Department of the Treasury-Internal Revenue Service

Amended U.S. Individual Income Tax Return

▶ Use this revision to amend 2019 or later tax returns.

▶ Go to www.irs.gov/Form1040X for instructions and the latest information.

OMB No. 1545-0074

(Rev. July 2021) This return is for calendar year (enter year) or fiscal year (enter month and year ended) 2021 Your first name and middle initial Last name Your social security number GUNNAM REDDY 786-04-0855 SRIDHAR REDDY If joint return, spouse's first name and middle initial Last name Spouse's social security number CHANDRIKA PARLAPALLI 988-94-3323 Current home address (number and street). If you have a P.O. box, see instructions. Ant no Your phone number 4577 FOX RIDGE LANE (704)706-4048City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. INDIAN LAND SC 29707 Foreign country name Foreign province/state/county Foreign postal code Amended return filing status. You must check one box even if you are not changing your filing status. Caution: In general, you can't change your filing status from married filing jointly to married filing separately after the return due date. 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 Enter on lines 1 through 23, columns A through C, the amounts for the return A. Original amount B. Net change -C. Correct reported or as amount of increase year entered above. previously adjusted or (decrease) amount Use Part III on page 2 to explain any changes. (see instructions) explain in Part III **Income and Deductions** Adjusted gross income. If a net operating loss (NOL) carryback is 1 51,798. 51,798. 2 Itemized deductions or standard deduction 2 12,550. 12,550. 25,100. 3 Subtract line 2 from line 1 3 39,248. -12,550 26,698. 4a Reserved for future use . . . 4a 4b Qualified business income deduction . 5 Taxable income. Subtract line 4b from line 3. If the result is zero or less, -12,550.5 39,248. 26,698. **Tax Liability** 6 Tax. Enter method(s) used to figure tax (see instructions): 6 4,508. 2,803. -1,705.7 Nonrefundable credits. If a general business credit carryback is 7 0. 112 112. 8 Subtract line 7 from line 6. If the result is zero or less, enter -0-4,508. 8 -1.817.2,691. 9 9 10 Other taxes 10 0. 0. 0. Total tax. Add lines 8 and 10 11 11 4,508. -1,817.2,691. **Payments** 12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (If changing, see instructions.) 12 6,462. 0. 6,462. 0. 13 Estimated tax payments, including amount applied from prior year's return 13 0. 14 14 0. 0. Refundable credits from: Schedule 8812 Form(s) 2439 4136 15 ☐ 8885 ☐ 8962 or ☐ other (specify): 15 0. Total amount paid with request for extension of time to file, tax paid with original return, and additional 16 16 17 Total payments. Add lines 12 through 15, column C, and line 16 17 6,462. **Refund or Amount You Owe** Overpayment, if any, as shown on original return or as previously adjusted by the IRS 18 1,954. 18 19 19 4,508. 20 Amount you owe. If line 11, column C, is more than line 19, enter the difference . . . 20 21 If line 11, column C, is less than line 19, enter the difference. This is the amount **overpaid** on this return 21 1,817. Amount of line 21 you want refunded to you 22 1,817. 23 Amount of line 21 you want applied to your (enter year): estimated tax Complete and sign this form on page 2.

Form 1040-X (Rev. 7-2021) Page 2 Part I **Dependents** A. Original number Complete this part to change any information relating to your dependents. B. Net change -C. Correct of dependents This would include a change in the number of dependents. amount of increase reported or as number or (decrease) Enter the information for the return year entered at the top of page 1. previously adjusted 24 24 Your dependent children who lived with you 25 25 0 0 26 Your dependent children who didn't live with you due to divorce or separation 26 0 0 27 Other dependents 27 0 0 28 28 Reserved for future use Reserved for future use 29 29 30 List ALL dependents (children and others) claimed on this amended return. Dependents (see instructions): (d) ✓ if qualifies for (see instructions): (b) Social security (c) Relationship Credit for other If more number to you Child tax credit (a) First name Last name dependents than four dependents, see instructions and check here ► Presidential Election Campaign Fund (for the return year entered at the top of page 1) Part II Checking below won't increase your tax or reduce your refund. Check here if you didn't previously want \$3 to go to the fund, but now do. Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does. Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X. Attach any supporting documents and new or changed forms and schedules. EXPLANATION LATTER ATTACHED

