E 1040 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 one box.	If yo	Single Married filing jointly but checked the MFS box, enter the notion is a child but not your dependent	- ame of	ried filing separately f your spouse. If you	· · · —		•	. –	_			
Your first name and middle initial				Last name						Your social security number		
MYTHRI				MASETTI					***-**-4040			
If joint return, spouse's first name and middle initial				Last name					Spouse's social security number			
Home address	(numb	er and street). If you have a P.O. box, see	uctions.			Apt. no.	P	residen	itial Election	on Campaign		
9229 HERITAGE WOODS PL									Check here if you, or your spouse if filing jointly, want \$3			
City, town, or post office. If you have a foreign address, also cor				mplete spaces below. State							tly, want \$3 Checking a	
CHARLOTTE					NC	28	28269			w will not		
Foreign country name				Foreign province/state/county			Foreign postal code		our tax	or refund. You	Spouse	
At any time du	ring 2	021, did you receive, sell, exchange,	or oth	nerwise dispose of ar	ny financial intere	est in an	y virtual c	currency	y?	Yes	⊠ No	
Standard Deduction	_	neone can claim:	•		se as a depende s alien	ent		0				
Age/Blindness	You	: Were born before January 2, 1	957	Are blind Sp	ouse: Was	born be	efore Janu	iary 2, 1	1957	☐ Is bli	ind	
Dependents	s (see	instructions):		(2) Social securi	ty (3) Relation	onship	(4)	if quali	ifies for	(see instru	ctions):	
If more	(1) F	irst name Last name		number	to yo	u	Child	tax cred	it (Credit for oth	ner dependents	
than four												
dependents, see instructions	s ——											
and check												
here										[<u> </u>	
	1	Wages, salaries, tips, etc. Attach F	orm(s)) W-2					1		78,918.	
Attach	2a	Tax-exempt interest	2a		b Taxable interest				2b			
Sch. B if required.	3a	Qualified dividends	3a		b Ordinary div	ridends			3b			
	4a	IRA distributions	4a		b Taxable amo	ount .			4b			
	5a	Pensions and annuities	5a		b Taxable amo	ount .			5b			
Standard Deduction for— • Single or	6a	Social security benefits	6a ∢		b Taxable amo	ount .			6b			
	7	Capital gain or (loss). Attach Sched	dule D	if required. If not red	uired, check her	re .			7			
Married filing	8	Other income from Schedule 1, line	e 10						8		-6,939.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come			. ▶	9	7	71,979.	
• Married filing jointly or Qualifying widow(er), \$25,100	10	Adjustments to income from Sche	dule 1,	, line 26					10			
	11_	Subtract line 10 from line 9. This is	your a	adjusted gross inco	me			. ▶	11		71,979.	
	12a	Standard deduction or itemized	deduc	ctions (from Schedul	e A)	12a	12,	,550.				
• Head of household, \$18,800	b	Charitable contributions if you take	the sta	andard deduction (se	e instructions)	12b		300.				
	С	Add lines 12a and 12b							12c	1	12,850.	
• If you checked any box under Standard Deduction, see instructions.	13	Qualified business income deducti	on fror	m Form 8995 or Form	n 8995-A				13			
	14	Add lines 12c and 13]	12,850.	
	15	Taxable income. Subtract line 14	from li	ine 11. If zero or less	, enter -0				15	Ē	59,129.	

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

Form **1040** (2021)

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	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	8,756.	
	17	Amount from Schedule 2, line 3	17		
	18	Add lines 16 and 17	18	8,756.	
	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	8,756.	
	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	8,756.	
	25	Federal income tax withheld from:			
	а	Form(s) W-2			
	b	Form(s) 1099			
	С	Other forms (see instructions)			
If you have a qualifying child,	d	Add lines 25a through 25c	25d	10,261.	
	26	2021 estimated tax payments and amount applied from 2020 return	26	>	
	27a	Earned income credit (EIC)	T		
attach Sch. EIC.	b	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 ► ☐ Nontaxable combat pay election			
	c	Prior year (2019) earned income			
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28			
	29	American opportunity credit from Form 8863, line 8	1		
	30	Recovery rebate credit. See instructions	1		
	31	Amount from Schedule 3, line 15	1		
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32		
	33	Add lines 25d, 26, and 32. These are your total payments	33	10,261.	
D. (l	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,505.	
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □	35a	1,505.	
Direct deposit?	▶b	Routing number ★ ★ ★ ★ ★ X X X X X ★ Checking Savings			
See instructions.	▶d	Account number * * * * * * * * *			
	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 structions	pelow.	X No	
•	De	signee's Phone Personal identif	fication _I		
		me ▶ number (PIN) ▶			
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which			
Here				t you an Identity	
	, 10			N, enter it here	
Joint return?		STUDENT	inst.) ▶		
See instructions. Keep a copy for your records.	Sp	Ident	f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.)		
	Ph	one no. (216)507-9254 Email address MYTHRI.MASHETTY@GMAIL.COM			
Paid Preparer	Pre	eparer's name Preparer's signature Date PTIN		Check if:	
	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/09/2022 *****	2703	Self-employed	
			ne no. (678)965-9522	
Use Only			's EIN ▶		
Go to www ire a	ov/Forn	of 1040 for instructions and the latest information		Form 1040 (2021)	