Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

internal nevertue Service				
Submission Identification Number (SID)				
Taxpayer's name	Social	security numb	 ber	
NAMRATHA REDDY SEELAM	336	-69-192	7	
Spouse's name	Spouse	's social sec	urity number	
			11	
	021 (Enter year y	ou are au	tnorizing.)
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1 Adjusted gross income		. 1	60	,960.
2 Total tax				,330.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. 3	9	,942.
4 Amount you want refunded to you		. 4		,012.
5 Amount you owe		. 5		
Part II Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a	copy of y	our retu	rn)
return (original or amended) I am now authorizing. I consent to allow my intermediate service proto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finan authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can business days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues relapersonal identification number (PIN) below is my signature for the income tax return (original or a Electronic Funds Withdrawal Consent.	eason for rejection of thorize the U.S. Treas account indicated in nicial institution to deut to terminate the aut cellation requests muolived in the process atted to the payment.	the transmis sury and its the tax preport the entry chorization. The sust be receiving of the el I further ac	ssion, (b) the designated coaration soft to this according revoke (coaration) at the desired part of the desired part of the coaracter of the desired part of the desi	ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the
Taxpayer's PIN: check one box only				
	or generate my PIN	9 1 9	9 2 7	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	,		digits, but er all zeros	ao my
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitions below.				
Your signature ► S. Nathana	Date ▶			
Spouse's PIN: check one box only				
· _	er ganarata my DINI			00 mv
ERO firm name	or generate my PIN	Enter five	digits, but	as my
signature on the income tax return (original or amended) I am now authorizing	•		er all zeros	
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitions below.				
Spouse's signature ▶	Date ►			
Practitioner PIN Method Returns Only—conti				
Part III Certification and Authentication — Practitioner PIN Method On	ly			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	. 5 8 7 2	7 8 6	1 9 8	9
, , , , , ,		i't enter all ze	eros	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file File Pinch Pin	t I am submitting thi	s return in a	accordance	
ERO's signature ▶	Date ►			
ERO Must Retain This Form — See Instr	uctions			
Don't Submit This Form to the IRS Unless Reque				

£1040

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

2021

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly bu checked the MFS box, enter the reson is a child but not your dependen	ame of	ed filing separately your spouse. If you	` ′	_		` ,	_	, ,	. , . ,
Your first name	and m	iddle initial	Last na	ame					Your so	cial securi	ity number
NAMRATH	A RE	DDY	SEEI	LAM					336-6	59-192	:7
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's social security num		
	•	er and street). If you have a P.O. box, see	instructi	ions.				Apt. no.	ł		ion Campaigr
5390 E					1 -			522		ere if you if filing ioi	, or your ntly, want \$3
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s	spaces below.	Sta OI			code 137	to go to	0,	Checking a
Foreign country	y name			Foreign province/stat	e/coun	ty	Fore	eign postal code	your tax	or refund	l. Spouse
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	ny fina	ancial intere	st in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		neone can claim:				'	nt				
Age/Blindness	You	: Were born before January 2, 1	957 [Are blind S	pouse	: Was	born be	efore January 2	2, 1957	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relatio	nship	(4) 🗸 if q	ualifies for	(see instru	uctions):
If more	(1) F	irst name Last name		number		to you	u	Child tax c	redit	Credit for o	ther dependents
than four											
dependents, see instruction	e										
and check	· 										
here ▶											
A + + I-	1	Wages, salaries, tips, etc. Attach I	Form(s)	W-2					. 1		68,465.
Attach Sch. B if	2a	Tax-exempt interest	2a		b T	axable inter	rest		. 2b		
required.	3a	Qualified dividends	3a	32.	b 0	Ordinary divi	idends		. 3b		33.
	4a	IRA distributions	4a		b T	axable amo	ount .		. 4b		
	5a	Pensions and annuities	5a		b T	axable amo	ount .		. 5b		
Standard	6a	Social security benefits	6a		b T	axable amo	ount .		. 6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not re	quired	l, check her	е.	▶ [_ 7		-165.
Married filing	8	Other income from Schedule 1, lin	ie 10						. 8		-7,373.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	Γhis is your total in	come				▶ 9		60,960.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26					. 10		
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted gross inc	ome				▶ 11		60,960.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	t ions (from Schedu	ıle A)		12a	12,55	0.		
Head of	b	Charitable contributions if you take	the sta	ndard deduction (se	e insti	ructions)	12b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 120	;	12,850.
If you checked	13	Qualified business income deduct	ion fron	n Form 8995 or For	m 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction,	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or less	s, ente	er -0			. 15		48,110.

