

Your first name, middle initial, and last name AJITHA KUNUKUNTLA

Spouse's first name, middle initial, and last name _____

Your Social Security Number 349-45-8189

Spouse's Social Security Number _____

Home address, City, State, ZIP 4020 SUSAN CT, 12

WEST DES MOINES IA 50266

Part I Tax Return Information

	B. Spouse (filing status 3)	A. You or Joint
1. Iowa Net Income (IA 1040, line 26 A & B).....	1B _____ .00	1A <u>48,140</u> .00
2. Total Tax (IA 1040, line 42 A & B).....	2B _____ .00	2A <u>1,852</u> .00
3. Iowa Income Tax Withheld (IA 1040, line 63 A & B).....	3B _____ .00	3A <u>2,555</u> .00
4. Amount to be Refunded (IA 1040, line 68).....		4. <u>743</u> .00
5. Total Amount Due (IA 1040, line 73).....		5. _____ .00

Part II Declaration of Taxpayer (Be sure to keep a copy of the tax return.)

6. I do not want direct deposit or direct debit.
7. I consent that my refund be directly deposited as designated below. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

I authorize the Iowa Department of Revenue (IDR) and its designated financial agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated below for payment of my individual Iowa taxes owed on this return, and the financial institution to debit the entry to this account on _____ (the payment/settlement date). I also authorize the financial institution involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. This authorization is to remain in full force and effect until I notify IDR to terminate the authorization. To revoke (cancel) a payment, I must contact IDR at 515-281-3114 or idreft@iowa.gov. Payment cancellation requests must be received no later than five business days prior to the payment/settlement date. Note: This electronic withdrawal from your bank account will be identified with the ACH Company ID 4426004574. If you currently have a debit block on this account, contact your financial institution to request that they allow a withdrawal from your bank account by this ACH Company ID.

Name of financial institution: JP MORGAN CHASE

Routing Number

0	7	1	0	0	0	0	1	3
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 The first two digits must be 01 through 12 or 21 through 32.

Account Number

3	6	8	7	0	7	1	3	6											
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Type of Account: Savings Checking

Will this refund go to (or payment come from) an account outside the United States? Yes No

Under penalties of perjury, I declare that I have examined the information on my electronic individual income tax return, including any schedules, attachments, and statements for tax year ending December 31, 2021 and certify to the best of my knowledge and belief, it is true, correct and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of my electronic income tax return. I consent that my return, including accompanying schedules, attachments, and statements be sent to the Iowa Department of Revenue (IDR) through the Internal Revenue Service (IRS) by my Electronic Return Originator (ERO). In addition, by using software to prepare and transmit my return electronically, I consent to the disclosure to IDR of all information pertaining to the transmission of my tax return electronically. I authorize IDR to inform my ERO and/or transmitter when my electronic return has been accepted. In the event that it is rejected, I authorize IDR to identify the reasons for rejection so that the return can be corrected and re-transmitted. If I have filed a balance due return, I understand that if IDR does not receive full and timely payment of my tax liability I will remain liable for the tax liability and all applicable penalties and interest. I consent that my refund be directly deposited as designated in Part II and declare that the information shown in Part II is correct. If the processing of my return, refund, or direct debit is delayed, I authorize IDR to disclose to my ERO and/or transmitter the reason(s) for the delay or the date the refund was sent. I understand that this declaration with required attachments must be forwarded upon request to IDR.

Ajitha K

04/13/2022

Your Signature

Date

Spouse Signature If a joint return, both must sign.

Date

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that entries on form IA 8453-IND are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. I have obtained the taxpayer's signature before submitting this return to the IRS. I have provided the taxpayer with a copy of all forms and information to be filed with IDR and have followed all other requirements described in the Iowa Modernized e-File (MeF) Information for e-File Providers publication. I understand that the original form IA 8453-IND should not be sent to IDR, but must be retained by the ERO for a period of three years from the due date of the return or the filing date, whichever is later, to which the IA 8453-IND relates was filed. I will make a copy available to IDR upon request. If I am a paid preparer, under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules, attachments, and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I have based this declaration on all information available to me.

