E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2021

OMB No. 1545-007

IBS Use Only—Do not write or staple in this space

Filing Status Check only one box.	If yo	Single X Married filing jointly u checked the MFS box, enter the on is a child but not your dependent	name of y								
Your first name and middle initial Last name				t name					Your social security number		
SANDEEP VEMP				MPATI					179-23-5549		
If joint return, spouse's first name and middle initial Last name				me					Spouse's social security number		
SNEHA KOND				DURU					APPLIED FOR		
Home address	er and street). If you have a P.O. box, se	tions.				Apt. no.	Preside	ntial Election	on Campaign		
1320 E A	NQUIN RD						Check here if you, or your				
City, town, or post office. If you have a foreign address, also complete sp				paces below. State			ZIP		spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
SCHAUMBURG					_	60173					
Foreign country name				Foreign province/state	/coun	inty Fe		eign postal code	your tax or refund.		
										You	Spouse
At any time du	ring 20	021, did you receive, sell, exchange	e, or othe	rwise dispose of ar	ny fina	ancial interest i	n an	y virtual curren	су?	Yes	⊠ No
Standard Deduction	_	eone can claim:	•	•		a dependent					
Age/Blindness	You:	☐ Were born before January 2,	1957	Are blind Sp	ouse	: Was bor	n be	efore January 2,	1957	☐ Is bl	ind
Dependents				(2) Social securit		(3) Relationsh				r (see instru	
•		rst name Last name		number	to you				l '	her dependents	
lf more than four									<u> </u>		
dependents,											
see instructions and check	s										
here ▶ □											
	. 1	Wages, salaries, tips, etc. Attach	Form(s) \	N-2					1	1	09,000.
Attach	2a	Tax-exempt interest	2a		b T	axable interest	:		2b		
Sch. B if required.	3a	Qualified dividends	3a			ordinary divider			3b	,	
	4a	IRA distributions	4a			axable amoun			4b	,	
	5a	Pensions and annuities	5a		b T	axable amount	t.		5b)	
tandard leduction for — Single or Married filing separately, \$12,550 Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800	6a	Social security benefits	6a		b T	axable amount	t.		6b		
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here							7		
	8	Other income from Schedule 1, line 10							8		
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9	10	09,000.
	10	Adjustments to income from Schedule 1, line 26							10)	
	11_	Subtract line 10 from line 9. This is your adjusted gross income						- 11	1	09,000.	
	12a	Standard deduction or itemized deductions (from Schedule A) 12a 25, 10									
	b	Charitable contributions if you take the standard deduction (see instructions)									
	С	Add lines 12a and 12b							120	c i	25,100.
If you checked any box under Standard Deduction, see instructions.	13	Qualified business income deduc	tion from	Form 8995 or Form	n 899	5-A			13	3	
	14	Add lines 12c and 13							14	; :	25,100.
	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0								i	83,900.

Form 1040 (202	1)									Page Z	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	9,961.	
	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17							18	9,961.	
	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	9,961.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21				23	0.	
	24	Add lines 22 and 23. This is your total tax						24	9,961.		
	25	Federal income tax withheld from:									
	а	Form(s) W-2				25a	14,	000.			
	b	Form(s) 1099				25b			_		
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c							25d	14,000.	
If you have a	26	2021 estimated tax payment				1 1			26		
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a					
allacii Scii. Lio.		Check here if you were I									
		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			Schedule 8812	28					
	29	American opportunity credit				29					
	30	Recovery rebate credit. See				30	1,	400.			
	31	Amount from Schedule 3, lin	ne 15			31					
	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	15,400.	
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you ov	erpaid		34	5,439.	
Herana	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □							35a	5,439.	
Direct deposit?	▶b	Routing number 0 7 1	0 0 0 0	1 3	▶ c Type: 🗶	Checkin	g 🗌 Sa	avings			
See instructions.	►d	Account number 9 2 5 9 8 1 7 0 1									
	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 details	s on how to pay, s	ee instru	ctions	. ▶	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
Third Party		you want to allow another	person to disc	cuss this retur	n with the IRS?						
Designee		nstructions								X No	
		Designee's Phone Personal id- name ► no. ► number (PII									
Cian		der penalties of perjury, I declare t	hat I have examine		Laccompanying sch	edules and		, ,		t of my knowledge and	
Sign			of preparer (other than taxpayer) is based on all information								
Here	Yo	Your signature		Date Your occupation						nt you an Identity	
	k.				SOFTWARE ENGINEER				Protection PIN, enter it here (see inst.) ▶		
Joint return? See instructions.	0:-			Data		,	If the IRS sent your spouse an				
Keep a copy for	Spouse's signature. If a joint return, both must sign.			Date	on				ection PIN, enter it here		
your records.				HOME MAKER					inst.)		
	Ph	Phone no. (224) 806-5499		Email address VSANDEEP.08@GMAIL.COM							
Deid	Pre	parer's name	Preparer's signat	ure		Date		PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	RAM SAGAR GUPTA TALLAM 03/23/202			/2022 E	02082	2703	Self-employed		
Preparer		Firm's name ▶ GLOBAL TAXES LLC					Phor	Phone no. (678) 965-9522			
Use Only	Fir	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041							Firm's EIN ► 30-1017196		
		data to be a constant of the constant of									