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.

Submission Identification Number (SID)

Taxpay	er's name	Social sec	urity numb	er		
SAI	SANDEEP AKULA	689-9	689-91-7634			
Spouse	's name	Spouse's social security number				
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	r year you	are aut	horizing.)		
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	83,486.		
2	Total tax		2	11,286.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	13,136.		
4	Amount you want refunded to you		4	1,850.		
5	Amount you owe		5			
Dord	Toxpoyor Declaration and Signature Authorization (Pagure you get and I		ny of v	our roturn)		

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

Under penalties of periury. 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

X I authorize GLOBAL TAXES LLC to enter or generate m	to enter or generate my PIN	lauthorize GLOBAL TAXES LLC	XI
---	-----------------------------	-----------------------------	----

1	7	6	3	4	as			
Enter five digits, but don't enter all zeros								

my

ERO firm name 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

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name 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 – Practit	ioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fi	ve-digit self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9			

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 >					
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So					
For Paperwork Reduction Act Notice, see your tax return instructions.	BAA	REV 04/09/22 PRO	Form 8879 (Rev. 01-2021)		

E1040	· ·	artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		(99) urn	202	21	OMB No. 154	5-0074	IRS Us	e Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single [] Married filing jointly [ou checked the MFS box, enter the n son is a child but not your dependen	ame of	-	separately ouse. If you	. ,				,		, 0	low(er) (QW) he qualifying
Your first name	and m	iddle initial	Last na	me							Your so	ocial securi	ty number
SAI SAN	DEEP		AKUI	A							689-	91-763	4
If joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse	's social se	curity number
Home address 90 KANE		er and street). If you have a P.O. box, see	instructio	ons.					Apt. no. D11		Check	here if you,	
UIV. IOWD. OF DOST OTHER. IT YOU HAVE A TOPEION ADDRESS, AISO COMPLETE SDACES DELOW. I STATE I ZTP CODE						•		ntly, want \$3 Checking a					
WEST HAD	RTFO	RD				C	Г	061	L19		•	low will not	0
Foreign countr	y name		F	Foreign p	rovince/state	e/count	ty			your tax or refund.		. Spouse	
At any time du	uring 20	021, did you receive, sell, exchange	, or othe	rwise di	spose of a	ny fina	ancial interest	in any	virtual	currei	ncy?	X Yes	No
Standard Deduction		eone can claim: DYou as a de Spouse itemizes on a separate retur	n or you				a dependent						
Age/Blindnes	s You:	: Were born before January 2, 1	957	_ Are bl	lind S	oouse	: 🗌 Was b	orn bef	ore Janı		-	ls b	
Dependent				(2) \$	Social securi	ty	(3) Relations	ship				or (see instru	
If more	(1) F	First name Last name		number		to you			Child tax cred		redit	Credit for ot	ther dependents
than four dependents,													<u> </u>
see instruction	s —												<u> </u>
and check here ►													
	4	Wares solaries time ate Attach									4	l	
Attach	1	Wages, salaries, tips, etc. Attach F	2a	VV-2 .	· · ·		· · · ·			•	. <u>1</u> 2t		96,186.
Sch. B if	2a 3a		2a 3a				axable intere			·	. <u>21</u> 3k		0.
required.	- <u>5a</u> - 4a		3a 4a				Ordinary divid axable amou		• •	·	. 31. . 41.		0.
	5a		4a 5a			b Taxable amount			• •	•			
Standard	6a		5a 6a				axable amou		• •	•	. 6k		
Deduction for –	7	Capital gain or (loss). Attach Sche		f require	d If not rea				• •	► [7		-3,000.
 Single or Married filing 	8	Other income from Schedule 1, lin						• •	• •		. 8		<u> </u>
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,						• •	• •	•	► 9		<u> </u>
\$12,550Married filing	10	Adjustments to income from Sche								•	10		
jointly or	11	Subtract line 10 from line 9. This is	,							•	► <u>11</u>		83,486.
Qualifying widow(er),	12a	Standard deduction or itemized	-	-	•		1	2a	12	,550			00,100.
\$25,100 " • Head of	b	Charitable contributions if you take		`		,		2b		300			
household,	c											c	12,850.
\$18,800If you checked	13	Qualified business income deduct											
any box under Standard	14												12,850.
Deduction,	15	Taxable income. Subtract line 14											70,636.
see instructions.)												

