EFSTATUS	EF Transmission Status (This page is not filed with the return. It is for your records only.)	2021

Name(s) as shown on return	Your social security number
MADHUKUMAR GAJULA	390-23-4789

The following will be transmitted to the IRS.

☐ 1040, 1040-SR or 1040-NR ☐ 1040-X ☐ 4868 ☐ 2350 ☐ 9465 ☐ FinCEN 114 ☐ Form 56

The following state returns will be transmitted:

The following returns have been suppressed or are not eligible and will NOT be transmitted.

EF Notes

The Federal 1040 has already been accepted.
No state EF allowed with Federal Form 9465
9465 selected for EF and there is an ETD message page on the return.

Form **1040** Department of the Treasury-Internal Revenue Service (99)
U.S. Individual Income Tax Return 2021
OMB No. 1545-0074 | IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.
[X] Single [ ] Married filing jointly [ ] Married filing separately (MFS) [ ] Head of household (HOH) [ ] Qualifying widow(er) (QW)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ►

Your first name and middle initial	Last name	Your social security number
MADHUKUMAR	GAJULA	390-23-4789
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 instructions.	Apt. no.
1125 E RENNER RD	2210A

City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code
Richardson	TX	75082

Foreign country name	Foreign province/state/county	Foreign postal code

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 your tax or refund. [ ] You [ ] Spouse

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? [ ] Yes [X] No

Standard Deduction **Someone can claim:** [ ] You as a dependent [ ] Your spouse as a dependent
[ ] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** [ ] Were born before January 2, 1957 [ ] Are blind **Spouse:** [ ] Was born before January 2, 1957 [ ] Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here ► [ ]

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions): Child tax credit	Credit for other dependents
				[ ]	[ ]
				[ ]	[ ]
				[ ]	[ ]
				[ ]	[ ]

Attach Sch. B if required.

1	Wages, salaries, tips, etc. Attach Form(s) W-2			1	270,910
2a	Tax-exempt interest	2a		2b b Taxable interest	
3a	Qualified dividends	3a		3b b Ordinary dividends	
4a	IRA distributions	4a		4b b Taxable amount	
5a	Pensions and annuities	5a	39,482	5b b Taxable amount	36,577
6a	Social security benefits	6a		6b b Taxable amount	
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	9,358
9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income** ►			9	316,845
10	Adjustments to income from Schedule 1, line 26			10	
11	Subtract line 10 from line 9. This is your **adjusted gross income** ►			11	316,845
12a	**Standard deduction or itemized deductions** (from Schedule A)	12a	19,803		
b	Charitable contributions if you take the standard deduction (see instructions)	12b			
c	Add lines 12a and 12b			12c	19,803
13	Qualified business income deduction from Form 8995 or Form 8995-A			13	
14	Add lines 12c and 13			14	19,803
15	**Taxable income.** Subtract line 14 from line 11. If zero or less, enter -0-			15	297,042

Standard Deduction for-
- Single or Married filing separately, $12,550
- Married filing jointly or Qualifying widow(er), $25,100
- Head of household, $18,800
- If you checked any box under *Standard Deduction,* see instructions.

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐			16	78,509
17	Amount from Schedule 2, line 3			17	
18	Add lines 16 and 17			18	78,509
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	0
22	Subtract line 21 from line 18. If zero or less, enter -0-			22	78,509
23	Other taxes, including self-employment tax, from Schedule 2, line 21			23	5,603
24	Add lines 22 and 23. This is your **total tax** ▶			24	84,112
25	Federal income tax withheld from:				
a	Form(s) W-2	25a	44,802		
b	Form(s) 1099	25b	7,904		
c	Other forms (see instructions)	25c			
d	Add lines 25a through 25c			25d	52,706
26	2021 estimated tax payments and amount applied from 2020 return			26	
27a	Earned income credit (EIC)	27a			
	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 27b				
c	Prior year (2019) earned income 27c				
28	Refundable child tax credit or additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29			
30	Recovery rebate credit. See instructions	30	0		
31	Amount from Schedule 3, line 15	31	9,039		
32	Add lines 27a and 28 through 31. These are your **total other payments and refundable credits** ▶			32	9,039
33	Add lines 25d, 26, and 32. These are your **total payments** ▶			33	61,745

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**			34	0
35a	Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐			35a	0
▶ b	Routing number ▶ c Type: ☐ Checking ☐ Savings				
▶ d	Account number				
36	Amount of line 34 you want **applied to your 2022 estimated tax** ▶	36			

Direct deposit? See instructions.

Amount You Owe

37	**Amount you owe.** Subtract line 33 from line 24. For details on how to pay, see instructions ▶			37	22,643
38	Estimated tax penalty (see instructions) ▶	38	276		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ▶ ☐ **Yes.** Complete below. ☒ **No**

Designee's name ▶ Phone no. ▶ Personal identification number (PIN) ▶

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶
13739	10-11-2022		
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶

Phone no. 262-893-2031 Email address mgajula0305@gmail.com

Paid Preparer Use Only

Preparer's signature	Date	PTIN	Check if:
PREM SHAHI CPA	10-11-2022	P01569308	☒ Self-employed
Preparer's name PREM SHAHI CPA	Phone no. 469-320-9030		
Firm's name ▶ AVANT TAX AND FINANCE			
Firm's address ▶ 5152 VILLAGE CREEK DR PLANO, TX 75093		Firm's EIN ▶ 81-2729953	

EEA

Int	519	FTF	0	FTP	671	Total due	23,833

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR.
► Go to *www.irs.gov/Form1040* for instructions and the latest information.

OMB No. 1545-0074
2021
Attachment Sequence No. **01**

Name(s) shown on Form 1040,1040-SR, or 1040-NR	Your social security number
MADHUKUMAR GAJULA	390-23-4789

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions) ►				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	5,845
8	Other income:				
a	Net operating loss	8a	( )		
b	Gambling income	8b			
c	Cancellation of debt	8c	3,513		
d	Foreign earned income exclusion from Form 2555	8d	( )		
e	Taxable Health Savings Account distribution	8e			
f	Alaska Permanent Fund dividends	8f			
g	Jury duty pay	8g			
h	Prizes and awards	8h			
i	Activity not engaged in for profit income	8i			
j	Stock options	8j			
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k			
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l			
m	Section 951(a) inclusion (see instructions)	8m			
n	Section 951A(a) inclusion (see instructions)	8n			
o	Section 461(l) excess business loss adjustment	8o			
p	Taxable distributions from an ABLE account (see instructions)	8p			
z	Other income. List type and amount ►	8z			
9	Total other income. Add lines 8a through 8z			9	3,513
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040,1040-SR, or 1040-NR line 8			10	9,358

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	0
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN ►		
c	Date of original divorce or separation agreement (see instructions) ►		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions) — 24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit — 24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l — 24c		
d	Reforestation amortization and expenses — 24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974 — 24e		
f	Contributions to section 501(c)(18)(D) pension plans — 24f		
g	Contributions by certain chaplains to section 403(b) plans — 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) — 24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations — 24i		
j	Housing deduction from Form 2555 — 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) — 24k		
z	Other adjustments. List type and amount ► — 24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your **adjustments to income.** Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	0

