	Add lines 12c and 13								12	2,850.	
	15	Taxable income. Subtract line 14	from I	ine 11. If zero or less,	enter -0				15	91	1,883.	

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

Form **1040** (2021)

Form 1040 (2021	1)			Page <b>2</b>			
	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	16,071.			
	17	Amount from Schedule 2, line 3	17				
	18	Add lines 16 and 17	18	16,071.			
	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	16,071.			
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.			
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	16,071.			
	25	Federal income tax withheld from:					
	а	Form(s) W-2					
	b	Form(s) 1099					
	С	Other forms (see instructions)					
	d	Add lines 25a through 25c	25d	16,246.			
	26	2021 estimated tax payments and amount applied from 2020 return	26				
If you have a L qualifying child,	27a	Earned income credit (EIC)					
attach Sch. 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					
	28	Refundable child tax credit or additional child tax credit from Schedule 8812	-				
	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	32	16.046			
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	16,246.			
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	175.			
5	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, check here	35a	175.			
Direct deposit? See instructions.	▶b	Routing number 0 8 2 0 0 0 0 7 3					
	►d	Account number 4 8 7 0 0 4 5 3 5 8 6 4					
	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)					
Third Party Designee	ins De:	you want to allow another person to discuss this return with the IRS? See tructions	tification	⊠ No			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and tief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which					
Here	You			nt you an Identity			
	<b>N</b>		tection Pl e inst.) ▶	N, enter it here			
Joint return? See instructions.	Sn	Trojece Engineer		nt your spouse an			
Keep a copy for	Spi			ection PIN, enter it here			
your records.		(see	e inst.) 🕨				
	Pho	one no. Email address					
Paid	Pre	parer's name Preparer's signature Date PTIN		Check if:			
	_Aja	ay Babu Kondisetti P0170	3628	Self-employed			
Preparer	Firm	m's name ► Values Tax Pho	hone no.				
Use Only	Firr	m's address ▶ 126 SOUTH 2ND ST BETHPAGE NY 11714 Firm	n's EIN ▶	N ► 45-3482203			
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.  BAA REV 01/31/22 PRO		Form <b>1040</b> (2021)			