	Unde	member to keep a copy of this for penalties of perjury, I declare that I have statements, and to the best of my knowled ayer) is based on all information about which	filed an original return, and that I hage and belief, this amended return	is true, correct,				
Sign Here	•	Your signature			SENIOR TECHNICAL ARCH: Your occupation			
	•	Spouse's signature. If a joint return, both	n must sign.	Date		OME MAKER pouse's occupation	1	
Paid		/Type preparer's name M PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM		Date 01/29/2024	Check if self-employed	PTIN P02082703	
Preparer Use Only	Firm	's name ▶ GLOBAL TAXES L	LC		-	Firm's EIN ► 88-2145487		
	Firm	's address ► 245 ROONEY CT	Phone no. (678) 965-9522					

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

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

Filing Status	s 🗌 s	Single X Married filing jointly	Marr	ied filing separately	(MFS)	Head of	hous	ehold (HOH)	Qua	lifying wid	low(er) (QW)
Check only one box.	•	u checked the MFS box, enter the roor is a child but not your dependen		your spouse. If you	checl	ked the HOH o	r QW	box, enter th	e child's	name if th	ne qualifying
Your first name	and mi	iddle initial	Last n	ame					Your so	cial securi	ty number
SRIDHAR	RED:	DY	GUN	NAM REDDY					786-04-0855		
If joint return, s	pouse's	s first name and middle initial	ame					Spouse'	s social se	curity number	
CHANDRII		LAPALLI					988-	.3			
Home address (number and street). If you have a P.O. box, see instructions. 4577 FOX RIDGE LANE Apt. no. Pro									Preside	ntial Electi	on Campaign
4577 FO	X RI	DGE LANE								nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Sta	ite	ZIP	code			ntly, want \$3 Checking a
INDIAN :	LAND			S	C	29	707	_	ow will not	•	
Foreign country		Foreign province/state	coun	ty	Fore	Foreign postal code your tax or			•		
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of ar	ny fina	ancial interest i	n any	/ virtual curre	ncy?	Yes	⊠ No
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate retur	•	•							
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Sp	ouse	: Was bor	n be	fore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	ip	(4) 🗸 if q	ualifies fo	r (see instru	uctions):
If more	(1) F	irst name Last name		number to you			Child tax cred		Credit for ot	ther dependents	
than four											
dependents, see instruction	s										
and check											
here ►											
	1	Wages, salaries, tips, etc. Attach l	Form(s)	W-2					. 1		52,978.
Attach	2a	Tax-exempt interest	2a		b T	axable interest	t		. 2b)	
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds		. 3b)	
required.	4a	IRA distributions	4a		b T	axable amoun	t.		. 4b)	
	5a	Pensions and annuities	5a		b T	axable amoun	t.		. 5b)	
Standard	6a	Social security benefits	6a	6a b Taxable amount)	
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D	if required. If not rec	quired	l, check here		▶[7		-1,180.
 Single or Married filing 	8	Other income from Schedule 1, lin	ne 10						. 8		
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome				▶ 9		51 , 798.
Married filing	10	Adjustments to income from Sche	dule 1,	line 26					. 10)	
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	s your a	adjusted gross inco	me				▶ 11		51,798.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedul	e A)	12	а	25,10	0.		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e insti	ructions) 12I	b				
household, \$18,800	С	Add lines 12a and 12b							. 120		25,100.
If you checked	13	Qualified business income deduct	ion fron	m Form 8995 or Forr	n 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		25,100.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	, ente	er-0			. 15	:	26 , 698.

