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 notes on is a child but not your dependent	– ame of	ried filing separately (l	· —		, ,	_			
Your first name and middle initial				ame	1	Your social security number					
SITAL K				PAL					***-**-5532		
If joint return, spouse's first name and middle initial				Last name					Spouse's social security number		
Home address (number and street). If you have a P.O. box, see 47 COTTAGE STREET				instructions.				Check	Presidential Election Campaign Check here if you, or your		
City, town, or post office. If you have a foreign address, also con				mplete spaces below. State						ntly, want \$3 Checking a	
JERSEY CITY					NJ	073	306		elow will not		
Foreign country name				Foreign province/state/	county	Foreign postal code		_	ax or refund. You		
At any time du	ring 2	021, did you receive, sell, exchange,	or oth	erwise dispose of an	y financial intere	st in any	virtual curi	ency?	☐ Yes	⊠ No	
Standard Deduction		neone can claim: You as a de Spouse itemizes on a separate return	•		e as a depende alien	nt		5			
Age/Blindness	You	: Were born before January 2, 1	957	Are blind Sp	ouse: Was	born bef	ore Januar	, 2, 1957	☐ Is bl	lind	
Dependents	s (see	instructions):		(2) Social security	(3) Relatio	nship	(4) ✓ if	qualifies f	or (see instru	uctions):	
If more	(1) F	First name Last name		number	to you	u	Child tax	credit	Credit for ot	ther dependents	
than four						0					
dependents, see instructions											
and check	, 										
here ▶ □											
	1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2				1	i	81,244.	
Attach	2a	Tax-exempt interest	2a		b Taxable inte	rest .		. 2	b		
Sch. B if required.	3a	Qualified dividends	3a		b Ordinary divi	idends .		. 3	b		
required.	4a	IRA distributions	4a	4	b Taxable amo	ount		. 4	b		
	5a	Pensions and annuities	5a		b Taxable amo	ount		. 5	b		
Standard Deduction for—	6a	Social security benefits	6a 🖣		b Taxable amo	ount		. 6	b		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □								-2,731.	
 Single or Married filing 	8	Other income from Schedule 1, line	e 10					. [8	3 .	-7,877.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome			▶ 9	,	70,636.	
• Married filing jointly or Qualifying widow(er), \$25,100	10	Adjustments to income from Sche	dule 1,	line 26				. 1	0		
	11	Subtract line 10 from line 9. This is	your a	adjusted gross inco	me			▶ 1	1	70,636.	
	12a	Standard deduction or itemized	deduc	tions (from Schedule	e A)	12a	12,5	50.			
• Head of household, \$18,800	b	Charitable contributions if you take	the sta	andard deduction (see	instructions)	12b	3	00.			
	С	Add lines 12a and 12b						. 12	<u> c</u>	12,850.	
• If you checked any box under Standard Deduction, see instructions.	13	Qualified business income deducti	ion fror	m Form 8995 or Form	1 8995-A			. 1	3		
	14	Add lines 12c and 13						. 1	4	12,850.	
	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less,	enter -0			. 1	5	57,786.	

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 8814 2 4972 3	16	8,459.					
	17	Amount from Schedule 2, line 3	17						
	18	Add lines 16 and 17	18	8,459.					
	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	8,459.					
	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	8,459.					
	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	11,413.					
	26	2021 estimated tax payments and amount applied from 2020 return	26	>					
	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		-						
	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	11 412					
	33	Add lines 25d, 26, and 32. These are your total payments	33	11,413.					
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,954.					
Direct deposit?	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here \rightarrow Routing number * * * * * X X X X \rightarrow c Type: Checking Savings	35a	2,934.					
Direct deposit? See instructions.	►b	Routing number * * * * * X X X X X							
	► d								
	36	Amount of line 34 you want applied to your 2022 estimated tax > 36	07						
Amount You Owe	37 38	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions Estimated tax penalty (see instructions)	37						
Third Party		Estimated tax penalty (see instructions)							
Designee		structions	pelow.	X No					
· ·	De	signee's Phone Personal ident	fication						
	naı	me ▶ no. ▶ number (PIN)	>						
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic							
Here				,					
	YO	ÿ i		nt you an Identity N, enter it here					
Joint return?			inst.) ▶						
See instructions.	Sp		the IRS sent your spouse an						
Keep a copy for your records.	,		dentity Protection PIN, enter it here see inst.) ▶						
, ca. 1000.ac.			IIISt.)						
		one no. (551)227-8333 Email address		Chook if:					
Paid Preparer		eparer's name Preparer's signature Date PTIN	2722	Check if:					
		1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/02/2022 *****		Self-employed					
Use Only				678)965-9522					
			ı's EIN ▶						
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/17/22 PRO		Form 1040 (2021)					