(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

Submission Identification Number (SID)		
Taxpayer's name	Social security	y number
KIRAN PRASAD SANKA	799-34-	-0906
Spouse's name	Spouse's soci	al security number
SWARNA LATHA SANKA	955-98-	-3224
Part I Tax Return Information — Tax Year Ending December 31,	2021 (Enter year you ar	re 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 61,297.
2 Total tax		2 3,371.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 4,071.
4 Amount you want refunded to you		4 2,500.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure Under penalties of perjury, I declare that I have examined a copy of the income tax return (original tax).		
my knowledge and belief, it is true, correct, and complete. I further declare that the amount return (original or amended) I am now authorizing. I consent to allow my intermediate service to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt for any delay in processing the return or refund, and (c) the date of any refund. If applicable, Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institupayment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Apayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institution taxes to receive confidential information necessary to answer inquiries and resolve issues personal identification number (PIN) below is my signature for the income tax return (original Electronic Funds Withdrawal Consent.	provider, transmitter, or electro or reason for rejection of the tra I authorize the U.S. Treasury artion account indicated in the ta financial institution to debit the gent to terminate the authoriza cancellation requests must be is involved in the processing of related to the payment. I furtly	nic return originator (ERO) ansmission, (b) the reason its designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the
Taxpayer's PIN: check one box only		
· ·	ter or generate my PIN $\frac{4}{500}$	0 9 0 6 as my
ERO firm name	Ent	er five digits, but
signature on the income tax return (original or amended) I am now authorize	zing.	
I will enter my PIN as my signature on the income tax return (original or ar if you are entering your own PIN and your return is filed using the Practit below.		
Your signature ▶	Date ►	
Spouse's PIN: check one box only		
	ter or generate my PIN 8	
ERO firm name signature on the income tax return (original or amended) I am now authoriz		er five digits, but 't enter all zeros
I will enter my PIN as my signature on the income tax return (original or an income tax return (original	=	na Check this hov only
if you are entering your own PIN and your return is filed using the Practit below.		
Spouse's signature ▶	Date ►	
Practitioner PIN Method Returns Only—co	ontinue 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. 5 8 7 2 7 8 Don't enter	3 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic inc authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-incompanies.	n that I am submitting this retu	rn in accordance with the
ERO's signature ▶	Date ▶	
ERO Must Retain This Form — See In		

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

E 1040 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 Check only one box.	If yo	Single X Married filing jointly [u checked the MFS box, enter the r son is a child but not your dependen	ame of	ed filing separately (your spouse. If you	,	_		, ,	_			
Your first name	and mi	iddle initial	Last na	ame					Your so	cial security	number	
KIRAN PI	RASAI	D	SAN	KΑ					799-	34-0906	1	
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse'	's social secu	ırity number	
SWARNA I	LATH	A	SAN	KA					955-	98-3224	:	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	Preside	Presidential Election Campaign		
18790 LI	LOYD	DRIVE						122	Check h	here if you, o	or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP	code		if filing jointl		
DALLAS					T	X	75	252	-	o this fund. C low will not c	•	
Foreign country name				Foreign province/state	/coun	ty	Fore	ign postal code		x or refund.	Spouse	
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of ar	y fina	ancial interest	in an	y virtual currer	ncy?	X 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 bo	rn be	fore January 2	2, 1957	Is blin	nd	
Dependents	s (see	instructions):		(2) Social securit	у	(3) Relations	hip	(4) ✓ if qu	ualifies fo	r (see instruct	tions):	
If more		irst name Last name		number		to you		Child tax cr	edit	Credit for other	er dependents	
than four	AAS	SHRITA SANKA		955-98-327	78	Daughter	<u>-</u>			×	₹	
dependents,	VIE	IAAN SANKA		724-56-218	35	Son		×				
see instructions and check	5 —											
here ►												
	1	Wages, salaries, tips, etc. Attach l	orm(s)	W-2					. 1	5	3,979.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st		. 2b	,		
Sch. B if	3a	Qualified dividends	3a		b C	Ordinary divide	ends		. 3b	,		
required.	4a	IRA distributions	4a		b T	axable amour	nt .		. 4b	,		
	5a	Pensions and annuities	5a		b T	axable amour	nt .		. 5b	,		
Standard	6a	Social security benefits	6a		b T	axable amour	nt .		. 6b	,		
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D	f required. If not req	uired	, check here		▶ [7	1	3,418.	
 Single or Married filing 	8	Other income from Schedule 1, lir	e 10						. 8	_	6,100.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome			1	▶ 9		1,297.	
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	djusted gross inco	me			1	▶ 11	6	1,297.	
widow(er),	12a	Standard deduction or itemized	deduc	tions (from Schedule	e A)	12	2a	25,100	o. 📉			
\$25,100 • Head of	b	Charitable contributions if you take		,	,	ructions) 12	2b	600	o .			
household, \$18,800	С	Add lines 12a and 12b							. 120	c 2	5,700.	
• If you checked	13	Qualified business income deduct	ion fron	n Form 8995 or Forr	า 899	05-A			. 13			
any box under Standard	14	Add lines 12c and 13							. 14		5,700.	
Deduction,	15	Taxable income. Subtract line 14	from lin	ne 11. If zero or less	ente	er -0			. 15		5,597.	
see instructions.												

