(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 number
RANGANAYAKULU DAGGUBATI	899-26-8953
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31	2021 (Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	, , , , , , , , , , , , , , , , , , , ,
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
<b>1</b> Adjusted gross income	
2 Total tax	<b>2</b> 17,780.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b> 18,910.
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be su Under penalties of perjury, I declare that I have examined a copy of the income tax return	
my knowledge and belief, it is true, correct, and complete. I further declare that the ar return (original or amended) I am now authorizing. I consent to allow my intermediate ser to send my return to the IRS and to receive from the IRS (a) an acknowledgement of rec for any delay in processing the return or refund, and (c) the date of any refund. If applica Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial ir payment of my federal taxes owed on this return and/or a payment of estimated tax, and authorization is to remain in full force and effect until I notify the U.S. Treasury Financia payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Paym business days prior to the payment (settlement) date. I also authorize the financial institutaxes to receive confidential information necessary to answer inquiries and resolve is personal identification number (PIN) below is my signature for the income tax return (original Electronic Funds Withdrawal Consent.	vice provider, transmitter, or electronic return originator (ERO) epipt or reason for rejection of the transmission, (b) the reason able, I authorize the U.S. Treasury and its designated Financial stitution account indicated in the tax preparation software for the financial institution to debit the entry to this account. This is all Agent to terminate the authorization. To revoke (cancel) a sent cancellation requests must be received no later than 2 utions involved in the processing of the electronic payment of sues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
• •	o enter or generate my PIN 6 8 9 5 3 as my
Signature on the income tax return (original or amended) I am now auth	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN <b>and</b> your return is filed using the Prabelow.	or amended) I am now authorizing. Check this box only
Your signature ►	Date ▶
Spouse's PIN: check one box only	
to to to	enter or generate my PIN as my
signature on the income tax return (original or amended) I am now auth	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN <b>and</b> your return is filed using the Prabelow.	or amended) I am now authorizing. Check this box only
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only-	
Part III Certification and Authentication — Practitioner PIN Meth	od Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selection	ted PIN. 5 8 7 2 7 8 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic authorized to file for tax year indicated above for the taxpayer(s) indicated above. I co requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IR:	nfirm that I am submitting this return in accordance with the
ERO's signature ▶	Date <b>▶</b>
ERO Must Retain This Form — Se	
	<del> </del>

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

# **£1040**

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

2021

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single  Married filing jointly [ ou checked the MFS box, enter the reson is a child but not your depender	name of	ied filing separately your spouse. If you		_		. ,	_		
Your first name	first name and middle initial Last name Yo									ocial securi	ity number
RANGANA	YAKU:	LU	DAG	GUBATI					899-26-8953		
If joint return, s	pouse's	s first name and middle initial	Last n	ame					Spouse	's social se	curity number
Home address	•	er and street). If you have a P.O. box, see T RD	e instruct	tions.				Apt. no.	Check	here if you	, ,
City, town, or post office. If you have a foreign address, also complete spaces below.  State  ZIP code to g							to go to		ntly, want \$3 Checking a t change		
Foreign country	y name			Foreign province/stat	e/coun	ty	Fore	eign postal code		x or refund	
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	ny fina	ancial intere	st in an	y virtual curre	ency?	Yes	⊠ No
Standard Deduction		<b>leone can claim:</b>	•				nt				
Age/Blindness	You:	: Were born before January 2,	1957	Are blind S	pouse	: Was	born be	efore January	2, 1957	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relatio	nship	<b>(4)  ✓</b> if <b>c</b>	qualifies fo	or (see instru	uctions):
If more	(1) F	irst name Last name		number to you			J	Child tax of	credit	Credit for of	ther dependents
than four											
dependents, see instruction	e										
and check											
here ▶											
	_1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1	1	19,095.
Attach	2a	Tax-exempt interest	2a		<b>b</b> T	axable inter	rest		. 2h	י	
Sch. B if required.	3a	Qualified dividends	3a	7.	b C	Ordinary divi	dends		. 3t	<b>)</b>	9.
required.	4a	IRA distributions	4a		<b>b</b> T	Taxable amount			. 41	<b>)</b>	
	5a	Pensions and annuities	5a		<b>b</b> T	axable amo	ount .		. 5k	<b>)</b>	
Standard	6a	Social security benefits	6a		<b>b</b> T	axable amo	ount .		. 6Ł	<b>)</b>	
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D	if required. If not re	quired	, check here	е.	🕨	□		1,988.
Single or Married filing	8	Other income from Schedule 1, lir	ne 10						. 8		-8,970.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come				▶ 9	1	12,122.
Married filing	10	Adjustments to income from Sche	edule 1,	line 26					. 10	)	
jointly or Qualifying	11_	Subtract line 10 from line 9. This i	s your <b>a</b>	adjusted gross inc	ome				<b>▶</b> 11	<u>  1</u>	12,122.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	le A)		12a	12,55	50.		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e instr	ructions)	12b	30	0.0		
household, \$18,800	С	Add lines 12a and 12b							. 12	С	12,850.
If you checked	13	Qualified business income deduc-	tion fror	m Form 8995 or For	m 899	05-A			. 13	3	
any box under Standard	14	Add lines 12c and 13							. 14	1	12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	s, ente	er -0			. 15	5	99,272.