	16	Tax (see instructions). Check if any from Form	(s): 1 8814	4 2 🗌 4972	3 🗌			16	2,803.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	2,803.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	e 8812			19	
	20	Amount from Schedule 3, line 8						20	112.
	21	Add lines 19 and 20						21	112.
	22	Subtract line 21 from line 18. If zero or less,	enter -0					22	2,691.
	23	Other taxes, including self-employment tax,	from Schedule	2, line 21				23	0.
	24	Add lines 22 and 23. This is your total tax					. ▶	24	2,691.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	6,	462.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	6,462.
16	26	2021 estimated tax payments and amount ap						26	
If you have a qualifying child,	27a	Earned income credit (EIC)			27a				
attach Sch. EIC.		Check here if you were born after Janu							
		January 2, 2004, and you satisfy all the							
		taxpayers who are at least age 18, to claim to	1 1	structions					
	b	Nontaxable combat pay election			-				
	C	Prior year (2019) earned income		0-1	- 00				
	28				28			-	
	29	American opportunity credit from Form 8863			30			-	
	30	Recovery rebate credit. See instructions . Amount from Schedule 3, line 15			31			-	
	31 32	Add lines 27a and 28 through 31. These are			-	dabla aradi	to N	32	
	33	Add lines 25d, 26, and 32. These are your to	-					33	6,462.
	34	If line 33 is more than line 24, subtract line 24						34	3,771.
Refund	35a	Amount of line 34 you want refunded to you			•	=	 ▶ □	35a	3,771.
Direct deposit?	b b	Routing number X X X X X X X			Ck flere Check		avings	33a	5,771.
See instructions.	▶d	Account number X X X X X X X X					aviiigs		
	36	Amount of line 34 you want applied to your							
Amount	37	Amount you owe. Subtract line 33 from line			36	ructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions) .			38	. dollorio			
Third Party		you want to allow another person to disc							
Designee		tructions	elow.	X No					
•	Des	signee's	Phone			Persor	al identif	ication I	
	nar	me ►	no.			numbe	er (PIN)	•	
Sign		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration of							
Here		ur signature	Date	Your occupation	2300 011	all illioithation			nt you an Identity
	, 101	ar signature	Date	rour occupation					N, enter it here
Joint return?				SENIOR TECH	NICAL	ARCHITEC	(see i	nst.) 🕨	
See instructions. Keep a copy for	Spe	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati	ion				nt your spouse an
your records.	,			IIOME MAIZET	_			ity Prote nst.) ▶	ection PIN, enter it here
	————	200 00 (704) 706 4049	Email address	HOME MAKER		CMATT CON			
		parer's name Preparer's signate		SRIDHARREDDY	Date		l PTIN	1	Check if:
Paid		MM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 01/29/2024 P02082						,702	Self-employed
Preparer		m's name ► GLOBAL TAXES LLC	IVILI DUQUI	OOLIA TAHLAM	101/2	J/ Z U Z 4 I			678) 965-9522
Use Only		n's address ► 245 ROONEY CT E BRU	NSWICK N.	J 08816				e no. (s EIN ▶	
Go to warm ire a		n1040 for instructions and the latest information.	TANANT CIL INC		DEVICE	/00/02 PPO	1 111111	O LIIN	Form 1040 (2021)
GO TO WWW.IIS.G	JV/I UIII	TOTO TO INSTRUCTIONS AND THE TALEST INTOTITIATION.		BAA	KEV 09	/09/22 PRO			1 01111 1 0 -7 0 (2021)

Form 1040 (2021)

Page 2

SCHEDULE 3 (Form 1040)