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	11,286.
	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	11,286.
	19	Nonrefundable child tax cred	dit or credit for o	other depender	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,286.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	11,286.
	25	Federal income tax withheld	from:			1 1			
	а	Form(s) W-2				25a 13	,136.	_	
	b	Form(s) 1099				25b		_	
	С	Other forms (see instructions	,			25c			
	d	Add lines 25a through 25c						25d	13,136.
If you have a	26	2021 estimated tax payment						26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a		_	
		Check here if you were b							
		January 2, 2004, and you taxpayers who are at least a							
	b	Nontaxable combat pay elec	-	1 1					
	c	Prior year (2019) earned inco				-			
	28	Refundable child tax credit or		L	Schedule 8812	28			
	29	American opportunity credit	from Form 8863	3, line 8		29		1	
	30	Recovery rebate credit. See		-		30		1	
	31	Amount from Schedule 3, lin				31		1	
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32	
	33	Add lines 25d, 26, and 32. T		•				33	13,136.
Refund	34							34	1,850.
Refutio	35a	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid Amount of line 34 you want refunded to you. If Form 8888 is attached, check here							1,850.
Direct deposit?	►b	Routing number $0 2 1 0 0 0 3 2 2$ b c Type: X Checking Savings							
See instructions.	►d	Account number 4 8 3	0 6 4 0	1 0 5 '	7 2		-		
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36			
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	? See			
Designee		tructions				. 🕨 🗌 Yes. Co	omplete b	elow.	X No
		signee's		Phone			onal identi		
		ne 🕨		no. 🕨			oer (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation				nt you an Identity
				Duito					N, enter it here
Joint return?					APPLICATI	ON DEVELOPE	R (see	inst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupa	tion			it your spouse an
your records.	,							inst.) 🕨	ection PIN, enter it here
	Ph	one no. (518)961-716	2	Email address	פאאדטידידט אצד געדיים	ULA53@GMAIL.CO		. ,.	
		one no. (518)961-716 parer's name	3 Preparer's signat		SANDEEP.AKU	Date	PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	2703	Self-employed
Preparer		n's name GLOBAL TAX		IGEN DROAK	COL III INDUN	. 01/10/2022			678)965-9522
Use Only		n's address ► 2530 Pebbl		n Cummin	a GA 30041			's EIN ►	
Go to www.irc.co		11040 for instructions and the late			-		1		Form 1040 (2021)
GO 10 W WW.115.90		noto initiatiuotions and the late	st mormation.		BAA	REV 04/09/22 PRO			10m 10m (2021)

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

OMB No. 1545-0074 20 Attachment

	Your soc	al security numb			
of for instructions and the latest information.		Sequence No. 01			

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

Your soc	ial security	number
689-91	-7634	

Part I Additional Income

			-	
1	Taxable refunds, credits, or offsets of state and local income taxes	8	1	
2 a	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, tru Schedule E		5	-9,700.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	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		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81	-	
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
ο	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8р		
z	Other income. List type and amount ►			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8	040, 1040-SR, or	10	-9,700.

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

Schedule 1 (Form 1040) 2021

Par	t 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	
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		
С	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:		
а	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		
С	Nontaxable amount of the value of Olympic and Paralympicmedals and USOC prize money reported on line 81 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
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)		
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 violations24i		
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	

BAA

REV 04/09/22 PRO

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

2021 Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SAI SANDEEP AKULA

Your social security number

689-91-7634

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?	Yes 🛛 X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting y	our gain or loss.

Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(or other basis)	Form(s) 8949, F line 2, column	Part I,	combine the result with column (g)	
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	294,957.	328,829.	2,188.		-31,684.
2	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	13,269.	11,854.			1,415.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	-30,269.		