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

► **Attach to Form 1040, 1040-SR, or 1040-NR.**
► **Go to *www.irs.gov/Form1040* for instructions and the latest information.**

OMB No. 1545-0074

2021

Attachment Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	**Your social security number**
MADHUKUMAR GAJULA	390-23-4789

Part I Tax

1	Alternative minimum tax. Attach Form 6251	**1**	
2	Excess advance premium tax credit repayment. Attach Form 8962	**2**	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 . .	**3**	0

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE			**4**	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	**5**			
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	**6**			
7	Total additional social security and Medicare tax. Add lines 5 and 6			**7**	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required			**8**	3,806
9	Household employment taxes. Attach Schedule H			**9**	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required			**10**	
11	Additional Medicare Tax. Attach Form 8959			**11**	797
12	Net investment income tax. Attach Form 8960			**12**	0
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12			**13**	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares			**14**	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over $150,000			**15**	
16	Recapture of low-income housing credit. Attach Form 8611			**16**	

(continued on page 2)

Part II Other Taxes *(continued)*

17	Other additional taxes:				
a	Recapture of other credits. List type, form number, and amount ▸	17a			
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b			
c	Additional tax on HSA distributions. Attach Form 8889	17c			
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d			
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e			
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f			
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k			
l	Tax on accumulation distribution of trusts	17l			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o			
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
z	Any other taxes. List type and amount ▸	17z			
18	Total additional taxes. Add lines 17a through 17z			18	
19	Additional tax from Schedule 8812			19	1,000
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, 18, and 19. These are your **total other taxes.** Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b			21	5,603

SCHEDULE 3
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

► **Attach to Form 1040, 1040-SR, or 1040-NR.**
► **Go to *www.irs.gov/Form1040* for instructions and the latest information.**

OMB No. 1545-0074
2021
Attachment Sequence No. **03**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	**Your social security number**
MADHUKUMAR GAJULA	390-23-4789

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441			2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	
5	Residential energy credits. Attach Form 5695			5	
6	Other nonrefundable credits:				
a	General business credit. Attach Form 3800	6a			
b	Credit for prior year minimum tax. Attach Form 8801	6b			
c	Adoption credit. Attach Form 8839	6c			
d	Credit for the elderly or disabled. Attach Schedule R	6d			
e	Alternative motor vehicle credit. Attach Form 8910	6e			
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f			
g	Mortgage interest credit. Attach Form 8396	6g			
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified electric vehicle credit. Attach Form 8834	6i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to holders of tax credit bonds. Attach Form 8912	6k			
l	Amount on Form 8978, line 14. See instructions	6l			
z	Other nonrefundable credits. List type and amount ►	6z			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040,1040-SR, or 1040-NR, line 20			8	0

(continued on page 2)

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962			9	
10	Amount paid with request for extension to file (see instructions)			10	
11	Excess social security and tier 1 RRTA tax withheld			11	9,039
12	Credit for federal tax on fuels. Attach Form 4136			12	
13	Other payments or refundable credits:				
a	Form 2439	13a			
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b			
c	Health coverage tax credit from Form 8885	13c			
d	Credit for repayment of amounts included in income from earlier years	13d			
e	Reserved for future use	13e			
f	Deferred amount of net 965 tax liability (see instructions)	13f			
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g			
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h			
z	Other payments or refundable credits. List type and amount ►	13z			
14	Total other payments or refundable credits. Add lines 13a through 13z			14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31			15	9,039

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Itemized Deductions

► Go to *www.irs.gov/ScheduleA* for instructions and the latest information.

► Attach to Form 1040 or 1040-SR.

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2021

Attachment Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR: MADHUKUMAR GAJULA

Your social security number: 390-23-4789

Medical and Dental Expenses		**Caution:** Do not include expenses reimbursed or paid by others.				
	1	Medical and dental expenses (see instructions)	1			
	2	Enter amount from Form 1040 or 1040-SR, line 11 . . . [2]				
	3	Multiply line 2 by 7.5% (0.075)	3			
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-			4	
Taxes You Paid	5	State and local taxes.				
	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ► [X]	5a	1,777		
	b	State and local real estate taxes (see instructions)	5b	8,724		
	c	State and local personal property taxes	5c			
	d	Add lines 5a through 5c	5d	10,501		
	e	Enter the smaller of line 5d or $10,000 ($5,000 if married filing separately)	5e	10,000		
	6	Other taxes. List type and amount ►	6			
	7	Add lines 5e and 6			7	10,000
Interest You Paid Caution: Your mortgage interest deduction may be limited (see instructions).	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ► [ ]				
	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	9,803		
	b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►	8b			
	c	Points not reported to you on Form 1098. See instructions for special rules	8c			
	d	Mortgage insurance premiums (see instructions)	8d			
	e	Add lines 8a through 8d	8e	9,803		
	9	Investment interest. Attach Form 4952 if required. See instructions	9			
	10	Add lines 8e and 9			10	9,803
Gifts to Charity Caution: If you made a gift and got a benefit for it, see instructions.	11	Gifts by cash or check. If you made any gift of $250 or more, see instructions	11			
	12	Other than by cash or check. If you made any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	12			
	13	Carryover from prior year	13			
	14	Add lines 11 through 13			14	
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions			15	
Other Itemized Deductions	16	Other - from list in instructions. List type and amount ►			16	
Total Itemized Deductions	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12a			17	19,803
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box ► [ ]				

Form **5329**

Department of the Treasury
Internal Revenue Service (99)

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to *www.irs.gov/Form5329* for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. **29**

Name of individual subject to additional tax. If married filing jointly, see instructions.
MADHUKUMAR GAJULA

Your social security number
390-23-4789

Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return

Home address (number and street), or P.O. box if mail is not delivered to your home | Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below. See instructions.

If this is an amended return, check here ► ☐

Foreign country name | Foreign province/state/county | Foreign postal code

If you **only** owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions.

Part I Additional Tax on Early Distributions.

Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 59½ from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040)—see above). You may also have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions.

1	Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions	1	36,577
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions: ______	2	
3	Amount subject to additional tax. Subtract line 2 from line 1	3	36,577
4	**Additional tax.** Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8	4	3,658
	Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions.		

Part II Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts.

Complete this part if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings account (ESA), or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8p, from an ABLE account.

5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account	5	
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)	6	
7	Amount subject to additional tax. Subtract line 6 from line 5	7	
8	**Additional tax.** Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8	8	

Part III Additional Tax on Excess Contributions to Traditional IRAs.

Complete this part if you contributed more to your traditional IRAs for 2021 than is allowable or you had an amount on line 17 of your 2020 Form 5329.

9	Enter your excess contributions from line 16 of your 2020 Form 5329. See instructions. If zero, go to line 15			9	
10	If your traditional IRA contributions for 2021 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	10			
11	2021 traditional IRA distributions included in income (see instructions)	11			
12	2021 distributions of prior year excess contributions (see instructions)	12			
13	Add lines 10, 11, and 12			13	
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0-			14	
15	Excess contributions for 2021 (see instructions)			15	
16	Total excess contributions. Add lines 14 and 15			16	
17	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 16 **or** the value of your traditional IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8			17	

Part IV Additional Tax on Excess Contributions to Roth IRAs.