	16	Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🗎 4972 3 🗎	16	6,330.	
	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	6,330.	
	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	6,330.	
	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	6,330.	
	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	9,942.	
If you have a	26	2021 estimated tax payments and amount applied from 2020 return	26		
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			
	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		1 400	
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	1,400.	
	33	Add lines 25d, 26, and 32. These are your total payments	33	11,342.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	5,012.	
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	5,012.	
Direct deposit? See instructions.	►b ►d	Routing number 1 1 1 0 0 6 1 4 ▶ c Type: X Checking Savings Account number 8 7 3 1 1 8 6 1 1			
	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		you want to allow another person to discuss this return with the IRS? See tructions	elow.	X No	
Ü	Des	signee's Phone Personal identifi	cation		
		ne ▶ no. ▶ number (PIN) ▶			
Sign Here		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
TICIC	You			t you an Identity	
Joint return?			ction PII nst.) ▶	N, enter it here	
See instructions. Keep a copy for your records.	Keep a copy for				
	Pho	one no. (903)747-5347 Email address NAMRATHAREDDY167@GMAIL.COM			
Deid	Pre	parer's name Preparer's signature Date PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/22/2022 P02082	2703	Self-employed	
Preparer				678)965-9522	
Use Only	Firr		s EIN ▶		
Go to www.irs.go		n1040 for instructions and the latest information. BAA REV 03/12/22 PRO		Form 1040 (2021)	

Form 1040 (2021)

Page 2

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

NAMRATHA REDDY SEELAM

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 336-69-1927

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	S	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E		5	-7,400.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation	,	7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions).	8p		
Z	Other income. List type and amount ▶			
	Other Income from box 3 of 1099-Misc 27.	8z 27		
9	Total other income. Add lines 8a through 8z		9	27.
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-SR, or	10	7 272

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income				
11	Educator expenses			 11	
12	Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106		_	12	
13	Health savings account deduction. Attach Form 8889			 13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903		 14	
15	Deductible part of self-employment tax. Attach Schedule SE			 15	
16	Self-employed SEP, SIMPLE, and qualified plans			 16	
17	Self-employed health insurance deduction			 17	
18	Penalty on early withdrawal of savings			 18	
19a	Alimony paid			 19a	
b	Recipient's SSN	_ _			
С	Date of original divorce or separation agreement (see instructions)				
20	IRA deduction			 20	
21	Student loan interest deduction			 21	
22	Reserved for future use			 22	
23	Archer MSA deduction			 23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c			
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f	Contributions to section 501(c)(18)(D) pension plans	24f			
g	Contributions by certain chaplains to section 403(b) plans	24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h			
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i			
j	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k			
Z	Other adjustments. List type and amount ▶	24z			
25	Total other adjustments. Add lines 24a through 24z			 25	
26	Add lines 11 through 23 and 25. These are your adjustments here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, lin			26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/ScheduleD for instructions and the latest information.

