IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form8879 for the latest information. Submission Identification Number (SID) Taxpayer's name Social security number BALA DEEKSHITH BEEREDDY 189-59-5841 Spouse's name Spouse's social security number 2021 (Enter year you are authorizing.) Part I Tax Return Information — Tax Year Ending December 31, 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 60.723. 2 2 6.281. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 7.720. 2,839. Amount you owe 5 Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only X lauthorize GLOBAL TAXES LLC to enter or generate my PIN as my Enter five digits, but ERO firm name don't enter all zeros 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 Your signature ▶ Spouse's PIN: check one box only I authorize to enter or generate my PIN as my ERO firm name Enter five digits, but 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 ▶ Practitioner PIN Method Returns Only-continue below Part III Certification and Authentication - Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 8 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

REV 03/07/22 PRO

Filing Status	s X	Single Married filing jointly	Marr	ied filing separately (MFS)	Head of	f househ	old (HOH)	☐ Qua	ılifying wid	low(er) (QW)
Check only one box.	If yo	ou checked the MFS box, enter the r	name of	your spouse. If you	check	ed the HOH o	or QW b	ox, enter th	e child's	name if the	ne qualifying
one box.	pers	son is a child but not your dependen	it 🕨								
Your first name	and m	iddle initial	Last na	ame					Your so	ocial securi	ty number
BALA DE	EKSH	ITH	BEE	REDDY					189-	59-584	1
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's social security number		
		er and street). If you have a P.O. box, see	instruct	ions.			Ap	ot. no.		ential Electi	on Campaigr
8205 ALI		ce. If you have a foreign address, also co	amplete :	nnagan halaw	Stat		ZIP cod	lo.			ntly, want \$3
PLANO	JOST OIII	se. Il you have a foreign address, also co	ompiete:	spaces below.	TX		750				Checking a
Foreign countr	v name			Foreign province/state	1		100000	postal code		low will not x or refund	
r oreigir counti	y maine			1 oroigii province/state	Count	,	1 oreign	postar code	,	You	Spouse
At any time du	ırina 20	021, did you receive, sell, exchange	or oth	erwise dispose of an	v fina	ncial interest	in any v	irtual curre	ncv?	Yes	⊠ No
Standard	-	neone can claim: You as a de						intaan oan o			<u></u>
Deduction	_	Spouse itemizes on a separate retur									
Age/Blindness	s You:	: Were born before January 2, 1	1957	Are blind Sp	ouse:	: Was bo	om befor	e January	2. 1957	☐ Is b	lind
Dependent				(2) Social securit		(3) Relationsh				or (see instru	
If more		irst name Last name		number	´	to you	to you Child tax c				her dependents
than four											
dependents,					\neg						
see instruction and check	s —				\neg						
here ▶ □											
	1	Wages, salaries, tips, etc. Attach I	Form(s)	W-2					. 1		66,976.
Attach	2a	Tax-exempt interest	2a		b Ta	axable interes	st .		. 2t		
Sch. B if	3a	Qualified dividends	За	9.	b 0	rdinary divide	ends .		. 3k	,	13.
required.	4a	IRA distributions	4a		b Ta	axable amoun	nt		. 4t	,	
	5a	Pensions and annuities	5a		b Ta	axable amoun	nt		. 5k	,	
Standard	6a	Social security benefits	6a		b Ta	axable amoun	nt		. 6k	,	
Deduction for -	7	Capital gain or (loss). Attach Sche	dule D	if required. If not req	uired,	check here		▶[□ 7		273.
 Single or Married filing 	8	Other income from Schedule 1, lin	ne 10						. 8		-6,539.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome				▶ 9		60,723.
 Married filing 	10	Adjustments to income from Sche	edule 1,	line 26		v or v or			. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted gross inco	me				▶ 11		60,723.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedule	e A)	12	2a	12,55	o. 🗔		
Head of	b	Charitable contributions if you take	the sta	ndard deduction (see	instr	uctions) 12	2b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 12	С	12,850.
If you checked	13	Qualified business income deduct	tion fror	n Form 8995 or Form	n 899	5-A			. 13	3	
any box under Standard	14	Add lines 12c and 13			. 101		. 101		. 14	1	12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less,	enter	r-0			. 15	j	47,873.
see instructions.											