Complete this part if you contributed more to your Roth IRAs for 2021 than is allowable or you had an amount on line 25 of your 2020 Form 5329.

18	Enter your excess contributions from line 24 of your 2020 Form 5329. See instructions. If zero, go to line 23			18	
19	If your Roth IRA contributions for 2021 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	19			
20	2021 distributions from your Roth IRAs (see instructions)	20			
21	Add lines 19 and 20			21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-			22	
23	Excess contributions for 2021 (see instructions)			23	
24	Total excess contributions. Add lines 22 and 23			24	
25	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 24 **or** the value of your Roth IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8			25	

Part V **Additional Tax on Excess Contributions to Coverdell ESAs.** Complete this part if the contributions to your Coverdell ESAs for 2021 were more than is allowable or you had an amount on line 33 of your 2020 Form 5329.

26	Enter the excess contributions from line 32 of your 2020 Form 5329. See instructions. If zero, go to line 31			26	
27	If the contributions to your Coverdell ESAs for 2021 were less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	27			
28	2021 distributions from your Coverdell ESAs (see instructions)	28			
29	Add lines 27 and 28			29	
30	Prior year excess contributions. Subtract line 29 from line 26. If zero or less, enter -0-			30	
31	Excess contributions for 2021 (see instructions)			31	
32	Total excess contributions. Add lines 30 and 31			32	
33	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 32 **or** the value of your Coverdell ESAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8			33	

Part VI **Additional Tax on Excess Contributions to Archer MSAs.** Complete this part if you or your employer contributed more to your Archer MSAs for 2021 than is allowable or you had an amount on line 41 of your 2020 Form 5329.

34	Enter the excess contributions from line 40 of your 2020 Form 5329. See instructions. If zero, go to line 39			34	
35	If the contributions to your Archer MSAs for 2021 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	35			
36	2021 distributions from your Archer MSAs from Form 8853, line 8	36			
37	Add lines 35 and 36			37	
38	Prior year excess contributions. Subtract line 37 from line 34. If zero or less, enter -0-			38	
39	Excess contributions for 2021 (see instructions)			39	
40	Total excess contributions. Add lines 38 and 39			40	
41	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 40 **or** the value of your Archer MSAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8			41	

Part VII **Additional Tax on Excess Contributions to Health Savings Accounts (HSAs).** Complete this part if you, someone on your behalf, or your employer contributed more to your HSAs for 2021 than is allowable or you had an amount on line 49 of your 2020 Form 5329.

42	Enter the excess contributions from line 48 of your 2020 Form 5329. If zero, go to line 47			42	
43	If the contributions to your HSAs for 2021 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-	43			
44	2021 distributions from your HSAs from Form 8889, line 16	44			
45	Add lines 43 and 44			45	
46	Prior year excess contributions. Subtract line 45 from line 42. If zero or less, enter -0-			46	
47	Excess contributions for 2021 (see instructions)			47	2,474
48	Total excess contributions. Add lines 46 and 47			48	2,474
49	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 48 **or** the value of your HSAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8			49	148

Part VIII **Additional Tax on Excess Contributions to an ABLE Account.** Complete this part if contributions to your ABLE account for 2021 were more than is allowable.

50	Excess contributions for 2021 (see instructions)	50	
51	**Additional tax.** Enter 6% (0.06) of the **smaller** of line 50 **or** the value of your ABLE account on December 31, 2021. Include this amount on Schedule 2 (Form 1040), line 8	51	

Part IX **Additional Tax on Excess Accumulation in Qualified Retirement Plans (Including IRAs).** Complete this part if you did not receive the minimum required distribution from your qualified retirement plan.

52	Minimum required distribution for 2021 (see instructions)	52	
53	Amount actually distributed to you in 2021	53	
54	Subtract line 53 from line 52. If zero or less, enter -0-	54	
55	**Additional tax.** Enter 50% (0.50) of line 54. Include this amount on Schedule 2 (Form 1040), line 8.	55	

Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return

Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature | Date

Paid Preparer Use Only				
	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Print/Type preparer's name			
	Firm's name ►		Firm's EIN ►	
	Firm's address ►		Phone no.	

SCHEDULE 8812 (Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Credits for Qualifying Children and Other Dependents

► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to *www.irs.gov/Schedule8812* for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. **47**

Name(s) shown on return	Your social security number
MADHUKUMAR GAJULA	390-23-4789

Part I-A Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	316,845
2a	Enter income from Puerto Rico that you excluded	2a			
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b			
c	Enter the amount from line 15 of your Form 4563	2c			
d	Add lines 2a through 2c			2d	
3	Add lines 1 and 2d			3	316,845
4a	Number of qualifying children under age 18 with the required social security number	4a			
b	Number of children included on line 4a who were under age 6 at the end of 2021	4b			
c	Subtract line 4b from line 4a	4c			
5	If line 4a is more than zero, enter the amount from the **Line 5 Worksheet**; otherwise, enter -0-			5	0
6	Number of other dependents, including any qualifying children who are not under age 18 or who do not have the required social security number	6			
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a.				
7	Multiply line 6 by $500			7	
8	Add lines 5 and 7			8	
9	Enter the amount shown below for your filing status. • Married filing jointly-$400,000 • All other filing statuses-$200,000			9	200,000
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of $1,000, enter the next multiple of $1,000. For example, if the result is $425, enter $1,000; if the result is $1,025, enter $2,000, etc.			10	117,000
11	Multiply line 10 by 5% (0.05)			11	5,850
12	Subtract line 11 from line 8. If zero or less, enter -0-			12	0
13	Check all the boxes that apply to you (or your spouse if married filing jointly).				
	A Check here if you (or your spouse if married filing jointly) have a principal place of abode in the United States for more than half of 2021	☒			
	B Check here if you (or your spouse if married filing jointly) are a bona fide resident of Puerto Rico for 2021	☐			

Part I-B Filers Who Check a Box on Line 13

Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C.

14a	Enter the smaller of line 7 or line 12	14a	0
b	Subtract line 14a from line 12	14b	
c	If line 14a is zero, enter -0-; otherwise, enter the amount from the **Credit Limit Worksheet A**	14c	0
d	Enter the smaller of line 14a or line 14c	14d	0
e	Add lines 14b and 14d	14e	
f	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	14f	1,000
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
g	Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III	14g	0
h	Enter the smaller of line 14d or line 14g. **This is your credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR**	14h	0
i	Subtract line 14h from line 14g. **This is your refundable child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR**	14i	0

Part I-C Filers Who Do Not Check a Box on Line 13

Caution: If you checked a box on line 13, do not complete Part I-C.

15a Enter the amount from the **Credit Limit Worksheet A** 15a

b Enter the smaller of line 12 or line 15a 15b

Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.

1. You are not filing Form 2555.

2. Line 4a is more than zero.

3. Line 12 is more than line 15a.

c If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0- 15c

d Add lines 15b and 15c 15d

e Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0- 15e

Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.

f Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III 15f

g Enter the smaller of line 15b or line 15f. **This is your nonrefundable child tax credit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR** 15g

h Subtract line 15g from line 15f. **This is your additional child tax credit. Enter this amount on line 28 of your Form 1040, 1040-SR, or 1040-NR** 15h

Part II-A Additional Child Tax Credit (use only if completing Part I-C)

Caution: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.