Form 1040 (2021	)								Page 2
	16	Tax (see instructions). Check	if any from Form	ı(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	17,780.
	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	17,780.
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		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	17,780.
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				. ▶	24	17,780.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				<b>25a</b> 18	,910.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	18,910.
<b>K</b>	26	2021 estimated tax payment						26	
If you have a L qualifying child,	27a	Earned income credit (EIC)			No	27a			
attach Sch. EIC.		Check here if you were by January 2, 2004, and you taxpayers who are at least as	ı satisfy all the ge 18, to claim t	e other requi	rements for				
	b	Nontaxable combat pay elec							
	С	Prior year (2019) earned inco							
	28	Refundable child tax credit or				28		- !	
	29	American opportunity credit	- !						
	30	Recovery rebate credit. See	- !						
	31	Amount from Schedule 3, lin	-						
	32	Add lines 27a and 28 throug	32	10.010					
	33	Add lines 25d, 26, and 32. T					. ▶	33	18,910.
Refund	34	If line 33 is more than line 24				•		34	1,130.
5	35a	Amount of line 34 you want	35a	1,130.					
Direct deposit? See instructions.	▶b	Routing number 1 2 1							
	►d	Account number 3 2 5							
	36	Amount of line 34 you want a				36			
Amount	37	Amount you owe. Subtract				1 1	. ▶	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party Designee	ins	you want to allow another tructions	•		m with the IRS?	. <b>Yes.</b> Co	omplete b		⊠ No
	nar	me ►		no. ▶ number (l					
Sign Here		der penalties of perjury, I declare the def, they are true, correct, and com			r than taxpayer) is b		on of which	prepare	er has any knowledge.
11010	You	ur signature		Date Your occupation					nt you an Identity IN, enter it here
Joint return?					SOFTWARE	ENGINEER		inst.) ▶	in, enter it here
See instructions.	Spo	ouse's signature. If a joint return, b	ooth must sign.	Date	Spouse's occupat		If the	IRS ser	nt your spouse an
Keep a copy for your records.		Specific o dignature. If a point roturn, <b>boar</b> must sign.			Spoudo o dodupation				ection PIN, enter it here
		one no. (510)304-910	3	Email address	RANGA.DAGGU	BATI@GMAIL.CO			
Paid	Pre	parer's name	Preparer's signat	ture		Date	PTIN		Check if:
Preparer Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/21/2022	P0208	2703	Self-employed
Use Only	Firr	m's name ► GLOBAL TAX	KES LLC				Phor	ne no. (	678)965-9522
	Firr	n's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm	's EIN ▶	30-1017196
Go to www.irs.go	ov/Form	1040 for instructions and the lates	st information.		BAA	REV 02/16/22 PRO			Form <b>1040</b> (2021

# SCHEDULE 1 (Form 1040)

# **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment
Seguence No. 01

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

RANG	ANAYAKULU DAGGUBATI		899-2	26-895	3
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes	s		1	
<b>2</b> 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, tr Schedule E			5	-8,970.
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			
i	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			
'	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 ▶				
		8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-S	R, or		

1040-NR, line 8

10

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	<b>&gt;</b>	_	
С	Date of original divorce or separation agreement (see instructions)	<b>-</b>		
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	<b>24</b> 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	<b>24i</b>		
j	Housing deduction from Form 2555	<b>24</b> 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 <b>adjustments</b> 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. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 899-26-8953 RANGANAYAKULU DAGGUBATI 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. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (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 . . . . . . . . . . . . . . . . 902. 2,224. 1,322. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . . Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . 7 1,322. 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 707. 1,373. 666. 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

666.

15

Schedule D (Form 1040) 2021 Page 2

## Part III **Summary** 1,988. 16 Combine lines 7 and 15 and enter the result 16 • 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? X 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? X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$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.

# 8949

# Sales and Other Dispositions of Capital Assets

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

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return

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.

Social security number or taxpayer identification number 899-26-8953 RANGANAYAKULU DAGGUBATI 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 Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) from column (d) and and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions 01/01/21 12/31/21 2,224. 902. 1,322.