Form 1040 (2021)										Pag	je ∠
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 🗌 4972	3 🗌			16		6,281	
	17	Amount from Schedule 2, lin	ie 3						17			
	18	Add lines 16 and 17		x x x x			N 4 3		18		6,281	٠.
	19	Nonrefundable child tax cree	dit or credit for o	ther depender	nts from Schedule	e 8812			19			
	20	Amount from Schedule 3, lin	ie8						20			
	21	Add lines 19 and 20					101 0 10		21			_
	22	Subtract line 21 from line 18					8 8 9		22		6,281	
	23	Other taxes, including self-e					101 × 1		23).
	24	Add lines 22 and 23. This is		* * * *			× + +	. •	24	-	6,281	
	25	Federal income tax withheld				1						
	a	Form(s) W-2		* * * *	* * * * *	25a	- 1	,720	_	l		
	b	Form(s) 1099				25b			_	l		
	С	Other forms (see instruction:				25c						
	d	Add lines 25a through 25c							25d		7,720	١.
If you have a	26	2021 estimated tax paymen			Mo	12.1			26	-		
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a			-			
)		Check here if you were to January 2, 2004, and you taxpayers who are at least a	a satisfy all the	e other requi	rements for							
	b	Nontaxable combat pay elec	ction	. 27b								
	C	Prior year (2019) earned inco	ome	. 27c						l		
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	28						
	29	American opportunity credit	from Form 8863	s, line 8		29				l		
	30	Recovery rebate credit. See	instructions .			30	1	,400		l		
	31	Amount from Schedule 3, lin				31				l		
	32	Add lines 27a and 28 throug		•					32		1,400	
	33	Add lines 25d, 26, and 32. T						▶			9,120	
Refund	34	If line 33 is more than line 24							34		2,839	
	35a	Amount of line 34 you want						_		_	2,839	٠.
Direct deposit? See instructions.	►b	Routing number 0 4 4			► c Type: 🗵	Check	ing	Savings	,	l		
occ mondonoris.	►d	Account number 3 1 6					_					
	36	Amount of line 34 you want a				36	100		_	-		
Amount You Owe	37 38	Amount you owe. Subtract				1 1	ructions	. •	37			-
10 to		Estimated tax penalty (see in				38						
Third Party Designee		you want to allow another tructions	person to disc	cuss this retui	rn with the IRS?		Yes. C	omplete	helow	X No	n	
Designee		signee's		Phone					ntification			
		me ►		no. ▶				ber (PIN)		Ш		_
Sign Here	bel	der penalties of perjury, I declare t ief, they are true, correct, and com		of preparer (othe	r than taxpayer) is b			on of whi	ich prepar	er has an	y knowled	
	You	ur signature		Date	Your occupation				he IRS ser otection P			
Joint return?					SOFTWARE :	ENGIN	IEER		e inst.)		T	Т
See instructions.	Spi	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat			If t	he IRS ser	nt your s	pouse an	_
Keep a copy for your records.										ection PI	N, enter it I	here
your records.									e inst.) 🕨	Ш	\perp	L
		one no. (937)829-310		Email address	BALADEEKSHITI		@GMAIL.C					
Paid		parer's name	Preparer's signat			Date		PTIN		Check		
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/1	6/2022				elf-employe	_
Use Only		m's name ► GLOBAL TA									965-952	
	Firr	n's address ▶ 2530 Pebb	ıe Creek L	n Cummin	g GA 30041			Fir	m's EIN 🕨	<u> 30-</u>	-101719	16

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

► Attach to Form 1040, 1040-SR, or 1040-NR, ► Go to www.irs.gov/Form1040 for instructions and the latest information. Attachment Sequence No. 01

Your social security number

BALA	DEEKSHITH BEEREDDY			189-5	9-58	41
Par	Additional Income					
1	Taxable refunds, credits, or offsets of state and local income taxe	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 $\dots \dots $				5	-6,539.
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				
į	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				
ī	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) .	8р				
z	Other income. List type and amount ▶	8z				
9	Total other income Add lines So through So				9	
10	Total other income. Add lines 8a through 8z				9	
	1040-NR line 8	o- 1 0, 1	0-10-0	11, 01	10	6 520

Schedule 1 (Form 1040) 2021 Page 2

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis 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	3	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)			
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			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24h			
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)			
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 in			
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

BAA

SCHEDULE D

(Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

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

BALA DEEKSHITH BEEREDDY

► 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.