Internal Revenue Service (99) ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Name(s) shown on return

Your social security number

NAI	MRATHA REDDY SEELAM			336-	-69-	1927
-	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	_	•	_		
Pai	t I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	4 400	4 572			165
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	4,408.	4,573.			-165.
	Totals for all transactions reported on Form(s) 8949 with Box C checked					
	Short-term gain from Form 6252 and short-term gain or (INet short-term gain or (Ioss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y			6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis				7	-165.
Par	t II Long-Term Capital Gains and Losses—Ge	nerally Assets H	leld More Than	One Year	(see	instructions)
See i	nstructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
	Totals for all transactions reported on Form(s) 8949 with Box D checked					
	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions Long-term capital loss carryover. Enter the amount, if any				13	
	Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part III	15	

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -165.• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 165.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Namo(s) shown on roturn

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No. 12A

Marrie(S) SHOWITO	iiietuiii		
NAMRATHA	REDDY	SEELAM	

Social security number or taxpayer identification number 336-69-1927

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(C) Short-term transactions	•	٠,,	_	sis wasn t report	ea to the ir.	10	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	01/01/21	12/31/21	962.	1,114.			-152.
COINBASE	01/01/21	12/31/21	3,446.	3,459.			-13.
2 Totals. Add the amounts in columns	s (d), (e) (d) and	d (h) (subtract					
negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box A)	al here and inc e is checked), lir	lude on your ne 2 (if Box B	4 408	4 573			_165

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

Attachment Sequence No. **13** Your social security number

NAMR	ATHA REDDY SEEL	MAM						3	36-69-	192	7	
Part	Income or Loss	From Rental Real Estate and Ro	yaltie	s Note:	f you a	are in th	e business o	f rent	ing perso	nal p	roperty	, use
	Schedule C. See	instructions. If you are an individual, rep	ort farı	m rental inc	ome o	or loss f	rom Form 48	35 or	n page 2,	line 4	0.	
A Dic	l you make any payme	nts in 2021 that would require you to	o file F	orm(s) 10	99? S	ee inst	ructions .				Yes ∑	No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?									Yes [No
1a		each property (street, city, state, ZIF										
Α	KRISHNA LANKA	VIJAYAWADA ANDHRA PRADES	SH II	n 52001	.3							
В												
С												
1b	Type of Property	2 For each rental real estate pro	pertv I	isted		Fair	Rental	Per	sonal U	se		. 11.7
	(from list below)	above, report the number of fa	ir rent	al and			Days		Days		u	JV
A	3	personal use days. Check the if you meet the requirements to	QJV b o file a	ox only s a	Α		365		0			7
В		qualified joint venture. See ins	tructio	ns.	В							-
С					С							
Type	of Property:											
	le Family Residence	3 Vacation/Short-Term Rental	5 La	nd	-	7 Self-	Rental					
_	ti-Family Residence	4 Commercial		valties			r (describe)					
Incom		Properties:			Α	 	<u> </u>				С	
3	Rents received		3			450.						
4			4									
Expen												
5			5									
6		nstructions)	6									
7	•	nance	7			950.						
8			8			<i>.</i>						
9			9									
10		ssional fees	10									
11			11		1.	250.						
12		d to banks, etc. (see instructions)	12			250.						
13			13									
14			14		1.	690.						
15			15			960.						
16			16									
17			17		2	000.						
18		or depletion	18		,	••••						
19	Other (list) ▶		19									
20	` ′	lines 5 through 19	20		7.	850.						
21	•	line 3 (rents) and/or 4 (royalties). If										
21		instructions to find out if you must										
	file Form 6198		21		-7,	400.						
22		estate loss after limitation, if any,										
	on Form 8582 (see in		22	(7.4	00.)	()()
23a	•	eported on line 3 for all rental prope				23a	`	4	50.			
b		eported on line 4 for all royalty prop				23b						
С		eported on line 12 for all properties				23c						
d		eported on line 18 for all properties				23d						
е		eported on line 20 for all properties				23e		7,8	50.			
24		e amounts shown on line 21. Do no							24			
25		sses from line 21 and rental real estate		•		nter tot	al losses her	е.	25 (7.4	400.
26		ate and royalty income or (loss).									. ,	/
20		V, and line 40 on page 2 do not										
		10) line 5 Otherwise include this a						511	26		-7	.400.



Oklahoma Individual Income Tax Declaration for Electronic Filing

NOTE: Do not mail Oklahoma Tax Return - Form 511 or Form 511-NR. See instructions on Page 2 to determine if you are required to send Form 511-EF to the OTC.