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
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 Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12	Net long-term gain or (loss) from partnerships, S corporat		12			
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	0	() ()		15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -30,269.
	• 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 line 22.	
	• 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?	
	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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (3,000.)
	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.	
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 04/09/22 PRO

Schedule D (Form 1040) 2021

Form **8949**

Sales and Other Dispositions of Capital Assets

► 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.



Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number
689-91-7634

SAI SANDEEP AKULA

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.

X (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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	s) and see Column (e) in the separate instructions (Code instructions		(g) Amount of adjustment		
Robinhood Securities LLC	05/15/21	12/12/21	294,957.	328,829.	W	2,188.	-31,684.	
2 Totals. Add the amounts in columna negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box A	al here and inc is checked), lir	lude on your 1e 2 (if Box B	294,957.	328,829.		2,188.	-31,684.	

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.

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

Form **8949**

Sales and Other Dispositions of Capital Assets

► 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.



Internal Revenue Service Name(s) shown on return

Department of the Treasury

Name(s) shown on return	Social security number or taxpayer identification number
SAI SANDEEP AKULA	689-91-7634

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

X (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	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)	
ROBINHOOD CRYPTO LLC	05/05/21	12/12/21	13,269.	11,854.			1,415.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	13,269.	11,854.			1,415.	

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.

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

	CHEDULE E Supplemental Income and Loss									OMB No. 1545-0074					
(Form	Form 1040) (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.									ic.)	20) 21			
	ent of the Treasury												Attachment		
	Revenue Service (99)		► GO	to www.irs.gov	ScheduleE to	or inst	ructions	s and th	e latest	Information				ce No. 13	
,	shown on return											social se	-	number	
	SANDEEP AK		Fram F	Pentel Deel Fe	toto and Day	volti o	o Not					9-91-'			
Part				Rental Real Es ns. If you are an											
	l you make any						. ,							es 🖂 No	
<u>- </u> п	Yes," did you o			perty (street, c											
A				NAGAR RA				יייי תא	TANCA	NTA THE	00013	>			
	3-11-109/	505 GF	лисоп	NAGAK KA	MANIHAPOP		DERAD	AD,IE	LIANGA		00013)			
C															
1b	Type of Property 2 For each rental real estate property listed Fair Rental Personal Use														
	(from list be		ab	ove. report the	number of fa	ir rent	al and		-	Days		Days		QJV	
Α	3	,	pe	rsonal use day	s. Check the (QJV b	ox only	Α		365		0			
В			qu	alified joint ven	ture. See inst	ructio	ns.	В							
С								С							
Туре о	of Property:														
1 Sing	le Family Resid	dence	3 Va	acation/Short-1	erm Rental	5 La	nd		7 Self-	Rental					
2 Mul	ti-Family Reside	ence	4 Co	ommercial		6 Ro	yalties		8 Othe	r (describe	e)				
Incom	e:				Properties:			Α			B			С	
3	Rents received	k				3			400.						
4	Royalties recei	ived .				4									
Expen	ses:														
5	Advertising .					5									
6	Auto and trave	el (see in	structio	ons)		6									
7	Cleaning and r					7		1,	950.						
8	Commissions.					8									
9	Insurance					9									
10	Legal and othe	-				10									
11	Management f					11		1,	850.						
12	Mortgage inter				,	12									
13	Other interest.					13			1 = 0						
14	Repairs					14			150.						
15	Supplies					15		۷,	200.						
16						16 17		1	050						
17 18	Utilities Depreciation e					18		,	950.						
19	Other (list)					19									
20	Total expenses	s Add lii	nes 5 tł	nough 19		20		10	100.						
21	Subtract line 2			-				107	100.						
21	result is a (loss														
	file Form 6198				•	21		-9,	700.						
22	Deductible ren														
	on Form 8582					22	(9,7	700.)	()()	
23a	Total of all amo	-		-	rental prope	rties			23a		40	0.			
b	Total of all amo		-						23b						
с	Total of all amo	ounts re	ported	on line 12 for a	Il properties				23c						
d	Total of all amo	ounts re	ported	on line 18 for a	Il properties				23d						
е	Total of all amo		•						23e		10,10	0.			
24	Income. Add	•									-	24			
25	Losses. Add ro	oyalty los	ses fron	n line 21 and rer	ntal real estate	losse	s from li	ne 22. E	nter tot	al losses he	ere.	25 (9,700.)	
26	Total rental re														
	here. If Parts						-								
	Schedule 1 (Fo	orm 1040	u). line (5. Otherwise. ir	iclude this ar	nount	in the 1	iotal on	ine 41	on page 2	<u> </u>	26		-9,700.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021

-9,700.

