E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

202	1

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the nation is a child but not your dependent	- ame of	ried filing separately f your spouse. If you					_		. , . ,	
Your first name and middle initial				ame					Your so	Your social security number		
NIHARIKA	A		MAL	IREDDI					675-	41-503	4	
If joint return, spouse's first name and middle initial				Last name						Spouse's social security number		
Home address		er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.		ntial Election	on Campaign or your	
City, town, or post office. If you have a foreign address, also co				mplete spaces below. State GA				code 028	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change			
Foreign country name				Foreign province/state/county						ow will hot c or refund.		
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ancial interest i	in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction		eone can claim:		_ '		•						
Age/Blindness	You:	Were born before January 2, 19	957	Are blind Sp	ouse	: Was bo	rn be	fore January 2	2, 1957	☐ Is bl	lind	
Dependents	•	instructions): irst name Last name	(2) Social security number		ty	(3) Relationship to you		(4) ✓ if q		r (see instru Credit for ot	ictions): her dependents	
If more than four	(.,					1				0.00.00		
dependents,												
see instructions and check	s ——											
here ▶ □												
	. 1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2				<u> </u>	. 1		<u> </u>	
Attach	2a		2a `´		b T	axable interes	t		. 2b		,	
Sch. B if	3a	Qualified dividends	3a		b Ordinary dividends				. 3b	,		
required.	4a	IRA distributions	4a	b Taxable amount .					. 4b	,		
	5a	Pensions and annuities	5a	b Taxable amount .					. 5b	,		
Standard	6a	Social security benefits	b Taxable amount						. 6b			
Deduction for—	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										
Single or Married filing	8	Other income from Schedule 1, line 10							. 8		-5 , 380.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							▶ 9		47,210.	
Married filing jointly or Qualifying	10	Adjustments to income from Schedule 1, line 26)		
	11	Subtract line 10 from line 9. This is your adjusted gross income							▶ 11		47 , 210.	
widow(er),	12a	Standard deduction or itemized deductions (from Schedule A) 12a 12,550.									·	
\$25,100 • Head of household,	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300.										
	С	Add lines 12a and 12b								c i	12,850.	
\$18,800 If you checked any box under Standard Deduction, see instructions.	13	Qualified business income deducti	on fror	m Form 8995 or Fori	n 899	95-A			. 13			
	14	Add lines 12c and 13								. :	12,850.	
	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	, ente	er -0			. 15	; ;	34,360.	

Form 1040 (2021)									Page 2	
	16	Tax (see instructions). Check if a	any from Form(s):	1 881	4 2 🗌 4972	3 🗌		. 16	3,9	926.	
	17	Amount from Schedule 2, line 3	3				 .	. 17			
	18	Add lines 16 and 17								926.	
	19	Nonrefundable child tax credit	or credit for other	depender	nts from Schedule	8812 .		. 19			
	20	Amount from Schedule 3, line 8	3					. 20			
	21	Add lines 19 and 20						. 21			
	22	Subtract line 21 from line 18. If	zero or less, ente	r -0				. 22	3,9	926.	
	23	Other taxes, including self-emp	loyment tax, from	Schedule	e 2, line 21			. 23		0.	
	24	Add lines 22 and 23. This is you	ur total tax .					▶ 24	3,9	926.	
	25	Federal income tax withheld from	om:								
	а	Form(s) W-2				25a	7,5	35.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions)				25c					
	d	Add lines 25a through 25c .						. 25d	7,5	535.	
If you have a	26	2021 estimated tax payments a	and amount applie	ed from 20	20 return			. 26			
qualifying child,	27a	Earned income credit (EIC) .			NO	27a					
attach Sch. EIC.		Check here if you were bor									
		January 2, 2004, and you staxpayers who are at least age									
	b	Nontaxable combat pay election	n	27b							
	С	Prior year (2019) earned income	e	27c							
	28	Refundable child tax credit or ac	Iditional child tax o	redit from	Schedule 8812	28					
	29	American opportunity credit from Form 8863, line 8									
	30	Recovery rebate credit. See instructions									
	31	Amount from Schedule 3, line 1	5			31					
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits								400.	
	33	Add lines 25d, 26, and 32. The	se are your total p	payments				▶ 33	8,9	935.	
Refund	34	If line 33 is more than line 24, s	ubtract line 24 fro	m line 33.	This is the amou	nt you overpa	aid .	. 34	5 , (009.	
riciana	35a	Amount of line 34 you want ref			is attached, che	ck here	▶	35a	5 , (009.	
Direct deposit?	▶b	Routing number 0 5 1 0				Checking	Savi	ngs			
See instructions.	►d	Account number 4 3 5 0 3 8 8 0 6 9 0 6									
	36	Amount of line 34 you want app	olied to your 2022	2 estimate	ed tax 🕨	36					
Amount	37	Amount you owe. Subtract line	e 33 from line 24.	For details	s on how to pay,	see instructio	ns .	▶ 37			
You Owe	38	Estimated tax penalty (see instr	ructions)		🕨	38					
Third Party Designee		you want to allow another pertructions			n with the IRS?		s. Comp	lete below.	× No		
Ü	Des	signee's		Phone Persona					l identification		
	nar	ne ►		no.			number (I	PIN) ►			
Sign		der penalties of perjury, I declare that ef, they are true, correct, and comple									
Here		ır signature	Dat		Your occupation				nt you an Identi	•	
	,	Tour signature		Date Four occupation					IN, enter it here		
Joint return?					SOFTWARE I	ENGINEER		(see inst.) ▶			
See instructions.	Spo	Spouse's signature. If a joint return, both must sign.		е	Spouse's occupat	ion			nt your spouse		
Keep a copy for your records.	,							Identity Prot (see inst.) ▶	ection PIN, ente	er it here	
		(CO2) FCO F212		-: -dd=	, , , , , , , , , , , , , , , , , , ,	70 CNA TT /	2014	(000 11101.)			
		parer's name (603) 560-5313	eparer's signature	ail address	NIHA9REDDY	Y@GMAIL.(Date	COM PT	IN	Check if:		
Paid	FIE	paror 3 manie Pi	eparer a aignature			Date				aloved	
Preparer		n'a nama N. CTODAT MAYO	C TTC					Self-employed			
Use Only	⊢ırr	n's name ▶ GLOBAL TAXE	э ттс					Phone no.			
Use Only	Г:	m's address ▶ 2530 Pebble	Crook In (Cummino	g GA 30041			Firm's EIN			