Caution: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.

16a Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27 . . . . . 16a

b Number of qualifying children under 18 with the required social security number: ________ x $1,400. Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27 . . . . . 16b

TIP: The number of children you use for this line is the same as the number of children you used for line 4a.

17 Enter the **smaller** of line 16a or line 16b 17

18a Earned income (see instructions) 18a

b Nontaxable combat pay (see instructions) 18b

19 Is the amount on line 18a more than $2,500?

- ☐ **No.** Leave line 19 blank and enter -0- on line 20.
- ☐ **Yes.** Subtract $2,500 from the amount on line 18a. Enter the result 19

20 Multiply the amount on line 19 by 15% (0.15) and enter the result 20

Next. On line 16b, is the amount $4,200 or more?

- ☐ **No.** If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the **smaller** of line 17 or line 20 on line 27.
- ☐ **Yes.** If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.

Part II-B Certain Filers Who Have Three or More Qualifying Children

21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions 21

22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . . . 22

23 Add lines 21 and 22 23

24 **1040 and 1040-SR filers:** Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.
1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. } 24

25 Subtract line 24 from line 23. If zero or less, enter -0- 25

26 Enter the **larger** of line 20 or line 25 26

Next, enter the smaller of line 17 or line 26 on line 27.

Part II-C Additional Child Tax Credit

27 Enter this amount on line 15c 27

Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)

28a	Enter the amount from line 14f or line 15e, whichever applies	28a	1,000
b	Enter the amount from line 14e or line 15d, whichever applies	28b	
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the additional tax	29	1,000
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line **Caution:** If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	30	2
31	Enter the smaller of line 4a or line 30	31	
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32	2
33	Enter the amount shown below for your filing status. • Married filing jointly or Qualifying widow(er)—$60,000 • Head of household—$50,000 • All other filing statuses—$40,000	33	40,000
34	Subtract line 33 from line 3. If zero or less, enter -0-	34	276,845
35	Enter the amount from line 33	35	40,000
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000	36	1.000
37	Multiply line 32 by $2,000	37	4,000
38	Multiply line 37 by line 36	38	4,000
39	Subtract line 38 from line 37	39	
40	Subtract line 39 from line 29. If zero or less, enter -0-. **This is your additional tax. If more than zero, enter this amount on Schedule 2 (Form 1040), line 19**	40	1,000

Form **8889**

Department of the Treasury
Internal Revenue Service

Health Savings Accounts (HSAs)

► **Attach to Form 1040, 1040-SR, or 1040-NR.**

► **Go to *www.irs.gov/Form8889* for instructions and the latest information.**

OMB No. 1545-0074

2021

Attachment Sequence No. **52**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR: MADHUKUMAR GAJULA

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ► 390-23-4789

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I — HSA Contributions and Deduction.

See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions ► [X] Self-only [ ] Family				
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. **Do not** include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions			2	
3	If you were under age 55 at the end of 2021 and, on the first day of **every** month during 2021, you were, or were considered, an eligible individual with the **same** coverage, enter $3,600 ($7,200 for family coverage). **All others,** see the instructions for the amount to enter			3	3,600
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs			4	
5	Subtract line 4 from line 3. If zero or less, enter -0-			5	3,600
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter			6	3,600
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions			7	
8	Add lines 6 and 7			8	3,600
9	Employer contributions made to your HSAs for 2021	9	6,074		
10	Qualified HSA funding distributions	10			
11	Add lines 9 and 10			11	6,074
12	Subtract line 11 from line 8. If zero or less, enter -0-			12	
13	**HSA deduction.** Enter the **smaller** of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13			13	
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.				

Part II — HSA Distributions.

If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a	3,240
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	
c	Subtract line 14b from line 14a	14c	3,240
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	3,240
16	**Taxable HSA distributions.** Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e	16	0
17a	If any of the distributions included on line 16 meet any of the **Exceptions to the Additional 20% Tax** (see instructions), check here ► [ ]		
b	**Additional 20% tax** (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	

Part III — Income and Additional Tax for Failure To Maintain HDHP Coverage.

See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	**Total income.** Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20	
21	**Additional tax.** Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

Form **8959**

Department of the Treasury
Internal Revenue Service

Additional Medicare Tax

► If any line does not apply to you, leave it blank. See separate instructions.
► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
► Go to *www.irs.gov/Form8959* for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 71

Name(s) shown on return	Your social security number
MADHUKUMAR GAJULA	390-23-4789

Part I Additional Medicare Tax on Medicare Wages

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5		1	288,609		
2	Unreported tips from Form 4137, line 6		2			
3	Wages from Form 8919, line 6		3			
4	Add lines 1 through 3		4	288,609		
5	Enter the following amount for your filing status:					
	Married filing jointly	$250,000				
	Married filing separately	$125,000				
	Single, Head of household, or Qualifying widow(er)	$200,000	5	200,000		
6	Subtract line 5 from line 4. If zero or less, enter -0-				6	88,609
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II				7	797

Part II Additional Medicare Tax on Self-Employment Income

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)		8			
9	Enter the following amount for your filing status:					
	Married filing jointly	$250,000				
	Married filing separately	$125,000				
	Single, Head of household, or Qualifying widow(er)	$200,000	9			
10	Enter the amount from line 4		10			
11	Subtract line 10 from line 9. If zero or less, enter -0-		11			
12	Subtract line 11 from line 8. If zero or less, enter -0-				12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III				13	

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)		14			
15	Enter the following amount for your filing status:					
	Married filing jointly	$250,000				
	Married filing separately	$125,000				
	Single, Head of household, or Qualifying widow(er)	$200,000	15			
16	Subtract line 15 from line 14. If zero or less, enter -0-				16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV				17	

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V	18	797

Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	4,184		
20	Enter the amount from line 1	20	288,609		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	4,185		
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages			22	0
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)			23	
24	**Total Additional Medicare Tax withholding.** Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR, or 1040-SS filers, see instructions)			24	

Form **8960**

Department of the Treasury
Internal Revenue Service (99)

Net Investment Income Tax- Individuals, Estates, and Trusts

► Attach to your tax return.

► Go to *www.irs.gov/Form8960* for instructions and the latest information.

OMB No. 1545-2227

2021

Attachment Sequence No. **72**

Name(s) shown on your tax return	Your social security number or EIN
MADHUKUMAR GAJULA	390-23-4789

Part I Investment Income

☐ Section 6013(g) election (see instructions)
☐ Section 6013(h) election (see instructions)
☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)			1	
2	Ordinary dividends (see instructions)			2	
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a			
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b			
c	Combine lines 4a and 4b			4c	0
5a	Net gain or loss from disposition of property (see instructions)	5a			
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b			
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			
d	Combine lines 5a through 5c			5d	0
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7	Other modifications to investment income (see instructions)			7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	0

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a			
b	State, local, and foreign income tax (see instructions)	9b			
c	Miscellaneous investment expenses (see instructions)	9c			
d	Add lines 9a, 9b, and 9c			9d	0
10	Additional modifications (see instructions)			10	
11	Total deductions and modifications. Add lines 9d and 10			11	0

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts complete lines 18a-21. If zero or less, enter -0-			12	0
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	316,845		
14	Threshold based on filing status (see instructions)	14	200,000		
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	116,845		
16	Enter the smaller of line 12 or line 15			16	0
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). **Enter here and include on your tax return** (see instructions)			17	0
	Estates and Trusts:				
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b			
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b			
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). **Enter here and include on your tax return** (see instructions)			21	

2021 Form 1040-V Payment Voucher and Filing Instructions
MADHUKUMAR GAJULA

Due date:

Payment was due 04-18-2022. To avoid further penalties and interest, pay as soon as possible.