	16	Tax (see instructions). Check if any from Fo	orm(s): 1 881	4 2 🗌 4972	3 🗌			16	3,871.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	3,871.
	19	Nonrefundable child tax credit or credit for	or other depender	nts from Schedule	8812			19	500.
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	500.
	22	Subtract line 21 from line 18. If zero or les	ss, enter -0					22	3,371.
	23	Other taxes, including self-employment to	ax, from Schedule	e 2, line 21				23	0.
	24	Add lines 22 and 23. This is your total tax	x				•	24	3,371.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	4,0)71.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	4,071.
If you have a	26	2021 estimated tax payments and amour	nt applied from 20)20 return				26	
qualifying child,	27a	Earned income credit (EIC)			27a				
attach Sch. EIC.		Check here if you were born after Ja January 2, 2004, and you satisfy all taxpayers who are at least age 18, to claim	the other requi m the EIC. See in	rements for					
	b	Nontaxable combat pay election			-				
	С	Prior year (2019) earned income		0 1 1 1 0010	-	1 (
	28	Refundable child tax credit or additional ch			28	⊥,8	300.	-	
	29	American opportunity credit from Form 8	•		29			-	
	30	Recovery rebate credit. See instructions			30			-	
	31	Amount from Schedule 3, line 15			31	ملاله مدم ماناما			1 000
	32	Add lines 25d, 26, and 22. These are year						32	1,800.
	33	Add lines 25d, 26, and 32. These are you						33	5,871. 2,500.
Refund	34	If line 33 is more than line 24, subtract lin			•	-		34 35a	2,500.
Direct deposit?	35a	Amount of line 34 you want refunded to					_	Soa	2,300.
See instructions.	►b ►d	Routing number 0 1 1 4 0 0 4 9 5 ▶ c Type: ▼ Checking □ Savings Account number 3 8 8 0 0 3 9 7 1 7 8 0							
	36	Amount of line 34 you want applied to yo			36				
Amount	37	Amount you owe. Subtract line 33 from				ruotiono	•	37	
You Owe	38	Estimated tax penalty (see instructions)			38	ructions .		31	
Third Party		you want to allow another person to							
Designee	ins	ructions				Yes. Com			⋈ No
		ne ►	no.			number			
Sign		ler penalties of perjury, I declare that I have exaref, they are true, correct, and complete. Declarati							
Here	You	r signature	Date	Your occupation			If the	IRS ser	nt you an Identity
Joint return?				SOFTWARE I	ENGIN	EER	1	ection Pl nst.) ▶	N, enter it here
See instructions. Keep a copy for	Spo	use's signature. If a joint return, both must sign	. Date	Spouse's occupat	ion				nt your spouse an
your records.	,			HOME MAKE	n		1	nst.) ▶	ection PIN, enter it here
		70.70 (000)502 0221	Email addraga	_			(000)	, •	
		ne no. (908)502-8221 parer's name Preparer's sid	Email address	findmekira	an@gm Date		TIN		Check if:
Paid		1.10,20.01	,	רווחיים תיתוד זיים מיים				2070	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY	LA KAN SAGAK	GUPIA IALLAM	104/0	0/2022 PC)2082		
Use Only		n's name ► GLOBAL TAXES LLC n's address ► 2530 Pebble Creek	In Cummin	~ C7 20041			1		678)965-9522
Co to use the			LII CUIIIIIIII			// PF -	Firm's	s EIN 🕨	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 04	/01/22 PRO			Form 1040 (2021)

Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

KIRAN PRASAD & SWARNA LATHA SANKA

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

Your social security number 799-34-0906

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	s	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, tr Schedule E	·	5	-6,100.
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		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	0-		
9	Total other income. Add lines 8a through 8z	8z	9	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040. 1040-SR. or	9	
	10/0 ND line 9		40	

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
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 Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	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	24 g		
h	,	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	24 j		
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 there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service (99) Name(s) shown on return Your social security number 799-34-0906 KIRAN PRASAD & SWARNA LATHA SANKA 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) 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 270,927. 257,562. 53. 13,418. 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 13,418. 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 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

BAA

15

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

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 13,418. • 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. 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 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

Form **8949**

Sales and Other Dispositions of Capital Assets

ormation. 20**21**

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.

2021 Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) sh	own	on	return	

Social security number or taxpayer identification number

KIRAN PRASAD & SWARNA LATHA SANKA

799-34-0906

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☐ (C) Short-term transactions			_	sis wasn't report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	ustment, if any, to gain or loss. u enter an amount in column (g), enter a code in column (f). ee the separate instructions. Gain Subtrac	
(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 Securities LLC	10/08/21	12/31/21	1,948.	2,009.	W	53.	-8.
COINBASE	08/11/21	12/25/21	268,979.	255,553.			13,426.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked). or line 3 (if Box	al here and inc e is checked), li i	lude on your ne 2 (if Box B	270,927.	257,562.		53.	13,418.

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.

SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s)	shown on return						Your socia	al securit	y number
KIRA	N PRASAD & SWAR						799-3		-
Part	Income or Loss	From Rental Real Estate and Ro	yalties N	ote: If you	are in th	e business of	renting per	sonal pr	operty, use
	Schedule C. See	instructions. If you are an individual, rep	ort farm rent	al income o	or loss f	rom Form 48	35 on page	2, line 4	0.
A Dic	l you make any payme	nts in 2021 that would require you to	o file Form(s) 1099? S	ee inst	ructions .		. 🗌 ነ	∕es ⊠ No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?						. 🗌 ነ	res 🗌 No
1a	Physical address of e	each property (street, city, state, ZIF	P code)						
Α	NEAR PRAGATHI	NAGAR LAKE NIZAMPET, HYI	DERABAD	TELANG	ANA I	N 500090)		
В									
С									
1b	Type of Property	2 For each rental real estate pro	perty listed	.		Rental	Personal		QJV
	(from list below)	above, report the number of fa	air rental and OJV box on			Days	Days	5	
Α	3	personal use days. Check the if you meet the requirements to	o file as a			365		0	
В		qualified joint venture. See inst	tructions.	В					
С				С					
	of Property:								
_	le Family Residence	3 Vacation/Short-Term Rental			7 Self-	Rental			
	ti-Family Residence	4 Commercial	6 Royaltie		8 Othe	r (describe)			
Incom		Properties:		Α		В			С
3			3		450.				
4			4						
Expen									
5	_		5						
6	•	nstructions)	6		100				
7		nance	7	1,	170.				
8			8						
9			9						
10		ssional fees	10		000				
11	•	d to books ato (acc instructions)	11 12		900.				
12		d to banks, etc. (see instructions)	13						
13 14			14	1	300.				
15			15		$\frac{300.}{480.}$				
16			16		400.				
17			17	1	700.				
18		or depletion	18		700.				
19	Othor (list)	•	19						
20	` ′	lines 5 through 19	20	6.	550.				
21	•	line 3 (rents) and/or 4 (royalties). If							
21		instructions to find out if you must							
	file Form 6198		21	-6,	100.				
22	Deductible rental real	estate loss after limitation, if any,							
	on Form 8582 (see in		22 (6,1	.00.)	()	(,
23a	· ·	eported on line 3 for all rental prope	<u> </u>		23a		450.		
b		eported on line 4 for all royalty prop			23b				
С		eported on line 12 for all properties			23c				
d	Total of all amounts re	eported on line 18 for all properties			23d				
е	Total of all amounts re	eported on line 20 for all properties			23e		6,550.		
24	Income. Add positive	e amounts shown on line 21. Do no	t include ar	ny losses			. 24		
25	Losses. Add royalty lo	sses from line 21 and rental real estate	e losses from	ı line 22. E	nter tot	al losses here	e . 25	(6,100.
26	Total rental real esta	ate and royalty income or (loss).	Combine lir	nes 24 an	d 25. E	nter the res	ult		
	here. If Parts II, III, I'	V, and line 40 on page 2 do not	apply to yo	ou, also e	enter th	nis amount	on		
	Schedule 1 (Form 104	10), line 5. Otherwise, include this a	mount in the	e total on	line 41	on page 2	. 26		-6,100.

