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

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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 name on is a child but not your dependent	- ame of	ied filing separately your spouse. If you	,			, ,	_		. , . ,	
Your first name and middle initial Last name You							Your so	Your social security number				
MOUNIKA				BILI					294-37-2155			
If joint return, s								Spouse	Spouse's social security number			
	•	er and street). If you have a P.O. box, see AS ST, UNIT 208	instruct	ions.				Apt. no.		ntial Election	on Campaign , or your	
City, town or nost office. If you have a foreign address, also complete spaces below. State								spouse if filing jointly, want \$3				
AURORA					C			00014		to go to this fund. Checking a box below will not change		
Foreign country name				Foreign province/state/county					your tax or refund. You Spouse			
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ancial interest i	n an	y virtual currer	ncy?	☐ Yes	⊠ No	
Standard Deduction	_	leone can claim:				•						
Age/Blindness	You:	Were born before January 2, 19	957	Are blind S	pouse	: Was bor	rn be	fore January 2	2, 1957	☐ Is bl	lind	
Dependents	•	•	(2) Social security number		ity	(3) Relationship to you		(4) ✓ if que Child tax cr		r (see instru	uctions): ther dependents	
If more than four dependents,	(1)	irst name Last name		Tiurnber				Crilla tax cr	eait	Credit for ot		
											 	
see instructions	s —											
and check here ►												
Attach Sch. B if required.	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2				<u> </u>	. 1	-	72 , 900.	
	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b			
	3a	Qualified dividends	3a		b Ordinary dividendsb Taxable amount .				. 3b			
required.	4a	IRA distributions	4a						. 4b			
	5a	Pensions and annuities	5a	b Taxable amount					. 5b)		
Standard Deduction for— Single or Married filing separately, \$12,550	6a	Social security benefits	b Taxable amount					. 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		-6,260.	
	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9		66,640.	
Married filing	10	Adjustments to income from Schedule 1, line 26							. 10)		
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	your a	djusted gross inc	ome				▶ 11		66,640.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	le A)	12:	а	12,550).			
Head of	b	Charitable contributions if you take the standard deduction (see instructions) 12b 300.).			
household, \$18,800	С	Add lines 12a and 12b							. 12	c i	12,850.	
If you checked	13	Qualified business income deduction from Form 8995 or Form 8995-A								3		
any box under Standard	14	Add lines 12c and 13								;	12,850.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	s, ente	er -0			. 15	j !	53,790.	

	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	7,579.		
	17	Amount from Schedule 2, line 3					17			
	18	Add lines 16 and 17					18	7,579.		
	19	Nonrefundable child tax credit or credit for o	ther depender	nts 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	7,579.		
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.		
	24	Add lines 22 and 23. This is your total tax				▶	24	7,579.		
	25	Federal income tax withheld from:								
	а	Form(s) W-2			25a	9,058.				
	b	Form(s) 1099			25b					
	С	Other forms (see instructions)			25c					
	d	Add lines 25a through 25c					25d	9,058.		
., .	26	2021 estimated tax payments and amount a					26	·		
If you have a liqualifying child,	27a	Earned income credit (EIC)			27a					
attach Sch. EIC.		Check here if you were born after Janu								
		January 2, 2004, and you satisfy all the	e other requi	rements for						
		taxpayers who are at least age 18, to claim t	1 1	structions ►						
	b	Nontaxable combat pay election								
	С	Prior year (2019) earned income								
	28	Refundable child tax credit or additional child			28		-			
	29	American opportunity credit from Form 8863			30	1,400.	-			
	30	Recovery rebate credit. See instructions .	-							
	31	Amount from Schedule 3, line 15			31		32	1 400		
	32	_	your total other payments and refundable credits					1,400.		
	33	Add lines 25d, 26, and 32. These are your to					33	10,458.		
Refund	34	If line 33 is more than line 24, subtract line 24			•		34	2,879.		
Di	35a	Amount of line 34 you want refunded to you Routing number 1 0 2 0 0 1 0					35a	2,879.		
Direct deposit? See instructions.	▶b	Account number 9 2 9 9 9 1 1		▶ c Type: 🔀	Checking _	Savings				
	► d			ed tax ▶						
A	36	Amount of line 34 you want applied to your			36		07			
Amount You Owe	37 38	Amount you owe. Subtract line 33 from line			1 1	. ▶	37			
		Estimated tax penalty (see instructions) .			38					
Third Party Designee		you want to allow another person to disc		n with the IRS?		Complete I	helow	⋉ No		
Designee		signee's	Phone			sonal identi				
		me ►	no. 🕨			nber (PIN)				
Sign		der penalties of perjury, I declare that I have examine								
Here	bel	ief, they are true, correct, and complete. Declaration of			sed on all informa			, ,		
	You	ur signature	Date	Your occupation				nt you an Identity N, enter it here		
Joint return?				SOFTWARE I)EVELOPER		e inst.)			
See instructions.	Spo	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati	-		IRS ser	nt your spouse an		
Keep a copy for		, , ,	Sate Speace & Sociapation				tity Prote	ection PIN, enter it here		
your records.							inst.) ►			
		one no. (209) 637–7681	Email address	MOUNIKABOBBAI	1					
Paid	Pre	parer's name Preparer's signat	ure		Date	PTIN		Check if:		
Preparer	UMA	A MAHESHWARI BOYINI UMA MAHES	HWARI BOY	ZINI	01/25/2022	P0247		Self-employed		
Use Only								e no. (678) 965-9522		
	Firr	m's address ▶ 2530 Pebble Creek L	n Cumming	g GA 30041		Firm	's EIN ▶			
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 01/17/22 PRO			Form 1040 (2021)		

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