Balance due:

$500

Transaction method:

To pay by check or money order, write "2021 Form 1040," your name, address, SSN or ITIN, and daytime phone number on the payment, make it payable to "United States Treasury," and mail with Form 1040-V to the address below. To pay using your bank account (at no extra cost to you), go to IRS.gov/Payments. To pay by credit or debit card (for a fee), go to 1040paytax.com.

Mail-to address:

Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

Taxpayer records:

Amount paid ____________________
Check number ____________________
Date mailed ____________________

Form **1040-V** (2021)

Amount to pay includes penalties and interest of $1,190

▼ **Detach Here and Mail With Your Payment and Return** ▼

Form **1040-V**
Department of the Treasury
Internal Revenue Service (99)

Payment Voucher

► **Do not staple or attach this voucher to your payment or return.**
Go to *www.irs.gov/Payments* for payment options and information.

OMB No. 1545-0074
2021

1 Your social security number (SSN) (if a joint return, SSN shown first on your return)	**2** If a joint return, SSN shown second on your return	**3** **Amount you are paying by check or money order.** Make your check or money order payable to **"United States Treasury"**	
390-23-4789			500

MADHUKUMAR GAJULA
1125 E RENNER RD APT 2210A
Richardson, TX 75082

Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

EEA

For Paperwork Reduction Act Notice, see your tax return instructions.

390234789 AB GAJU 30 0 202112 610

Form PMT ACH Payment 2021

(This information is e-filed with the return. Do not include it if paper-filing)

Name(s) shown on return	Taxpayer's SSN
MADHUKUMAR GAJULA	390-23-4789
	Spouse's SSN

Routing Transit Number
111900659

Bank Account Number
2087274938

Type of Account:
1 Checking

Amount of Tax Payment
500

Requested Payment Date
10-11-2022

Taxpayer's Daytime Phone Number
262-893-2031

Type of Form being filed
1040

Taxpayer's Signature	Date
Spouse's Signature	Date

Form **9465** (Rev. September 2020) Department of the Treasury Internal Revenue Service

Installment Agreement Request

► Go to *www.irs.gov/Form9465* for instructions and the latest information.
► If you are filing this form with your tax return, attach it to the front of the return.
► See separate instructions.

OMB No. 1545-0074

Tip: If you owe $50,000 or less, you may be able to avoid filing Form 9465 and establish an installment agreement online, even if you haven't yet received a tax bill. Go to *www.irs.gov/OPA* to apply for an Online Payment Agreement. If you establish your installment agreement using the Online Payment Agreement application, the user fee that you pay will be lower than it would be with Form 9465.

Part I Installment Agreement Request

This request is for Form(s) (for example, Form 1040 or Form 941) ► FORM 1040

Enter tax year(s) or period(s) involved (for example, 2018 and 2019, or January 1, 2019 to June 30, 2019) ► 2021

1a Your first name and initial: MADHUKUMAR | Last name: GAJULA | Your social security number: 390-23-4789

If a joint return, spouse's first name and initial: | Last name: | Spouse's social security number:

Current address (number and street). If you have a P.O. box and no home delivery, enter your box number: 1125 E RENNER RD | Apt. number: 2210A

City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions): Richardson TX 75082

Foreign country name: | Foreign province/state/county: | Foreign postal code:

1b If this address is new since you filed your last tax return, check here . . . ► ☐

2 Name of your business (must no longer be operating): | Employer identification number (EIN):

3 262-893-2031 (Your home phone number) DAY TIME (Best time for us to call)

4 262-893-2031 (Your work phone number) Ext. Best time for us to call

5	Enter the total amount you owe as shown on your tax return(s) (or notice(s))	5	22,886
6	If you have any additional balances due that aren't reported on line 5, enter the amount here (even if the amounts are included in an existing installment agreement)	6	
7	Add lines 5 and 6 and enter the result	7	22,886
8	Enter the amount of any payment you're making with this request. See instructions	8	500
9	Amount owed. Subtract line 8 from line 7 and enter the result	9	22,386
10	Divide the amount on line 9 by 72.0 and enter the result	10	311
11a	Enter the amount you can pay each month. Make your payment as large as possible to limit interest and penalty charges, **as these charges will continue to accrue until you pay in full.** If you have an existing installment agreement, this amount should represent your total proposed monthly payment amount for all your liabilities. **If no payment amount is listed on line 11a, a payment will be determined for you by dividing the balance due on line 9 by 72 months**	11a	$ 500
b	If the amount on line 11a is less than the amount on line 10 and you're able to increase your payment to an amount that is equal to or greater than the amount on line 10, enter your *revised* monthly payment	11b	$

- If you can't increase your payment on line 11b to more than or equal to the amount shown on line 10, check the box. Also, complete and attach Form 433-F, Collection Information Statement . . . ☐
- If the amount on line 11a (or 11b, if applicable) is more than or equal to the amount on line 10 and the amount you owe is over $25,000 but not more than $50,000, then you don't have to complete Form 433-F. However, if you don't complete Form 433-F, then you must complete either line 13 or 14.
- If the amount on line 9 is greater than $50,000, complete and attach Form 433-F.

12 Enter the date you want to make your payment each month. **Don't** enter a date later than the 28th. . . . **12** 20

13 If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines 13a and 13b. This is the most convenient way to make your payments and it will ensure that they are made on time.

► **a** Routing number 111900659 ► **b** Account number 2087274938

I authorize the U.S. Treasury and its designated Financial Agent to initiate a monthly ACH debit (electronic withdrawal) entry to the financial institution account indicated for payments of my federal taxes owed, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke payment, I must contact the U.S. Treasury Financial Agent at **1-800-829-1040** no later than 14 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payments of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payments.

c **Low-income taxpayers only.** If you're unable to make electronic payments through a debit instrument by providing your banking information on lines 13a and 13b, check this box and your user fee will be reimbursed upon completion of your installment agreement. See instructions . . . ☐

14 If you want to make your payments by payroll deduction, check this box and attach a completed Form 2159 . . . ☐

By signing and submitting this form, I authorize the IRS to contact third parties and to disclose my tax information to third parties in order to process this request and administer the agreement over its duration. I also agree to the terms of this agreement, as provided in the instructions, if it's approved by the IRS.

