| E1040 | | artment of the Treasury-Internal Revenue Servi S. Individual Income Tax | | (99) urn | 202 | 21 | OMB No. 15 | 545-0074 | IRS U | se Only | –Do not v | vrite or staple | in this space. | |
|---|----------|---|---|--|---------------------------|---------------------------|---------------|---------------------------------------|---------------------|-------------------|---------------------------------|---|-------------------------------|--|
| Filing Status Check only one box. | lf yo | Single Married filing jointly unchanged the MFS box, enter the normal son is a child but not your dependent | ame of | - | separately use. If you | . , | | | | , | | , 0 | low(er) (QW) he qualifying | |
| Your first name | e and m | ddle initial | Last na | me | | | | | | | Your so | ocial securi | ty number | |
| MAYANK | | | | SHAH | | | | | | | 857-58-8245 | | | |
| If joint return, spouse's first name and middle initial | | | | Last name | | | | | | | Spouse's social security number | | | |
| | | er and street). If you have a P.O. box, see VISTA DR | instructio | ons. | | | | | Apt. no. | | Check | here if you | | |
| City, town, or post office. If you have a foreign address, also cor | | | | mplete spaces below. State | | | | ZIP | I ZIP CODE | | | spouse if filing jointly, want \$3 to go to this fund. Checking a | | |
| CHARLOTTE | | | | | | | NC | | | | box below will not change | | | |
| Foreign country name | | | | Foreign province/state/ | | | ty | Fore | 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 intere | st in an | y virtual | curre | ncy? | Yes | X No | |
| Standard Deduction | | eone can claim: You as a de Spouse itemizes on a separate retur | n or you | were a | dual-statu | s alien | _ | | f | | . 4057 | | | |
| | | Were born before January 2, 1 | 957 | Are bl | | oouse | | | fore Jan | | , | Is b | | |
| Dependent | | | | (2) Social security (3) Relationshi number to you | | | | (4) ✓ if qualifie Child tax credit | | | | | | |
| lf more than four | (1) F | irst name Last name | | | | | | | | | reall | Credit for of | ther dependents | |
| dependents, | | | | | | | | | | \exists | | | | |
| see instruction | s —— | | | | | | | | | \square | | | | |
| and check here ▶ 🗌 | | | | | | | | | | $\overline{\Box}$ | | | | |
| | 1 | Wages, salaries, tips, etc. Attach F | - orm(s) \ | N-2 . | | | | | | | . 1 | 1 | 79,577. | |
| Attach Sch. B if required. | 2a | | 2a | | | bТ | axable inter | est | | | 21 | | | |
| | 3a | · · | 3a | | | b Ordinary dividen | | | | | . 3k |) | | |
| | 4a | IRA distributions | 4a | | | b Taxable amount | | | | | |) | | |
| | 5a | Pensions and annuities | 5a | | | b Taxable amount | | | | | . 5k | b | | |
| Standard | 6a | Social security benefits | 6a | b Taxab | | | | able amount | | | . 6k | b | | |
| Deduction for- | 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here | | | | | | | 7 | | -40. | | | |
| 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 | | -7,576. | | | |
| | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, | and 8. This is your total income | | | | | ▶ 9 | | 71,961. | | | | |
| | 10 | Adjustments to income from Sche | Schedule 1, line 26 | | | | | | . 10 |) | | | | |
| | 11 | Subtract line 10 from line 9. This is your adjusted gross | | | | | | | | ► <u>1</u> 1 | 1 | 71,961. | | |
| | 12a | | | | | | | | 0. | | | | | |
| Head of household, \$18,800 | b | Charitable contributions if you take the standard deduction (see instructions) 12b 300. | | | | | | | 0. | | | | | |
| | c | Add lines 12a and 12b | | | | | | | | | c | 12,850. | | |
| If you checked any box under Standard | 13 | Qualified business income deduction from Form 8995 or Form 8995-A | | | | | | | | | | | | |
| | 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 | 59,111. | |

