Form	1	0	Department of the Treasury—Internal Revenue Service	(99)
		<b>U4U</b>	Department of the Treasury—Internal Revenue Service  U.S. Individual Income Tax Retu	ırn

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 ou checked the MFS box, enter the son is a child but not your depende	name of	= :								
Your first name and middle initial Last na				me					١	Your social security number		
AMITHA NEE			NEEF	RATI					(	095-17-0727		
If joint return, spouse's first name and middle initial Las			Last na	me					8	Spouse's social security number		
	er and street). If you have a P.O. box, se	ee instruction	tructions.				1 1 _		Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change			
9303 SH		I a.			_	ZIP code to						
City, town, or p	ce. If you have a foreign address, also	spaces below.										
Foreign countr	y name		F	Foreign province/sta	ate/cou	'county F				your tax or refund.  You Spouse		
At any time du	ıring 20	021, did you receive, sell, exchang	e, or othe	rwise dispose of	any fir	ancial interest	in ar	y virtual c	urrenc	y?	Yes	⊠ No
Standard Deduction	_	<b>leone can claim:</b> You as a compose itemizes on a separate retrieve	•			s a dependent n						
Age/Blindness	s You	: Were born before January 2,	1957	Are blind	Spous	e: Was be	orn be	efore Janu	iary 2,	1957	☐ Is bl	lind
	s (see instructions):			(2) Social security (3) Relations		ship (4) ✓ if qual		lifies for	r (see instru	uctions):		
If more	(1) First name Last name			number to you				Child tax cred			-	ther dependents
than four												
dependents,	_											
see instruction and check	s —											
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s) \	W-2						1		58 <b>,</b> 664.
Attach	2a	Tax-exempt interest	2a		b	Taxable intere	st			2b		11.
Sch. B if required.	3a	Qualified dividends	3a		b	Ordinary divid	ends			3b		
required.	4a	IRA distributions	4a		b	Taxable amou	nt .			4b		
	5a	Pensions and annuities	5a		b	Taxable amou	nt .			5b		
Standard	6a	Social security benefits	6a		b	Taxable amou	nt .			6b		
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ □						7				
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, line 10								8		-5,760.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9		52,915.	
<ul> <li>Married filing</li> </ul>	10	Adjustments to income from Schedule 1, line 26							10			
jointly or Qualifying	11_	Subtract line 10 from line 9. This is your adjusted gross income						11	!	52,915.		
widow(er), \$25,100	12a	Standard deduction or itemized deductions (from Schedule A)   12a   12,550.										
<ul><li>Head of</li></ul>	b	Charitable contributions if you tak	e the star	ndard deduction (s	see ins	tructions) 1:	2b		300			
household, \$18,800									120	;	12,850.	
If you checked	13	Qualified business income deduc	ction from	Form 8995 or Fo	orm 89	95-A				13		
any box under Standard	14	Add lines 12c and 13								14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0							15		40,065.	

Form 1040 (2021	)									Page Z	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	4,610.	
	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17								4,610.	
	19	Nonrefundable child tax cree	dit or credit for o	ther depender	nts from Schedule	8812			19		
	20	Amount from Schedule 3, lin	ne 8						20	2,000.	
	21	Add lines 19 and 20							21	2,000.	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	2,610.	
	23	Other taxes, including self-e							23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>					. 1	24	2,610.	
	25	Federal income tax withheld									
	а	Form(s) W-2				25a		, 297	<u>' •  </u>		
	b	Form(s) 1099				25b					
	С	Other forms (see instructions				25c					
	d	Add lines 25a through 25c							25d	5,297.	
If you have a	26	2021 estimated tax payment			NΤΩ	1 1			26		
qualifying child, attach Sch. EIC. [	27a	Earned income credit (EIC)				27a					
	h	Check here if you were I January 2, 2004, and you taxpayers who are at least a Nontaxable combat pay elec	u satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for						
	b c	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					
	31	•				31			-		
	31 Amount from Schedule 3, line 15							32	1		
	33 Add lines 25d, 26, and 32. These are your total payments							33	5,297.		
Refund	34	If line 33 is more than line 24							34	2,687.	
Refund	35a	Amount of line 34 you want				•	•	▶ [	35a		
Direct deposit?	▶b										
See instructions.	▶d	Account number 7 9 6				_					
	36	Amount of line 34 you want a	022 estimated tax ▶ 36								
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay, s	see inst	ructions	. )	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
<b>Third Party</b>		you want to allow another	person to disc	cuss this retur	n with the IRS?	See	_				
Designee		tructions		▶ <b>☐ Yes.</b> Comp							
	Designee's name ►			Phone Persona number					entification		
Sign	Under penalties of perjury, I declare that I have examin belief, they are true, correct, and complete. Declaration			d this return and			nd stateme	nts, and	to the be		
Here	Your signature		Date Your occupation				If	the IRS se	ent you an Identity		
	k.				OJECT ANALYST				PIN, enter it here		
Joint return?								ee inst.) ►			
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.		Date Spouse's occupation				Ic		ent your spouse an tection PIN, enter it here		
	Pho	Phone no. (234) 303-9389			Email address AMITHA.NEERATI@GMAIL.COM						
Paid	Pre	parer's name	Preparer's signat	ure		Date		PTIN		Check if:	
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM 03/13/2022 P0				82703	Self-employed	
Use Only		m's name ► GLOBAL TA						P	Phone no. (678) 965-9522		
Joe Jiny	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041						F	rm's EIN I	<b>▶</b> 30-1017196		