2021 Form 511-EF

Yo	our first name	and middle initial	Last name		Your social	3	3 6	6	9	1 9	2	7
_	NAMRATHA				security number		J 0					
III	a joint return	, spouse's first name and middle initial	I Last name		Spouse's social security number							
М	ailing addres	s (number and street, including apartn	nent number, rural route	or PO Box)					E :(ing sta	atuc	
	5390 E 8	31ST ST	522						ГП	iiig st	สเนธ	1
C	ity, State, ZIP					Total	numbe	r of e	xemı	otions		1
L	TULSA		OK 74137									1
F	Part One	e - Tax Return Informat	tion (whole do	llars or	nly)							
		ma Adjusted Gross Income (511, Li	•									
		ted Gross Income: All Sources (51	*							6	0960	00 (
		ma Income Tax and Use Tax (511,									2493	
		na Income Tax Payments and Cree				_					2918	
		(511, Line 37 or 511-NR, Line 38).										5 00
		Due (511, Line 42 or 511-NR, Line	•									00
	balance Internal	lance due return with an electronic due return with a non-electronic pa Revenue Code (IRC) of the IRS prov f the due date falls on a weekend or	lyment, enclose a paym vides for a later due date	ent with the e, your payı	511-V and submit on ment may be made b	n or be y the la	fore the ater due	due d date a	late of	f April 1 ill be co	15th. I	
F	art Two	- Declaration of Taxp	ayer									
	_6a >	I consent that my refund be directly If I have filed a joint return, this is a	deposited as designated on irrevocable appointment	d in the elect	ronic portion of my 20 er spouse as an agent	21 Okl	ahoma ii eive the i	ncome refund	tax re	eturn.		
	6b	I authorize the Oklahoma State Tre entry to the financial institution acco										
		and/or a payment of estimated tax. receive confidential information nec	I also authorize the finar	ncial institution	ons involved in the pro	cessin	g of the					
		a balance due return, I understand thable for the tax liability and all applicab			OTC) does not receiv	e full aı	nd timely	paym	ent of	my tax	liabili	ty, I
	Originator (E tax return. To	ies of perjury, I declare I have compar RO), and the amounts described in Pa the best of my knowledge and belief, edules and statements, be sent to the	art One above, agree with my return is true, correct	h the amoun	ts shown on the corre	spondii	ng lines (of my 2	2021 (Oklahor	na inc	ome
		y using a computer system and softwa of all information pertaining to my use								Oklahon	na Tax	(
	Sign											
	Here: Your	Signature	Date	Spouse's	Signature (If joint re	eturn, l	ooth mu	st sig	n)	Date	ı	
F	Part Thre	ee - Declaration of Ele	ctronic Return	Origin	ator (ERO) a	nd F	Paid I	Prer	are	er		
	I declare I had collectors are obtained the followed all of Preparer, und	ve reviewed the above taxpayer's return not responsible for reviewing the taxpa taxpayer's signature on Form 511-EF a ther requirements described in Pub. 13- ler penalties of perjury I declare I have nd belief, they are true, correct, and cor	n and the entries on Form ayer's return; however, the and I have provided the tax 45, Handbook for Electror examined the above taxp.	n 511-EF are by must ensu payer with a nic Filers of I ayer's return	complete and correct in Form 511-EF accur a copy of all forms and individual Income Tax F and accompanying so	to the beately resident informates Returns shedules	est of my flects the ation to b (Tax Yea s and sta	know e data e filed ar 2021 atemen	ledge. on the with th l). If I a its, and	. (EROs return. he OTC am also d to the) I hav , and I a Pai best o	re have d
	ERO Use Only			03/2	2/2022							
	_	RO or Paid Preparer's Signature		Date	PTII	N						
	Paid Preparer			03/2	2/2022 D02	0827	03					
	Use Only	Paid Preparer Signature		Date	2/2022 P02 PTII		<u> </u>					
	Firm name (or yours if self-employed), SYAM PRI	YA RAM SAGAR G	JPTA TAI	LLAM							
		address and ZIP 2530 PEB										
		Phone numb	per (<u>678</u>) <u>965-9</u>	522								
1												

FAILURE TO SUBMIT THIS PAGE WILL DELAY PROCESSING OF YOUR RETURN











Oklahoma Resident Income Tax Return

	ÿ©	
Ä		
	NX.	