Additional Cree

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

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Sequence No. 03

Your social security number

Department of the Treasury Internal Revenue Service

SRI	DHAR REDDY GUNNAM REDDY & CHANDRIKA PARLAPALLI		786-0	04-08	55
Par	t I Nonrefundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441. Form 2441			2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	112.
5	Residential energy credits. Attach Form 5695			5	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a			
b	Credit for prior year minimum tax. Attach Form 8801	6b			
С	Adoption credit. Attach Form 8839	6c			
d	Credit for the elderly or disabled. Attach Schedule R	6d			
е	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			
I	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	112.
			(co	ntinue	ed on page 2)

Schedule 3 (Form 1040) 2021 Page **2**

Par	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	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	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		
С	Health coverage tax credit from Form 8885	13c		
d		13d		
е	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 line 31		15	

BAA

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to www.irs.gov/ScheduleD for instructions and the latest information. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number 786-04-0855 SRIDHAR REDDY GUNNAM REDDY & CHANDRIKA PARLAPALLI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 92,988. 107,749. 13,581. -1,180.Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -1,180.Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 9 Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15

Schedule D (Form 1040) 2021 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -1,180. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 1,180.) • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return

SRIDHAR REDDY GUNNAM REDDY & CHANDRIKA PARLAPALLI

Social security number or taxpayer identification number

786-04-0855

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

 ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS ☐ (C) Short-term transactions not reported to you on Form 1099-B 										
(a) Description of property	(b) Date acquired (Mo., day, yr.)	(c) Date sold or	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below		(h) Gain or (loss). Subtract column (e)				
(Example: 100 sh. XYZ Co.)				and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)			
COINBASE	01/01/21	12/31/21	92,988.	107,749.	W	13,581.	-1,180.			
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above shave is checked) or line 2 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	92 988	107 749		13 581	-1 180			

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Credit for Qualified Retirement Savings Contributions

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form8880 for the latest information.

OMB No. 1545-0074 Attachment Sequence No. 54

Name(s) shown on return

Your social security number 786-04-0855

SRIDHAR REDDY GUNNAM REDDY & CHANDRIKA PARLAPALLI



You cannot take this credit if either of the following applies. • The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).

• The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2004; (b) is claimed as a dependent on someone else's 2021 tax return; or (c) was a student (see instructions).

	aspsas.		,	o. (0) a c			(a) Yo	u	(b) Your spouse
1				LE account contributions .		1			
2	Elective deferrance contributions,	1,	116.						
3	Add lines 1 an	1,	116.						
4	Certain distrib extensions) of both spouses								
5	both spouses' amounts in both columns. See instructions for an exception 4 Subtract line 4 from line 3. If zero or less, enter -0								
6	In each colum	n, enter the sn	naller of line 5 or \$2,0	00		6	1,	116.	
7				take this credit				7	1,116.
8				040-NR, line 11*	8		51,798.		
9	Enter the appl	icable decimal	amount from the tabl	e below.					
	If line	If line 8 is— And your filing status is—							
	Over—	But not over—	er filing jointly nousehold separately, or						
				line 9—	Qualifying w		er)		
		\$19,750	0.5	0.5	0.5				
	\$19,750	\$21,500	0.5	0.5	0.2				
	\$21,500	\$29,625	0.5	0.5	0.1			9	x0 .1
	\$29,625	\$32,250	0.5	0.2	0.1				
	\$32,250	\$33,000	0.5	0.1	0.1				
	\$33,000	\$39,500	0.5	0.1	0.0				
	\$39,500	\$43,000	0.2	0.1	0.0				
	\$43,000	\$49,500	0.1	0.1	0.0				
	\$49,500	\$66,000	0.1	0.0	0.0				
	\$66,000		0.0	0.0	0.0				
		Note:	f line 9 is zero, stop;	you can't take this cre	edit.				
10	Multiply line 7	•						10	112.
11				from the Credit Limit				11	2,803.
12				utions. Enter the small				12	112.
		•	•						

^{*} See Pub. 590-A for the amount to enter if you claim any exclusion or deduction for foreign earned income, foreign housing, or income from Puerto Rico or for bona fide residents of American Samoa.