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

1040-SR 1040-NR 8812 ▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **47**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Your social security number 799-34-0906

KIRAN PRASAD & SWARNA LATHA SANKA	799-34-	-0906
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	61,297.
2a Enter income from Puerto Rico that you excluded		
b Enter the amounts from lines 45 and 50 of your Form 2555	0.	
c Enter the amount from line 15 of your Form 4563		
d Add lines 2a through 2c	. 2d	0.
3 Add lines 1 and 2d	. 3	61,297.
4a Number of qualifying children under age 18 with the required social security number 4a	1.	
b Number of children included on line 4a who were under age 6 at the end of 2021 4b	1.	
c Subtract line 4b from line 4a	0.	
5 If line 4a is more than zero, enter the amount from the Line 5 Worksheet ; otherwise, enter -0	. 5	3,600.
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	1.	
Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. reside	ent	
alien. Also, do not include anyone you included on line 4a.		
7 Multiply line 6 by \$500		500.
8 Add lines 5 and 7	. 8	4,100.
9 Enter the amount shown below for your filing status.		
• Married filing jointly—\$400,000		
• All other filing statuses—\$200,000 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. 9	400,000.
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.		0.
11 Multiply line 10 by 5% (0.05)		0.
Subtract line 11 from line 8. If zero or less, enter -0	. 12	4,100.
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) had a principal place of abode in the United State		
	<u>×</u>	
B Check here if you (or your spouse if married filing jointly) were 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		500.
b Subtract line 14a from line 12		3,600.
c If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A		3,871.
d Enter the smaller of line 14a or line 14c		500.
e Add lines 14b and 14d	. 14e	4,100.
f Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) receiv	ed	
for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see t instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments	he	
for 2021, enter -0-		1,800.
Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse		
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	2,300.
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	500.
i Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28		
		1 000
your Form 1040, 1040-SR, or 1040-NR	. 14i	1,800.

Schedule 8812 (Form 1040) 2021 Page 2

Part	I-C Filers Who Do Not Check a Box on Line 13		
Cautio	on: 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	
	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	· · · · · · · · · · · · · · · · · · ·		
	on: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.		
Cautio	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	x 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	
15	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	15	
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)	-	
b 19	Nontaxable combat pay (see instructions)		
19	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	
20	Next. On line 16b, is the amount \$4,200 or more?	20	
	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			
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	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
23	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22 Add lines 21 and 22	-	
		-	
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.		
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	
_0	Next enter the smaller of line 17 or line 26 on line 27		
Part	I-C Additional Child Tay Credit		
27	Enter this amount on line 15c	27	

Page 3 Schedule 8812 (Form 1040) 2021

Part	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	
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	
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	30	
	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.		
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	
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	
34	Subtract line 33 from line 3. If zero or less, enter -0	34	
35	Enter the amount from line 33	35	
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	
37	Multiply line 32 by \$2,000	37	
38	Multiply line 37 by line 36	38	
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	