Form CT-1040 Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

- 1. **Document Identification Numbers -** Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 4.)
- 2. **Social Security Number -** The Social Security Number must appear at the top of Form CT-1040, Pages 2, 3, and 4.
- 3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

- 1. Be sure that Page 1 of your return is not printed on the back of this sheet.
- 2. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
- 3. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
- 4. Do not attach or send copies of forms W-2 or 1099.
- 5. Verify that the address lines on the return are correct and proper abbreviations are used.
- 6. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 18a through 18e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
- 7. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
- 8. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return.
- 9. Send **all** completed pages of CT-1040, Schedule CT-EITC, Schedule CT-CHET, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251. Send **all** four pages of your completed return, both pages of your completed CT-EITC schedule, the completed Schedule CT-CHET, and any other supporting schedules.
- 10. Make check payable to: Commissioner of Revenue Services
- 11. To ensure proper posting, write your SSN(s) (optional) and "2021 Form CT-1040" on your check.
- 12. To mail your return, use the following addresses:

For all tax returns with payment: Department of Revenue Services PO Box 2977 Hartford CT 06104-2977 For refunds and tax returns without payment: Department of Revenue Services PO Box 2976 Hartford CT 06104-2976

- 13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
- 14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 25a through 25d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited. Alpha characters are not allowed in Routing or Account Number fields.
- 15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040.

Do not send this sheet with your return.

	10401221V01155	55 3		Form CT-1 Connecticut Re		-		Retur	n	
Page ?	1 of 4			(Rev. 12/21)						
Oth	er tax year, beginning:		and end	ding:						
Y S	N FJ	Ν	MFS		Ν	НОН	N	QW		
689	- 91 - 7634	-	-							
SAI	SANDEEP	AKULA							N	Dec.
									N	Dec.
90 K	ANE ST				Ν	CT-8379)	Ν	CT-2210)
APT	D11				Ν	CT-1040	CRC	Ν	Federal	Form 1310
WEST	HARTFORD	СТ	06119) -	•					

1.	Federal adjusted gross income (from federal Form 1040, Line 11, or federal Form 1040-SR, Line 11)	1.	83486
2.	Additions to federal adjusted gross income (from Schedule 1, Line 38)	2.	0
3.	Add Line 1 and Line 2	3.	83486
4.	Subtractions from federal adjusted gross income (from Schedule 1, Line 50)	4.	0
5.	Connecticut adjusted gross income: Line 4 subtracted from Line 3.	5.	83486
6.	Income tax	6.	4261
7.	Credit for income taxes paid to qualifying jurisdictions (from Schedule 2, Line 59)	7.	0
8.	Line 7 subtracted from Line 6. If Line 7 is greater than Line 6, "0" is entered.	8.	4261
9.	Connecticut alternative minimum tax (from Form CT-6251)	9.	0
10	. Add Line 8 and Line 9.	10.	4261
11.	. Credit for property taxes paid on your primary residence, motor vehicle, or both (from Schedule 3, Line 6)	8) 11.	0
12	. Line 11 subtracted from Line 10. If less than zero, "0" is entered.	12.	4261
13	. Total allowable credits (from Schedule CT-IT Credit, Part 1, Line 11)	13.	0
14	. Connecticut income tax: Line 13 subtracted from Line 12. If less than zero, "0" is entered.	14.	4261
15	. Individual use tax (from Schedule 4, Line 69). If no tax is due, "0" is entered.	15.	0
16	. Total tax: Add Line 14 and Line 15.	16.	4261