Your signature	Date	Spouse's signature. If a joint return, **both** must sign.	Date

Form **8879** (Rev. January 2021)

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization

► **ERO must obtain and retain completed Form 8879.**

► **Go to *www.irs.gov/Form8879* for the latest information.**

OMB No. 1545-0074

2021

Submission Identification Number (SID) ► 7505612022284ydglvr2

Taxpayer's name	Social security number
MADHUKUMAR GAJULA	390-23-4789
Spouse's name	Spouse's social security number

Part I **Tax Return Information - Tax Year Ending December 31, 2021** (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	316,845
2	Total tax	2	84,112
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	52,706
4	Amount you want refunded to you	4	
5	Amount you owe	5	22,643

Part II **Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

Amount owed will be debited from: RTN:111900659 DAN:2087274938

[X] I authorize AVANT TAX AND FINANCE (**ERO firm name**) to enter or generate my PIN 13739 (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

[ ] I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► ______________________ Date ► ______________

Spouse's PIN: check one box only

[ ] I authorize ______________________ (**ERO firm name**) to enter or generate my PIN ________ (**Enter five digits, but don't enter all zeros**) as my signature on the income tax return (original or amended) I am now authorizing.

[ ] I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► ______________________ Date ► ______________

Practitioner PIN Method Returns Only - continue below

Part III **Certification and Authentication - Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 750561-69308

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345,** Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature ► PREM SHAHI CPA Date ► 10-11-2022

ERO Must Retain This Form - See Instructions

Don't Submit This Form to the IRS Unless Requested To Do So

Form **9325**
(January 2017)

Department of the Treasury - Internal Revenue Service

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS *e-file*.

Taxpayer name
MADHUKUMAR GAJULA

Taxpayer address (optional)
1125 E RENNER RD APT 2210A
Richardson, TX 75082

1. [X] Your federal income tax return for 2021 was filed electronically with the IRS Submission Processing Center. The electronic filing services were provided by AVANT TAX AND FINANCE.

2. [X] Your return was accepted on 10-11-2022 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is 7505612022284ydglvr2.

3. [ ] Your return was accepted on ____________. Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.

4. [X] Your electronic funds withdrawal payment request was accepted for processing.

5. [ ] Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.

6. [X] Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on 04-11-2022. The Submission ID assigned to your extension is 7505612022101whwgu5k.
DCN:00-750561-007562

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to *www.irs.gov* and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to *www.irs.gov/e-pay*.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to *www.irs.gov*. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

Instructions for Electronic Return Originators

Line 2 - PIN Presence Indicator - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. **Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).**

Line 3 - Exception Processing - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

Line 4 - Payment Acknowledgement Literal - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

Line 5 - Payment Acknowledgement Literal - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

Note: EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

MADHUKUMAR GAJULA

Recovery Rebate Credit Worksheet

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

1. Can you be claimed as a dependent on another person's 2021 return? If filing a joint return, go to line 2.

- [X] **No.** Go to line 2.
- [ ] **Yes.** **STOP** You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

2. Does your 2021 return include a social security number that was issued on or before the due date of your 2021 return (including extensions) for you and, if filing a joint return, your spouse?

- [X] **Yes.** Go to line 6.
- [ ] **No.** If you are filing a joint return, go to line 3.
  If you aren't filing a joint return, go to line 5.

3. Was at least one of you a member of the U.S. Armed Forces at any time during 2021, and does at least one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)?

- [ ] **Yes.** Your credit is not limited. Go to line 6.
- [ ] **No.** Go to line 4.

4. Does one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)?

- [ ] **Yes.** Your credit is limited. Go to line 6.
- [ ] **No.** Go to line 5.

5. Do you have any dependents listed in the *Dependents* section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including extensions) or an adoption taxpayer identification number?

- [ ] **Yes.** Enter zero on line 6 and go to line 7.
- [ ] **No.** **STOP** You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

6. Enter:
- $1,400 if single, head of household, married filing separately, or qualifying widow(er),
- $1,400 if married filing jointly and you answered "Yes" to question 4, or
- $2,800 if married filing jointly and you answered "Yes" to question 2 or 3 . . . . **6.** 1,400

7. Multiply $1,400 by the number of dependents listed in the *Dependents* section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including extensions) or an adoption taxpayer identification number . . . . **7.** ______

8. Add lines 6 and 7 . . . . **8.** 1,400

9. Is the amount on line 11 of Form 1040 or 1040-SR more than the amount shown below for your filing status?
- Single or Married filing separately—$75,000
- Married filing jointly or qualifying widow(er)—$150,000
- Head of household—$112,500

- [X] **Yes.** Enter the amount from line 11 of Form 1040 or 1040-SR and go to line 10 . . . . **9.** 316,845
- [ ] **No.** Enter the amount from line 8 on line 12 and skip lines 10 and 11.

10. Is line 9 more than the amount shown below for your filing status?
- Single or married filing separately—$80,000
- Married filing jointly or qualifying widow(er)—$160,000
- Head of household—$120,000

- [X] **Yes.** **STOP** You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.
- [ ] **No.** Subtract line 9 from the amount shown above for your filing status . . . . **10.** ______

11. Divide line 10 by the amount shown below for your filing status. Enter the result as a decimal (rounded to at least 2 places).
- Single or married filing separately—$5,000
- Married filing jointly or qualifying widow(er)—$10,000
- Head of household—$7,500 . . . . **11.** ______

12. Multiply line 8 by line 11 . . . . **12.** ______

13. Enter the amount, if any, of EIP 3 that was issued to you. If filing a joint return, include the amount, if any, of your spouse's EIP 3. You may refer to Notice 1444-C or your tax account information at *IRS.gov/Account* for the amount to enter here . . . . **13.** ______

14. **Recovery rebate credit.** Subtract line 13 from line 12. If zero or less, enter -0-. If line 13 is more than line 12, you don't have to pay back the difference. Enter the result here and, if more than zero, on line 30 of Form 1040 or 1040-SR **14.** 0

Estimated Tax Worksheet for Next Year

(Keep for your records)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

1.	Wages		1.	
2.	Interest and Dividend income		2.	
3.	Capital gain income		3.	
4.	Taxable IRA/Pension income		4.	
5.	Taxable Social Security income		5.	
6.	Business income		6.	
7.	Other income		7.	
8.	Total income (add lines 1 thru 7)		8.	
9.	Adjustments to income		9.	
10.	Adjusted gross income (subtract line 9 from line 8)		10.	
11a.	Itemized deductions		11a.	
11b.	Standard deduction		11b.	
12.	Taxable income (subtract the larger of line 11a or 11b from line 10)		12.	
13.	Estimated Section 199A deduction for qualified trade or business income		13.	
14.	Projected taxable income (subtract line 13 from line 12)		14.	
15.	Projected Tax		15.	
16.	Alternative Minimum Tax		16.	
17.	Total tax		17.	
18a.	Child Tax Credit and Other Dependent Credit	18a.		
18b.	Other projected Credits	18b.		
18c.	Total projected credits		18c.	
19.	Subtract line 18d from line 17		19.	
20.	Projected SE Tax - Taxpayer		20.	
21.	Projected SE Tax - Spouse		21.	
22.	Other taxes		22.	
23a.	Add lines 19 through 22		23a.	
b.	Earned income credit, additional child tax credit, fuel tax credit, net premium tax credit, refundable American opportunity credit, and refundable credit from Form 8885		23b.	
c.	**Total 2022 estimated tax.** Subtract line 23b from line 23a. If zero or less enter -0-		23c.	
24a.	Multiply line 23c by 90% (66 2/3% for farmers and fishermen)	24a.		
b.	Required annual payment based on prior year's tax (see instructions) 110%.	24b. 92,523		
c.	**Required annual payment to avoid a penalty.** Enter the **smaller** of line 24a or 24b		24c.	92,523
25.	Projected Withholding		25.	52,706
26.	Projected Net Tax (subtract line 25 from line 24c)		26.	39,817

Estimates will be computed on $39,817. This is line 26.