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REV 04/01/22 PRO

Schedule 8812 (Form 1040) 2021

(Rev. December 2021)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) shown on return

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

► To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 70

Taxpayer identification number

	AN PRASAD & SWARNA LATHA SANKA	799-34-0	906		
	eparer's name and PTIN				
	M PRIYA RAM SAGAR GUPTA TALLAM	P0208270)3		
Part	•				
	check the appropriate box for the credit(s) and/or HOH filing status claimed on the return benefit(s) claimed (check all that apply).	ODC	AOTC		arts I–V HOH
1	Did you complete the return based on information for the applicable tax year provided by to reasonably obtained by you? (See instructions if relying on prior year earned income.)	he taxpayer	Yes	No	N/A
2	If credits are claimed on the return, did you complete the applicable EIC and/or CTC/worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, of worksheet(s) that provides the same information, and all related forms and schedules for claimed?	8812 (Form r your own	X		
3	Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's reference to the same of the sam				
	determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.	·			
	• Review information to determine that the taxpayer is eligible to claim the credit(s) and/o status and to figure the amount(s) of any credit(s)		×		
4	Did any information provided by the taxpayer or a third party for use in preparing the information reasonably known to you, appear to be incorrect, incomplete, or inconsistent answer questions 4a and 4b. If "No," go to question 5.)	? (If "Yes,"		×	
а	Did you make reasonable inquiries to determine the correct, complete, and consistent inform	nation? .			
b	Did you contemporaneously document your inquiries? (Documentation should include th you asked, whom you asked, when you asked, the information that was provided, and the information had on your preparation of the return.)	impact the			
5	Did you satisfy the record retention requirement? To meet the record retention requirement keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a applicable worksheet(s), a record of how, when, and from whom the information used to prove the same and any applicable worksheet(s) was obtained, and a copy of any document(s) prove taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status the amount(s) of the credit(s)	copy of any repare Form ided by the or to figure	×		
	List those documents provided by the taxpayer, if any, that you relied on:				
6	Did you ask the taxpayer whether he/she could provide documentation to substantiate eligic credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the returneturn is selected for audit?	rn if his/her	×		
7	Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year		X	$\overline{\Box}$	
•	(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)		EX		
а	Did you complete the required recertification Form 8862?				
8	If the taxpayer is reporting self-employment income, did you ask questions to prepare a co	mplete and			
or Po	correct Schedule C (Form 1040)?		Form 886	☐ 37 (Rev	12-2021)
UI Fd	perwork Reduction Act Notice, see separate instructions. REV 04/01/22 PRO			- 1 (1 1 C V .	16 6061)

orm 88	367 (Rev. 12-2021)			Page 2
Part	Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC	Yes	No	N/A
	and does not have a qualifying child, go to question 10.)		П	
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer			
	has supported the child the entire year?			
С	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of			
	more than one person (tiebreaker rules)?			
Part	or ODC, go to Part IV.)	claim C	CIC, A	
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar			
David	statement to the return?	<u> </u>	D4 /	
Part				/.) No
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?	alified	Yes	NO
Part		s. ao ta	D Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax		Yes	No
	and provided more than half of the cost of keeping up a home for the year for a qualifying person?			
Part				
	► You will have complied with all due diligence requirements for claiming the applicable credit(s) at status on the return of the taxpayer identified above if you:	nd/or H	OH fili	ng
	A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's respo in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(status and to figure the amount(s) of the credit(s);			
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checkle credit(s) claimed and HOH filing status, if claimed;	ist for a	ny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instr	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			
	Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).	's eligib	ility for	the
	A record of how, when, and from whom the information used to prepare this form and the applica obtained.	ble worl	ksheet(s) was
	A record of any additional information you relied upon, including questions you asked and the tax determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount			,
	▶ If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).			
15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct	t, and	Yes	No
	complete?		×	
	REV 04/01/22 PRO	orm 88	67 (Rev.	12-2021