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

Form **1040** (2021)

| Form 1040 (2021 | 1) | | | | | | | | | Page 2 |
|--------------------------------------|--|---|--------------------|---------------------|------------------|--|-----------|--------------|--------------|--------------------|
| | 16 | Tax (see instructions). Check | if any from Form | (s): 1 🗌 881 | 4 2 4972 | 3 🗌 | | 16 | | 8,756. |
| | 17 | Amount from Schedule 2, lin | ne3 | | | | | 17 | | |
| | 18 | Add lines 16 and 17 | | | | | | 18 | 1 | 8,756. |
| | 19 | Nonrefundable child tax credit or credit for other dependents from Schedule 8812 | | | | | | | ļ | |
| | 20 | Amount from Schedule 3, lin | ne8 | | | | | 20 | | |
| | 21 | Add lines 19 and 20 | | | | | | 21 | | |
| | 22 | Subtract line 21 from line 18 | . If zero or less, | enter -0 | | | | 22 | - | 8,756. |
| | 23 | Other taxes, including self-e | | | | | | 23 | | 0. |
| | 24 | Add lines 22 and 23. This is your total tax | | | | | | | | 8,756. |
| | 25 | Federal income tax withheld from: | | | | | | | | |
| | а | Form(s) W-2 | | | | 25a 10 | ,606. | | | |
| | b | Form(s) 1099 | | | | 25b | | | | |
| | С | Other forms (see instructions | , | | | 25c | | _ | | |
| | d | Add lines 25a through 25c | | | | | | 25d | 10 | 0,606. |
| If you have a | 26 | 2021 estimated tax payments and amount applied from 2020 return | | | | | | | L | |
| 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 | | L | Schedule 8812 | 28 | | | | |
| | 29 | American opportunity credit | from Form 8863 | 3, line 8 | | 29 | | 1 | | |
| | 30 | Recovery rebate credit. See instructions | | | | | | | | |
| | 31 | Amount from Schedule 3, lin | | | | 31 | | 1 | | |
| | 32 | Add lines 27a and 28 through 31. These are your total other payments and refundable credits | | | | | | | | 1,400. |
| | 33 | Add lines 25d, 26, and 32. These are your total payments | | | | | | 33 | 1: | 2,006. |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | | | | | | 34 | | 3,250. |
| neiuliu | 35a | Amount of line 34 you want refunded to you. If Form 8888 is attached, check here | | | | | | 35a | | 3,250. |
| Direct deposit? | ►b | Routing number X X X X X X X X X X X F C Type: Checking | | | | | | | | |
| 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 | y Do you want to allow another person to discuss this return with the IRS? See | | | | | | | | | |
| Designee | ins | tructions | | omplete b | elow. | X No | | | | |
| | | Designee's name ▶ | | Phone Personal | | | | | | |
| 0. | | | hat I have evening | no. ► | | | ber (PIN) | | | |
| Sign | | der penalties of perjury, I declare t ief, they are true, correct, and com | | | 1 2 0 | | , | | , | 0 |
| Here | Yo | Your signature | | Date | Your occupation | | If the | IRS ser | nt you an lo | dentity |
| | | | | | | | ection Pl | IN, enter it | | |
| Joint return? | | | | | SOFTWARE | | | inst.) 🕨 | | |
| See instructions. Keep a copy for | Sp | ouse's signature. If a joint return, k | Date | Spouse's occupation | tion | e IRS sent your spouse an | | | | |
| your records. | , | | | | | tity Protection PIN, enter it here inst.) ► | | | | |
| | Ph | one no. (203)685-347 | 9 | Email address | MAAYMYKGA | AH@GMAIL.CO | M | | | |
| | | parer's name | Preparer's signat | | | Date | PTIN | | Check if: | |
| Paid | | PRIYA RAM SAGAR GUPTA TALLAM | | | СПЪТА ТАТ.Т.УМ | | P0208 | 2703 | | employed |
| Preparer | | n's name GLOBAL TAX | | | | | | | 55-9522 | |
| Use Only | | n's address > 2530 Pebbl | | n Cummin | a GA 30041 | | | 's EIN ► | | .017196 |
| Go to www.irc.or | | 1040 for instructions and the late | | 00.00011 | - | REV 02/10/22 RRC | 1 | | | 1040 (2021) |
| ao to www.iis.go | JV/1 UII | norror nor manuoliona anu lhe lale | semonnau011. | | BAA | REV 02/16/22 PRO | | | LOUID | |