ERO Signature	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO PTIN
Firm's name (or yours if self-employed) <u>GLOBAL TAXES LLC</u>				FEIN <u>30-1017196</u>
Address, City, State, ZIP <u>2530 PEBBLE CREEK LN CUMMING GA 30041</u>				Phone Number <u>(678) 965-9522</u>
Paid Preparer Signature <u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u>	Date <u>04/13/2022</u>	Check if self-employed <input type="checkbox"/>		Preparer PTIN <u>P02082703</u>
Firm's name (or yours if self-employed) <u>GLOBAL TAXES LLC</u>				FEIN <u>30-1017196</u>
Address, City, State, ZIP <u>2530 PEBBLE CREEK LN CUMMING GA 30041</u>				Phone Number <u>(678) 965-9522</u>

2021 IA 1040 Iowa Individual Income Tax Return

For fiscal year beginning _____ / _____ / _____ and ending _____ / _____ / _____

Step 1: Fill in all spaces. You must fill in your Social Security Number (SSN).

Your last name: KUNUKUNTLA Your first name/middle initial: AJITHA
 Spouse's last name: _____ Spouse's first name/middle initial: _____



Current mailing address (number and street, apartment, lot, or suite number) or PO Box:
4020 SUSAN CT, 12

City, State, ZIP:
WEST DES MOINES IA 50266

Spouse SSN: _____ Your SSN: 349-45-8189

Step 2 Filing Status: Mark one box only

1	<input checked="" type="checkbox"/> Single: Were you claimed as a dependent on another person's Iowa return? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Email Address: _____
2	Married filing a joint return. (Two-income families may benefit by using status 3 or 4.)	Check this box if you or your spouse were 65 or older as of 12/31/21. <input type="checkbox"/>
3	Married filing separately on this combined return. Spouse use column B.	Residence on 12/31/21: County No. <u>25</u> School District No. <u>6957</u>
4	Married filing separate returns. Spouse's name: _____ ▲ SSN: _____ Net Income: \$ _____	
5	Head of household with qualifying person. If qualifying person is not claimed as a dependent on this return, enter the person's name and SSN below.	
6	Qualifying widow(er) with dependent child. Name: _____ SSN: _____	

Step 3 Exemptions

	B. Spouse (Filing Status 3 ONLY)	A. You or Joint
a. Personal Credit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3..... ▲	X \$ 40 = \$ _____ ▲ <u>1</u>	X \$ 40 = \$ <u>40</u>
b. Enter 1 for each taxpayer who is 65 or older and/or 1 for each taxpayer who is blind..... ▲	X \$ 20 = \$ _____ ▲	X \$ 20 = \$ _____
c. Dependents: Enter 1 for each dependent..... ▲	X \$ 40 = \$ _____ ▲	X \$ 40 = \$ _____
d. Enter first names of dependents here _____	e. Total \$ _____	e. Total \$ <u>40</u>

Step 4 Reportable Social Security benefits as calculated on line 13 of Iowa Social Security Worksheet

	B. Spouse/Status 3 ▲	A. You or Joint ▲
	<u> </u>	<u> </u>

Step 5 Gross Income		B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
1. Wages, salaries, tips, etc	1.	_____	<u>54,015.00</u>	_____	_____
2. Taxable interest income. If more than \$1,500, complete Sch. B.....	2.	_____	_____	_____	_____
3. Ordinary dividend income. If more than \$1,500, complete Sch. B	3.	_____	_____	_____	_____
4. Taxable alimony received.....	4.	_____	_____	_____	_____
5. Business income/(loss). See instructions	5.	_____	_____	_____	_____
6. Capital gain/(loss). See instructions	6.	_____	_____	_____	_____
7. Other gains/(losses). See instructions.....	7.	_____	_____	_____	_____
8. Taxable IRA distributions	8.	_____	_____	_____	_____
9. Taxable pensions and annuities.....	9.	_____	_____	_____	_____
10. Rents, royalties, partnerships, estates, etc. See instructions.....	10.	_____	<u>-5,875.00</u>	_____	_____
11. Farm income/(loss). See instructions	11.	_____	_____	_____	_____
12. Unemployment compensation. See instructions.....	12.	_____	_____	_____	_____
13. Gambling winnings.....	13.	_____	_____	_____	_____
14. Other income, bonus depreciation, and section 179 adjustment	14.	_____	_____	_____	_____
15. Gross Income. Add lines 1-14.....	15.	_____	_____	_____	<u>48,140.00</u>

NOTE: Use only blue or black ink, no pencils or red ink.