Your	Social Security Number		Spouse's Soc (joint return only)	ial Security Nu			-	NDED RETU			
	336-69-1927	Place an 'X' in this box if this taxpayer is deceased			Place an '2 box if this is decease	taxpayer	this i	Place an 'X' in this box if this is an amended 511. See Schedule 511-I.			
Nan	e and Address - Please Pri	nt or Type									
Your f	rst name	Middle initial Last name		If a joint return,	spouse's first name	Middle init	al Last n	ame			
NAN	IRATHA REDDY	SEELAM									
Mailin	g address (number and street, including	g apartment number, rural rout	e or PO Box) City		S	tate ZIP or Pos	stal Code	Country			
539	0 E 81ST ST, APT.	522	TUI	LSA		OK 7413	7				
	1 X Single			* Note: If c	laiming Special Ex	emption, see in	structions	s on page 9 of	511 Packet.		
					Regul	ar *Special	Blind				
	2 Married filing joint	return (even if only one	e had income)	ll su	Yourself 1				(a)		
tatus	3 Married filing sepa		lin the haves	 	Spouse 0	+ +		0	(b)		
Filing Status	(II spouse is also III	ling, list name and SSN SSI		Exemptions	Nu	mber of depe	ndents		(c)		
Ε					Add the Totals fr	om boxes (a), (b					
	1 Lload of bousehold	d with qualifying paraon		Note: If ye	ou may be claime				enter "0" in the		
	4 Head of household	d with qualifying person	l	Total box	for your regular e	xemption.					
		er) with dependent child pouse died in box at rig		Age 65	or Older? (Plea	se see instructions		Yourself	Spouse		
	,								·		
PA	RT ONE: TO ARRIVE	AT OKLAHOMA A	ADJUSTED G	ROSS INC	OME		Ro	ound to Neare	st Whole Dollar		
1	Federal adjusted gross incor	me (from Federal 1040	or 1040-SR)				1		60960.00		
2	Oklahoma Subtractions (pro	vide Schedule 511-A)					2		.00		
4	Line 1 minus line 2 Out-of-state income, except	wages. Describe (4a)					3		60960.00		
	(Provide Federal schedule with	detailed description; see	e instructions)			···	4b		.00		
5	Line 3 minus line 4b						5		60960.00		
6	Oklahoma Additions (provide	e Schedule 511-B)					6		.00		
7	Oklahoma adjusted gross (If line 7 is different than						7		60960.00		
PA	RT TWO: OKLAHOMA				}						
8	Oklahoma Adjustments (pro	vide Schedule 511-C) .					8		.00		
9	Oklahoma income after adju	stments (line 7 minus l	ine 8)				9		60960.00		
		nnlete lines 10-11. If line 4h		0		-l-t- l' 40 44					

2021 Form 511 - Resident Income Tax Return - Page 2





Your Social Name(s) shown on Form 511: NAMRATHA REDDY SEELAM Security Number: 336-69-1927 PART TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS continued Oklahoma itemized deductions (from Schedule 511-D, line 11) or Oklahoma standard deduction (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Widow(er): \$12,700 • Head of Household: \$9,350) 6350.00 Exemptions: Enter the total number of exemptions claimed on page 1..... 11 1000.00 11 Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5)..... 7350.00 13 Oklahoma Taxable Income (line 9 minus line 12) 53610.00 (a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) or 14 if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14 2493.00 14a (b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K), add the installment payment here and enter a "4" in the box on line 14 .00 14b Oklahoma Income Tax (line 14a plus line 14b) 14 2493.00 STOP AND READ: If line 7 is equal to or larger than line 1, complete lines 15 and 16. If line 7 is smaller than line 1, complete Schedules 511-F and 511-G. Oklahoma child care/child tax credit (see instructions)..... .00 Oklahoma earned income credit (see instructions)..... 16 .00 Credit for taxes paid to another state (provide Form 511TX)..... 17 .00 Form 511CR - Other Credits Form. List 511CR line number claimed here:..... 18 18 .00 19 Income Tax (line 14 minus lines 15-18) Do not enter less than zero 19 2493.00 DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42. PART THREE: TAX, CREDITS AND PAYMENTS .00 (For use tax table, see page 14 of the Packet) If you certify that no use tax is due, place an 'X' here: X Balance (add lines 19 and 20) 2493.00 21 21 Oklahoma withholding (provide all W-2s, 1099s or other withholding statements)... 22 2918.00 22 2021 estimated tax payments (qualified farmer .00 23 23 24 2021 payment with extension00 25 .00 .00 26 Natural Disaster Tax Credit (provide Form 576)..... 27 .00 Credits from Forma) 577b) 28 .00 28 Amount paid with original return plus additional paid after it was filed (amended return only)..... .00