Use screen ETA to provide accurate estimates of next year's income, deductions, and credits. If screen ETA is used, lines 1-24a of this worksheet will be autofilled.

Federal Income Tax Withheld

(This page is not filed with the return. It is for your records only.)

2021 PG01

Name(s) as shown on return	Tax ID Number
MADHUKUMAR GAJULA	390-23-4789

Description	Amount
W2 - SAIBER SOLUTIONS INC	792
W2 - INFOJINI INC	2,716
W2 - PROKARMA	7,489
W2 - TATA CONSULTANCY	14,182
W2 - HEALTH CARE SERVICE CORP	11,542
W2 - JUDGE TECHNICAL SERVICES INC	8,081
W-2 Subtotal	44,802
1099R - T ROWE PRICE	6,323
1099R - T ROWE PRICE	161
1099R - FIDELITY INVESTMENTS	818
1099R - FIDELITY INVESTMENTS	14
1099G - TEXAS WORKFORCE COMMISSION	588
1099 Subtotal	7,904
Total Withholdings	52,706

1099-R Detail Listing

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

T/S	Payer Name	FEDERAL Gross	FEDERAL Taxable	Distribution Code	Federal W/H	State Code	STATE Taxable	STATE State W/H
T	T ROWE PRICE	31,615	31,615	1	6,323	TX		
T	T ROWE PRICE	2,045	803	1	161	TX		
T	FIDELITY INVEST	4,088	4,088	1	818	TX		
T	FIDELITY INVEST	1,734	71	1	14	TX		
	Total	39,482	36,577		7,316			
	Taxpayer Pension & Annuity Total	39,482	36,577		7,316			

W-2 Detail Listing

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

		FEDERAL		STATE		
T/S	Employer Name	Gross	W/H	State Code	Gross	W/H
T	SAIBER SOLUTIONS INC	5,720	792			
T	INFOJINI INC	17,160	2,716			
T	PROKARMA	50,438	7,489			
T	TATA CONSULTANCY	90,027	14,182			
T	HEALTH CARE SERVICE CORP	61,671	11,542			
T	JUDGE TECHNICAL SERVICES INC	45,894	8,081	TX	45,894	
	Totals	270,910	44,802		45,894	

Computation of Regular Tax

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return

MADHUKUMAR GAJULA

Tax ID Number

390-23-4789

Statement for line 16 of Form 1040

Tax Rate Schedule for Single Filing Status

If taxable income is over	but not over	pay	plus	% on excess	of the amount over
0	9,950	0.00		10%	0
9,950	40,525	995.00		12%	9,950
40,525	86,375	4,664.00		22%	40,525
86,375	164,925	14,751.00		24%	86,375
164,925	209,425	33,603.00		32%	164,925
209,425	**523,600**	**47,843.00**		**35%**	**209,425**
523,600	. . . . .	157,804.25		37%	523,600

$47,843.00 + (($297,042.00 - $209,425.00) x 35.0%) = $78,509

Tax from Tax Rate Schedule $ 78,509

$ 78,509 Tax computed using only available method

Excess Social Security - Nonrailroad Employees Worksheet - Form 1040, Schedule 3, Line 11

(Keep for your records)

2021

Name(s) as shown on return	Tax ID Number
MADHUKUMAR GAJULA	390-23-4789

If you are filing a joint return, you must figure any excess tax withheld separately for each spouse. DO NOT combine amount of both husband and wife.

1. Add all social security tax withheld (but not more than $8,854 for each employer). This tax should be shown in box 4 of your Forms W-2. Enter the total here	**1.**	17,893
2. Enter any uncollected social security tax on tips or group-term life insurance on Form 1040 or Form 1040-SR, Schedule 2, line 13	**2.**	
3. Add lines 1 and 2. If $8,854 or less, **stop** here. You cannot claim the credit	**3.**	17,893
4. Social security limit	**4.**	$8,854
5. Excess. Subtract line 4 from line 3	**5.**	9,039

Interest and Penalty Calculation

Form 1040 (This page is not filed with the return. It is for your records only.) **2021**

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

Failure to Pay Penalty

Tax due		22,367
6 Months late x .005 (.25 max)	x	3.000 %
Failure to Pay penalty		671

Failure to File Penalty

Tax due			
Months late x .05 (.25 max)	%		
Late payment factor (.025 max)	%		
Late filing factor		x	%
Failure to File penalty			

If return filed more than 60 days after April 15th, the minimum penalty is the smaller of $435 or 100% of the unpaid tax.

Interest Worksheet

	# of Days	Interest Rate	Amount	Interest Amount	Balance
Tax due			22,367		22,367
Failure to File penalty					22,367
4/18 - 6/30/2022	73	4.000	22,367	179	22,546
7/1 - 9/30/2022	92	5.000	22,546	284	22,830
10/1 - 12/31/2022	15	6.000	22,830	56	22,886
1/1 - 03/31/2023					
4/1 - 6/30/2023					
7/1 - 9/30/2023					
10/1 - 12/31/2023					
1/1 - 03/31/2024					
4/1 - 6/30/2024					
7/1 - 9/30/2024					
10/1 - 12/312024					
1/1 - 03/31/2025					
4/1 - 6/30/2025					
7/1 - 9/30/2025					
10/1 - 12/31/2025					

Date filed: 10-15-2022

Total Tax With Penalties and Interest

Amount you owe (Form 1040, Line 37)	22,643
Failure to Pay penalty	671
Failure to File penalty	
Interest	519
Total tax due	23,833

Explanation of Schedule A, line 5e

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return: **MADHUKUMAR GAJULA**

Tax ID Number: **390-23-4789**

This worksheet shows the breakdown of which state and local taxes are actually being deducted on federal Schedule A when the state and local taxes are limited to $10,000 ($5,000 if married filing separately.)

		Total paid	Allowed amount
1.	Real estate taxes	8,724	8,724
2.	Personal property taxes	0	0
3.	State and local income taxes	0	0
4.	Sales tax	1,777	1,276
5.	Add amounts in right column of lines 1-4. Enter this amount on Schedule A, line 5e		10,000

State and Local General Sales Tax Deduction Worksheet - Line 5a

(Keep for your records)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

Before you begin: See the instructions for line 1 of the worksheet if you:

- Lived in more than one state during 2021, or
- Had any **nontaxable** income in 2021.

1. Enter your **state** general sales taxes from the 2021 Optional State Sales Tax Table **1.** 1,777

Next. If, for all of 2021, you lived only in Connecticut, the District of Columbia, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Jersey, or Rhode Island, skip lines 2 through 5, enter -0- on line 6, and go to line 7. Otherwise, go to line 2.

2. Did you live in Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Louisiana, Mississippi, Missouri, New York, North Carolina, South Carolina, Tennessee, Utah, or Virginia in 2021?