Step 6 Adjustments to Income		B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
16. Payments to an IRA, Keogh, or SEP	16.	_____	_____	_____	_____
17. Deductible part of self-employment tax	17.	_____	_____	_____	_____
18. Health insurance premium	18.	_____	<u>0.00</u>	_____	_____
19. Penalty on early withdrawal of savings.....	19.	_____	_____	_____	_____
20. Alimony paid	20.	_____	_____	_____	_____
21. Pension/retirement income exclusion	21.	_____ ▲	_____	_____	_____
22. Moving expense deduction from federal form 3903.....	22.	_____	_____	_____	_____
23. Iowa capital gain deduction. Must include corresponding IA 100 schedule	23.	_____ ▲	_____	_____	_____
24. Other adjustments.....	24.	_____	_____	_____	_____
25. Total adjustments. Add lines 16-24	25.	_____	_____	_____ ▲	<u>0.00</u>
26. Net Income. Subtract line 25 from line 15	26.	_____	_____	_____ ▲	<u>48,140.00</u>

Step 7 Federal Taxes and Qualified Deductions		B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
27. Federal income tax refund/overpayment received in 2021	27.	_____ ▲	_____	_____	_____
28. Self-employment/household employment/other federal taxes	28.	_____ ▲	_____	_____	_____
29. Addition for federal taxes. Add lines 27 and 28	29.	_____	_____	_____	<u>0.00</u>
30. Total. Add lines 26 and 29.....	30.	_____	_____	_____	<u>48,140.00</u>
31. Federal tax withheld in 2021, federal estimated tax payments made in 2021, and federal taxes paid in 2021 for 2020 and prior years	31.	_____ ▲	<u>6,920.00</u>	_____	_____
32. Qualified business income deduction. 50.0% (.50) of federal amount. See instructions.....	32.	_____ ▲	_____	_____	_____
33. DPAD 199A(g) deduction. 50.0% (.5) of federal amount	33.	_____ ▲	_____	_____	_____
34. Total federal tax and other qualified deductions. Add lines 31, 32, and 33.....	34.	_____	_____	_____	<u>6,920.00</u>
35. Balance. Subtract line 34 from line 30. Enter here and on line 36, page 2	35.	_____	_____	_____ ▲	<u>41,220.00</u>



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	B. Spouse/Status 3	A. You or Joint	B. Spouse/Status 3	A. You or Joint
Step 8 Taxable Income				
36. BALANCE. From side 1, line 35			36. 00	41,220.00
37. Deduction. Check one box <input checked="" type="checkbox"/> Itemized.(Include IA Schedule A) <input type="checkbox"/> Standard			37. 00	2,130.00
38. TAXABLE INCOME. SUBTRACT line 37 from line 36			38. 00	39,090.00
Step 9 Tax, Credits, and Check-off Contributions				
39. Tax from tables or alternate tax	39. 00	1,852.00		
40. Iowa lump-sum tax. See instructions	40. 00	0.00		
41. Iowa alternative minimum tax. Must include IA 6251.	41. 00	0.00		
42. Total tax. ADD lines 39, 40, and 41.	42. 00	1,852.00		
43. Total exemption credit amount(s) from Step 3, side 1.	43. 00	40.00		
44. Tuition and textbook credit for dependents K-12.	44. 00	0.00		
45. Volunteer firefighter/EMS/reserve peace officer credit.	45. 00	0.00		
46. Total credits. ADD lines 43, 44, and 45.	46. 00	40.00		
47. BALANCE. SUBTRACT line 46 from line 42. If less than zero, enter zero.	47. 00	1,812.00		
48. Credit for nonresident or part-year resident. Must include IA 126 and federal return.	48. 00	0.00		
49. BALANCE. SUBTRACT line 48 from line 47. If less than zero, enter zero.	49. 00	1,812.00		
50. Out-of-state tax credit. Must include IA 130.	50. 00	0.00		
51. BALANCE. SUBTRACT line 50 from line 49. If less than zero, enter zero.	51. 00	1,812.00		
52. Other nonrefundable Iowa credits. Must include IA 148 Tax Credits Schedule.	52. 00	0.00		
53. BALANCE. SUBTRACT line 52 from line 51. If less than zero, enter zero.	53. 00	1,812.00		
54. School district surtax or EMS surtax. Take percentage from table; multiply by line 53.	54. 00	0.00		
55. Total state and local tax. ADD lines 53 and 54.	55. 00	1,812.00		
56. TOTAL state and local tax before contributions. Combine columns A and B on line 55 and enter here.	56. 00	1,812.00		
57. Contributions will reduce your refund or add to the amount you owe. Amounts must be in whole dollars.				
Fish/Wildlife 57a: <input type="checkbox"/> State Fair 57b: <input type="checkbox"/> Firefighters/Veterans 57c: <input type="checkbox"/> Child Abuse Prevention 57d: <input type="checkbox"/> Enter here....			57. 00	
58. TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add line 56 and line 57 and enter here.	58. 00	1,812.00		