2021 Form 511 - Resident Income Tax Return - Page 3



The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.

on Form 511: NAMRATHA REDDY SEELAM Security I					Number: 336–69–1927	
PA	RT THREE: TAX, CREDITS AND PAY	MENTS contined				
30	Payments and credits (add lines 22-29 from page 2)				30	2918.00
31	Overpayment, if any, as shown on original return and/or prior amended return(s) or					
	as previously adjusted by Oklahoma (amended return only)					.00
32	Total payments and credits (line 30 minus 31)					2918.00
PART FOUR: REFUND						
33	If line 32 is more than line 21, subtract line 21 from line 32. This is your overpayment				33	425.00
34	Amount of line 33 to be applied to 2022 estimated tax (original return only)					
	(For further information regarding estimated tax, see page 5 of the 511 Packet.) 34 .00 Schedule 511-H provides you with the opportunity to make a financial gift from your refund to a variety of Oklahom				1	
	organizations. Please place the line number more than one organization, put a "99" in the	of the organization from S	chedule 511-H in the box			
35	Donations from your refund (total from Sch	edule 511-H)	35	00		
				.00		
36	Total deductions from refund (add lines 34	and 35)			36	.00
37	Amount to be refunded to you (line 33 minu	us line 36)			37	425.00
Direct Deposit Note: Is this refund going to or through an account that is located outside of the United States? No						
Verify your account and routing numbers are correct. If your direct deposit fails Deposit my refund in my: Routing						
to p	rocess or you do not choose direct		Routing Number:			
See	osit, you will receive a <u>debit card</u> . the 511 Packet for direct deposit and	avillus accoulti	Account			
debi	it card information.		Number:			
PART FIVE: AMOUNT YOU OWE						
38	If line 21 is more than line 32, subtract line 32 from line 21. This is your tax due				38	.00
39	Donation: Public School Classroom Support Fund (original return only)				39	.00
- 55					00	.00
40	Underpayment of estimated tax interest (annualized installment method					.00
	(ii you have an anacipayment of commuted	rtax (iiio 40) a overpayiii	sit (iiile 66), dee iilatida	10110.)		
41	For delinquent payment add penalty of 5%		\$			
	plus interest of 1.25% per month\$				41	.00
						0.00
Total tax, donation, penalty and interest (add lines 38-41)					42	0.00
	penalty of perjury, I declare the information contained in the nents and schedules, is true and correct to the best of my		e an 'X' in this box if the Oklahom discuss this return with your tax			
Тахра	yer's signature Date	Spouse's signature	Date	Paid Preparer's sign	ature	Date
Тахра	ıyer's	Spouse's occupation		SYAM PRIYA RAM SAGA Paid Preparer's add	R GUPTA TALLAN	03/22/2022 e number (678) 965-9522
occupation NETWORK ENGINEER				_ 2530 PEBB		
Daytime Phone (optional)		Daytime Phone (optional)		CUMMING G		GA 30041

<u>Do not staple</u> documentation to this form. To attach items, please use a paper clip. Mailing Address for this form: PO Box 26800, Oklahoma City, OK 73126-0800