- [X] **No.** Enter -0-.
- [ ] **Yes.** Enter your base **local** general sales taxes from the 2021 Optional Local Sales Tax Tables. . . . . . **2.** ______

3. Did your locality impose a **local** general sales tax in 2021? Residents of California and Nevada, see the instructions for line 3 of the worksheet.

- [X] **No.** Skip lines 3 through 5, enter -0- on line 6, and go to line 7.
- [ ] **Yes.** Enter your **local** general sales tax rate, but omit the percentage sign. For example, if your local general sales tax rate was 2.5%, enter 2.5. If your local general sales tax rate changed or you lived in more than one locality in the same state during 2021, see the instructions for line 3 of the worksheet . . . . **3.** ______

4. Did you enter -0- on line 2?

- [ ] **No.** Skip lines 4 and 5 and go to line 6.
- [ ] **Yes.** Enter your **state** general sales tax rate (shown in the table heading for your state), but omit the percentage sign. For example, if your state general sales tax rate is 6%, enter 6.0 . . . . **4.** ______

5. Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places) . . . . **5.** ______

6. Did you enter -0- on line 2?

- [ ] **No.** Multiply line 2 by line 3.
- [X] **Yes.** Multiply line 1 by line 5. If you lived in more than one locality in the same state during 2021, see the instructions for line 6 of the worksheet. . . . . **6.** ______

7. Enter your state and local general sales taxes paid on specified items, if any. See the instructions for line 7 of the worksheet . . . . **7.** ______

8. **Deduction for general sales taxes.** Add lines 1, 6, and 7. Enter the result here and the total from all your state and local general sales tax deduction worksheets, if you completed more than one, on Schedule A, line 5a.
Be sure to check the **box** on that line **8.** 1,777

Optional Sales Tax Table Computation

State: TX

Income:	319,750			
Family Size:*	1			
Amount from table:	1,777			
Days:	365			
Deduction:	1,777			

* "Over 5" is the maximum number in family size for the optional sales tax tables in Schedule A Instructions. Returns with a family size of 6 or more will display a "6" on this line.

Worksheet for Form 2210, Part III, Section B - Figure the Penalty

(Keep for your records)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

Complete Rate Period 1 of each column before going to the next column; then go to Rate Periods 2, 3, and 4 in the same manner. If multiple estimated tax payments are applied to the underpayment amount in a column of line 1a, you'll need to make more than one computation for that column.

		Payment Due Dates			
		(a) 04/15/21	**(b)** 06/15/21	**(c)** 09/15/21	**(d)** 01/15/22
1a Enter your underpayment from Part III, Section A, line 17 . . .	1a	3,456	6,912	10,368	13,824
1b Date and amount of each payment applied to the underpayment in the same column. Don't enter more than the underpayment amount on line 1a for each column (see instructions). **Note.** Your payments are applied in the order made first to any underpayment balance in an earlier column until that underpayment is fully paid.	1b	06-15-2021 3,456	09-15-2021 6,912	01-15-2022 10,368	04-15-2022 13,824
Rate Period 1: April 16, 2021 - June 30, 2021					
2 Computation starting dates for this period	2	04/15/21	06/15/21		
3 Number of days **from** the date on line 2 to the date the amount on line 1a was paid **or** 6/30/21, whichever is earlier	3	*Days:* 61	*Days:* 15		
4 Underpayment on line 1a x Number of days on line 3 / 365 x 0.03	4	$ 17	$ 9		
Rate Period 2: July 1, 2021 - September 30, 2021					
5 Computation starting dates for this period	5	06/30/21	06/30/21	09/15/21	
6 Number of days **from** the date on line 5 to the date the amount on line 1a was paid **or** 9/30/21, whichever is earlier	6	*Days:*	*Days:* 77	*Days:* 15	
7 Underpayment on line 1a x Number of days on line 6 / 365 x 0.03	7	$	$ 44	$ 13	
Rate Period 3: October 1, 2021 - December 31, 2021					
8 Computation starting dates for this period	8	09/30/21	09/30/21	09/30/21	
9 Number of days **from** the date on line 8 to the date the amount on line 1a was paid **or** 12/31/21, whichever is earlier	9	*Days:*	*Days:*	*Days:* 92	
10 Underpayment on line 1a x Number of days on line 9 / 365 x 0.03	10	$	$	$ 78	
Rate Period 4: January 1, 2022 - April 15, 2022					
11 Computation starting dates for this period	11	12/31/21	12/31/21	12/31/21	01/15/22
12 Number of days **from** the date on line 11 to the date the amount on line 1a was paid **or** 4/15/22, whichever is earlier	12	*Days:*	*Days:*	*Days:* 15	*Days:* 90
13 Underpayment on line 1a x Number of days on line 12 / 365 x 0.03	13	$	$	$ 13	$ 102
14 **Penalty.** Add all amounts on lines 4, 7, 10, and 13 in all columns. Enter the total here and on line 19 of Part III, Section B . . . . . . ▶	14				$ 276

Carryover Worksheet
List of items that will carryover to the 2022 tax return

(This page is not filed with the return. It is for your records only.)

2021

Name(s) as shown on return: MADHUKUMAR GAJULA

Tax ID Number: 390-23-4789

Itemized Deductions

				Carryover Amount
Contributions subject to 100% of AGI limitations				
Contributions subject to 60% of AGI limitations				
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)				
Contributions subject to 30% of AGI limitations				
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)				
Taxable state and local refunds to Schedule 1 (Form 1040) line 1				
State/local taxes paid in 2022 to flow to the Schedule A				
State donations and contributions carryover				
State overpayment applied to next year				

Expenses

Office in home operating expenses				
Office in home excess casualty losses and depreciation				
Disallowed investment interest expense	AMT		Reg. Tax	
Section 179 expense				
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use				
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use				

Losses

Short-term capital loss	AMT		Reg. Tax	
Long-term capital loss	AMT		Reg. Tax	
Net operating loss	AMT		Reg. Tax	
Excess business loss from Form 461 (becomes part of NOL next year)	AMT		Reg. Tax	
Qualified REIT and PTP loss carryover				
QBI loss carryover				
Nonrecaptured net section 1231 losses from WK_1231C	AMT		Reg. Tax	

Credits

Mortgage interest credit				
Credit for prior year minimum tax				
Foreign Tax credit	AMT		Reg. Tax	
District of Columbia first time home owner's credit				
Res. energy efficient property credit				

Other

Preparer Fee				
Overpayment applied to next year's estimates				
Estimated Tax Payment 1	9,960		Estimated Tax Payment 2	9,960
Estimated Tax Payment 3	9,960		Estimated Tax Payment 4	9,960
Federal tax liability for 2210 calculation				84,112
State tax liability for state 2210 calculation				
IRA basis	Taxpayer		Spouse	
Disaster distributions taxable in 2022	Taxpayer		Spouse	
Disaster distributions taxable in 2023	Taxpayer		Spouse	
Excess repayments from 8915-F	Taxpayer		Spouse	
Deferred SE tax to be repaid by 12/31/2022				

Passive Activity

At Risk Limitations

FOR TAX YEAR 2021

MADHUKUMAR GAJULA

AVANT TAX AND FINANCE

5152 VILLAGE CREEK DR

PLANO, TX 75093

(469)320-9030