Attachment Sequence No. 12

Your social security number 189-59-5841

	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for addition					
Pa	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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	2,817.	2,675.	١ ,	47.	289.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	1,290.	1,306.		. 4 / •	-16.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	•	,			
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				5	
6	Short-term capital loss carryover. Enter the amount, if ar 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. Otherwis	a through 6 in colu	ımn (h). If you hav	e any long-	7	273.
Pai	t II Long-Term Capital Gains and Losses—Ge	nerally Assets H	Held More Than	One Year	(see	instructions)
lines This	See instructions for how to figure the amounts to enter on the lines below. See instructions for how to figure the amounts to enter on the lines below. Cost Cost (sales price) (or other basis) (or other basis) (or other basis)					(h) Gain or (loss) Subtract column (e) from column (d) and 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	
	Net long-term gain or (loss) from partnerships, S corporat	tions, estates, and	trusts from Sched	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
	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				15	

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

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	273.
	• 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? 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 filling 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.		
	\square 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 (
	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

► 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.

OMB No. 1545-0074

2021

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

189-59-5841

BALA	DEEKSHITH	BEEREDDY
------	-----------	----------

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 (Example: 100 sh. XYZ Co.)	(b) Date acquired	(c) Date sold or disposed of	r Proceeds S (sales price) a	(e) Cost or other basis. See the Note below and see Column (e)	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example: 100 sn. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
ROBINHOOD SECURITIES LL	01/28/21	10/02/21	2,817.	2,675.	W	147.	289.
2 Totals. Add the amounts in colun negative amounts). Enter each t Schedule D, line 1b (if Box A abo above is checked), or line 3 (if Bo	otal here and inc ve is checked), li i	lude on your ne 2 (if Box B	2,817.	2,675.		147.	289.

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.

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.

OMB No. 1545-0074

2021

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

189-59-5841

ALA	DEEKSHITH	BEEREDDY	
-----	-----------	----------	--

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

for one or more of the boxes, complete as many forms with the same box checked as you need.

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.

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

(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

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).

(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below		(h) 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	01/29/21	05/10/21	1,290.	1,306.			-16.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (ff Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked). ►

SCHEDULE E (Form 1040)

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.

OMB No. 1545-0074 Attachment 13

Department of the Treasury Int

► Go to www ire gov/ScheduleF for instructions and the latest information

	evenue del vice (33)	01 11136	luctions	and the	latest	inionnation.			ience i	
Name(s)	shown on return							cial secur		ber
BALA	DEEKSHITH BEEREDDY							59-58		
Part										y, use
	Schedule C. See instructions. If you are an individual, rep-	ort far	m rental i	ncome o	or loss fi	rom Form 483	5 on pag	e 2, line	40.	
A Dic	I you make any payments in 2021 that would require you to	file F	orm(s) 1	099? S	ee instr	ructions .		. 🗆	Yes	⊠ No
B If "	Yes," did you or will you file required Form(s) 1099?							. 🗆	Yes	☐ No
1a	Physical address of each property (street, city, state, ZIF	code	e)							
_ A	REDDY COLONY WARANGAL TELANGANA IN 506	5001								
В										
C										
1b	Type of Property 2 For each rental real estate prop	perty !	isted				Personal Use			QJV
	Type of Property (from list below) 3	ur rent O.IV h	al and			Days	Day	ys		
A	3 if you meet the requirements to	o file a	is a	Α		362		0		
В	qualified joint venture. See inst	tructio	ns.	В						
С				С						
	of Property:									
	le Family Residence 3 Vacation/Short-Term Rental				7 Self-	Rental				
	ti-Family Residence 4 Commercial	6 Ro	yalties		3 Othe	r (describe)				
Incom				Α		В			С	
3	Rents received	3			550.					
4	Royalties received	4						-		
Expen										
5	Advertising	5			80.					
6	Auto and travel (see instructions)	6			250			-		
7	Cleaning and maintenance	7		В	350.					
8 9	Commissions	9								
	Insurance	10						-		
10 11	Legal and other professional fees	11			560.					
12	Mortgage interest paid to banks, etc. (see instructions)	12		9	560.					
13	Other interest	13								
14	Repairs	14		2	800.					
15	Supplies	15			899.					
16	Taxes	16			400.					
17	Utilities	17		/	100.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		7,	089.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see instructions to find out if you must									
	file Form 6198	21		-6,	539.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(6,5	39.)	()(
23a	Total of all amounts reported on line 3 for all rental prope				23a		550.			
	Total of all amounts reported on line 4 for all royalty prop-				23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e		7,089.			
24	Income. Add positive amounts shown on line 21. Do no					1 1 1 1		_		=
25	Losses. Add royalty losses from line 21 and rental real estate							(6	,539.
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, IV, and line 40 on page 2 do not Schedule 1 (Form 1040), line 5. Otherwise, include this ar						on 26		الم	5,539.
For Do	perwork Reduction Act Notice, see the separate instructions.				iine 4 i					1040) 202