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					_		
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17. Amount from Line 16			17.	426	1		
Forms W-2, W-2G, and 1099 Information							
Col. A - Employer or Payer's Fed. ID # Col.	. B - CT Wages,	Tips, etc.	Col. C - (CT Income Tax W	/ithheld		
18a. 71 - 0928628 •	96	5186		4830			
18b •		0			0		
18c. - •		0			0		
18d. –		0			0		
18e. - •		0			0		
18f. Additional Connecticut withholding (from Suppleme	ental Schedule C	T-1040WH, Lin	ne 3) 18f.		0		
18. Total Connecticut income tax withheld: Amounts	in Column C.			18.	4830		
19. All 2021 estimated tax payments and any overpaym	nents applied fror	m a prior year		19.	0		
20. Payments made with Form CT-1040 EXT				20.	0		
20a. Earned income tax credit (from Schedule CT-EITC				20a.	0		
20b. Claim of right credit (from Form CT-1040 CRC, Lin				20b.	0		
20c. Pass-through entity tax credit: (from Schedule CT-				20c.	0 4830		
21. Total payments and refundable credits: Add Line			:	21.	4830 569		
22. Overpayment: If Line 21 is more than Line 17, Line	17 Subtracted fro	om Line 21.		22.	509		
23. Amount of Line 22 you want applied to your 2022	estimated tax			23.	0		
24. Amount of Line 22 you want applied as a CHET cor		chedule CT-C	HET, Line 4)	24.	0		
24a. Total contributions of refund to designated charities	s (from Schedule	5, Line 70)		24a.	0		
25. Refund: Lines 23, 24, and 24a subtracted from Line If you have not elected to direct deposit, a refund cl		ied and proce	essing may be	25. delayed	569		
25a. Acct. type Y Ck. N Sv. 25b. Rout. #	0210003			30640105	70		
	021000.	522 200.	AUGL # 40	30040103	12		
25d. Refund going to a bank account outside the U.S. 25	d. N						
26. Tax due: If Line 17 is more than Line 21, Line 21 s	ine 17.		26.	0			
27. If late: Penalty entered. Line 26 multiplied by 10% (.10).27.					0		
28. If late: Interest entered.					0		
Line 26 multiplied by number of months or fraction of a		28.	0				
29. Interest on underpayment of estimated tax (from Form CT-2210)				29. 30.	0		
30. Total amount due: Add Lines 26 through 29. Declaration: I declare under penalty of law that I hav	o oxaminod this	roturn and a	II accompanyi		0.0		
including reporting and payment of any use tax due correct. I understand the penalty for willfully deliver imprisonment for not more than five years, or both, information of which the preparer has any knowledg Your signature	e, and, to the be ing a false returr The declaration	est of my kno or documen	wledge and be t to DRS is a fi	elief, it is true, o ne of not more t	complete, and han \$5,000, or s based on all		
•		•		518961	7163		
Spouse's signature (if joint return) ●		Date •		Daytime telephone number			
Paid preparer's signature	Date	Telephone numbe	er	Paid Preparer's PTIN			
•SYAM PRIYA RAM SAGAR GUPT	•041922	• 67896	59522	P02082703			
Paid preparer's name			FEIN				
SYAM PRIYA RAM SAGAR GUPTA TALL				301017196			
Firm's name, address and ZIP code GLOBAL TAXES LLC • 2530 PEBBLE CREEK LN CUMMING GA 30041 -			_	Self-employed			
• 2530 PEBBLE CREEK LN CUMI Third Party Designee - Complete the following to author							
Designee's name	Telephone number	anounce person		ation number (PIN)			
•	•		•				
104	401221V02	21555					