Step 10 Credits				
59. Iowa Fuel Tax Credit. Must include IA 4136.	59. 00	0.00		
60. Check One: <input type="checkbox"/> Child and Dependent Care Credit OR <input type="checkbox"/> Early Childhood Development Credit	60. 00	0.00		
61. Iowa earned income tax credit. 15.0% (.15) of federal credit	61. 00	0.00		
62. Other refundable credits. Include IA 148 Tax Credits Schedule.	62. 00	0.00		
63. Iowa income tax withheld.	63. 00	2,555.00		
64. Estimated and voucher payments made for tax year 2021.	64. 00	0.00		
65. TOTAL. ADD lines 59 through 64 and enter here	65. 00	2,555.00		
66. TOTAL CREDITS. ADD columns A and B on line 65 and enter here	66. 00	2,555.00		

Step 11 Refund				
67. If line 66 is more than line 58, subtract line 58 from line 66. This is the amount you overpaid.	67. 00	743.00		
68. Amount of line 67 to be REFUNDED.	68. 00	743.00		
68a. Routing number: 071000013	68b. Type	Checking <input checked="" type="checkbox"/>	Savings <input type="checkbox"/>	
68c. Account number: 368707136				
69. Amount of line 67 to be applied to your 2021 estimated tax.	69. 00	0.00		

Step 12 Pay				
70. If line 66 is less than line 58, subtract line 66 from line 58. This is the AMOUNT OF TAX YOU OWE	70. 00	0.00		
71. Penalty for underpayment of estimated tax from IA 2210, IA 2210S, or IA 2210F. Check if annualized income method is used.	71. 00	0.00		
72. Penalty and interest <input type="checkbox"/> 72a. Penalty <input type="checkbox"/> 72b. Interest <input type="checkbox"/> ADD. Enter total	72. 00	0.00		
73. TOTAL AMOUNT DUE. ADD lines 70, 71, and 72. Enter here.	73. 00	0.00		

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this return, and, to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<u>Ajitha K</u>	<u>04/13/2022</u>	<input type="checkbox"/>	<u>04/13/2022</u>	<u>SYAM PRIYA RAM SAGAR GUPTA TALLAM</u>	<u>04/13/2022</u>
	Your signature	Date	Check if deceased	Date of death	Preparer's signature	Date
SIGN HERE	<u></u>	<u></u>	<input type="checkbox"/>	<u></u>	<u>P02082703</u>	<u>30-1017196</u>
	Spouse's signature	Date	Check if deceased	Date of death	Preparer's PTIN	Firm's FEIN
				<u>(708) 654-7121</u>		<u>(678) 965-9522</u>
				Daytime telephone number		Daytime telephone number

This return is due May 2nd, 2022. Sign, enclose W-2s, and verify SSNs.
 MAILING ADDRESS: Iowa Income Tax Document Processing,
 PO BOX 9187, Des Moines IA 50306-9187
 Make check payable to Iowa Department of Revenue