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Form CT-1040, Page 3 of 4

I OIII		40 , Fage 5 01 4	
10401221V031555		• 6899176	34
Schedule 1 - Modifications to Federal Adjusted Gross Income			
 Interest on state and local government obligations other than Connec 	ticut	31.	0
32. Mutual fund exempt-interest dividends from non-Connecticut state or	municipal	government	
obligations		32.	0
33. Taxable amount of lump-sum distributions from qualified plans not inc	luded in fe		_
gross income		33.	0
34. Beneficiary's share of Connecticut fiduciary adjustment: Entered only	if greater f	than zero. 34.	0
35. Loss on sale of Connecticut state and local government bonds		35.	0
 Section 168(k) federal bonus depreciation deduction allowed for property 	placed in		0
36a. 80% of Section 179 federal deduction.	36a.	0	
37. Other - specify •		37.	0
38. Total additions: Add Lines 31 through 37.		38.	0
39. Interest on U.S. government obligations		39.	0
40. Exempt dividends from certain qualifying mutual funds derived from L	J.S. goverr	nment obligations 40.	0
1. Social Security benefit adjustment (from Social Security Benefit Adjus	tment Wo	rksheet) 41.	0
2. Refunds of state and local income taxes		42.	0
13. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuit	ies	43.	0
14. Military retirement pay		44.	0
45. 50% of income received from Connecticut Teachers' Retirement Syste	45.	0	
46. Beneficiary's share of Connecticut fiduciary adjustment: Entered only		n zero. 46.	0
7. Gain on sale of Connecticut state and local government bonds		47.	0
 48. CHET contributions made in 2021 or an excess carried forward from a prior year Acct. #: 		48.	0
18a. 25% of Section 168(k) federal bonus depreciation deduction added b	ack in pred	ceding four years. 48a.	0
48b. 42% of pension or annuity income.		48b.	0
49. Other - specify ●		49.	0
50. Total subtractions: Add Lines 39 through 49.	50.	0	
Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdiction	S		
51. Modified Connecticut adjusted gross income	•	51.	0
		Col. A	Col. B
52. Qualifying jurisdiction's name and two-letter code 52.			
52 New Connecticut income included on Line 54 and reported on a			
53. Non-Connecticut income included on Line 51 and reported on a qualifying jurisdiction's income tax return (from Schedule 2 worksheet)	53.	0	0
4, ····3, J		-	· · ·
54. Line 53 divided by Line 51	54.	0.0000	0.0000
55. Income tax liability: Line 11 subtracted from Line 6.	55.	0	0
56. Line 54 multiplied by Line 55	56.	0	0
57. Income tax paid to a qualifying jurisdiction	57.	0	0
58. Lesser of Line 56 or Line 57	58.	0	0
59. Total credit: Add Line 58, all columns.		59.	0
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Form CT-1040, Page 4 of 4

10401221V041555				•	689917	634	
Schedule 3 - Property Tax Credit		ELANS ⁷					
	Ν	65 years or older	Ν	One or more depe	endents on fe	deral r	eturn
<i>Qualifying Property</i> Name of Connecticut Tax Town or District Description of Property Date(s) Paid	•	Primary Residence	• •	Auto 1	•		Auto 2
Amount Paid	• 60.	0	• 61.		• 0 62.		0
63. Total property tax paid: Add Lines 60,	, 61, a	and 62.			63.		0
64. Maximum property tax credit allowed					64.	•	200
65. Lesser of Line 63 or Line 64.					65.	•	0
66. Property tax credit limitation decimal an	nount	: If zero, the amount from	Line 65	is entered on Line 6	8. 66.	•	0.00
67. Line 65 multiplied by Line 66.					67.	•	0
68. Line 67 subtracted from Line 65.					68.		0
Schedule 4 - Individual Use Tax							
69a. Use tax at 1% (from Connecticut Ind	lividua	al Use Tax Worksheet, S	ection A	, Column 7)	69a.		0
69b. Use tax at 6.35% (from Connecticut	Indiv	dual Use Tax Workshee	t, Sectio	n B, Column 7)	69b.		0
69c. Use tax at 7.75% (from Connecticut	Indiv	dual Use Tax Workshee	t, Sectio	n C, Column 7)	69c.		0
69d. Use tax at 2.99% (from Connecticut Individual Use Tax Worksheet, Section D, Column 7)							0
69. Individual use tax: Add Lines 69a, 69b, 69c, and 69d. Schedule 5 - Contributions to Designated Charities				69. •		0	
70a. AR					70a.		0
70b. OT					70b.		0
70c. ES/W					70c.		0
70d. BCR							0
70e. SNS					70e.		0
70f. MR					70f.		0
70g. CBS					70g.		0
70h. MHCIA					70h.		0
70. Total Contributions: Add Lines 70a Taxpayer email	a throi	ugh 70h.			70.		0

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