ROBINHOOD SECURITIES LLC 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 (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶ 2,224. 902. 1,322.

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.

Form 8949 (2021) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side RANGANAYAKULU DAGGUBATI

Social security number or taxpayer identification number 899-26-8953

Before you check Box D, E, or F 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 II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

<ul><li>X (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				9)
1  (a)  Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, i If you enter an enter a c See the sep	(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 SECURITIES LLC	01/01/20	12/31/21	1,373.	707.			666.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	1,373.	707.			666.

**Note:** If you checked Box D 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)

### **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.

Attachment

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

Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return Your social security number 899-26-8953 RANGANAYAKULU DAGGUBATI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

	d you make any payme Yes," did you or will y													'es ⊠ No 'es □ No
1a	Physical address of	each	property (s	treet, city.	state. 7I	P code	e)				•	<u> </u>	<u>·                                      </u>	<u>cs</u> _ no
Α	KARAMCHEDU PRA													
В														
С														
1b	Type of Property	2	For each r	ental real e	estate pro	perty l	isted		Fair	Rental	Per	sonal	I .	QJV
	(from list below)		above, rep	oort the nui	al and		С	ays		Days				
Α	3		it vou mee	et the reaui	rements t	to file a	as a	Α		365			0	
В		_	qualified jo	oint venture	e. See ins	structio	ns.	В						
С								С						
	of Property:	_												
,	gle Family Residence		Vacation/		n Rental				7 Self-l					
	ti-Family Residence	<del>- 4</del>	Commerc		noution.	6 Ro	yalties		8 Othe	r (describe)		1		
Incom					perties:			Α	500	В	3			С
3	Rents received					3			500.					
4	Royalties received .					4								
Exper						_								
5	Advertising					5								
6	Auto and travel (see i					6		1	100					
7	Cleaning and mainter					7		⊥,	100.					
8	Commissions					8								
9	Insurance					9								
10	Legal and other profe					10								
11	Management fees .					11		1,	400.					
12	Mortgage interest pa					12								
13	Other interest					13								
14	Repairs					14			150.					
15	Supplies					15		2,	110.					
16	Taxes					16								
17	Utilities					17		2,	710.					
18	Depreciation expense	e or d	epletion			18								
19	Other (list)					19								
20	Total expenses. Add	lines	5 through <sup>1</sup>	19		20		9,	470.					
21	Subtract line 20 from													
	result is a (loss), see							_						
	file <b>Form 6198</b>					21		-8,	970.					
22	Deductible rental rea													
	on Form 8582 (see in		,			22	(	8,9	970.)	(		)	(	)
<b>23</b> a	Total of all amounts r	•							23a		5	00.		
b	Total of all amounts r			-					23b					
С	Total of all amounts r	-							23c					
d	Total of all amounts r	•							23d					
е	Total of all amounts r	-		-	-				23e		9,4			
24	Income. Add positiv						•					24		
25	Losses. Add royalty lo	sses 1	from line 21	and rental	real estat	e losse	s from li	ne 22. E	nter tota	al losses her	е.	25	(	8,970.)
26	Total rental real est													
	here. If Parts II, III, I										on			_
	Schedule 1 (Form 10-	40). lii	ne 5. Other	wise, inclu	ide this a	ımoun	t in the t	otal on	line 41	on page 2		26		-8,970.

Department of the Treasury Internal Revenue Service (99)

### **Passive Activity Loss Limitations**

► See separate instructions.

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

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. 858

Name(s) shown on return Identifying number RANGANAYAKULU 899-26-8953 DAGGUBATI Part I 2021 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) . . . . 1b 8,970. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . . **d** Combine lines 1a, 1b, and 1c . . . . . . . . . . . . . . . . . . 1d -8,970. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) 2a **b** Activities with net loss (enter the amount from Part V, column (b)) . . . . 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c ( **d** Combine lines 2a, 2b, and 2c . . . . . . . . . . . . . . . 2d Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used . . . . . . . . . . . . . . . . . . 3 -8,970.If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 . . . . . . 4 8,970. 5 Enter \$150,000. If married filing separately, see instructions . . . . . . 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 121,092. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 14,454. 8 Enter the **smaller** of line 4 or line 8 9 9 8,970. Part III **Total Losses Allowed** 10 10 0. Total losses allowed from all passive activities for 2021. Add lines 9 and 10. See instructions to find 8,970. 11 Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 8,970. 8,970. KARAMCHEDU

**Total.** Enter on Part I, lines 1a, 1b, and 1c ▶

0.

8,970.

Form 8582 (2021) Page **2** 

									•	
Part V Complete This Part Before	e P	art I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instruc	tions.			•	
Name of activity		Currer		Prior ye	ears	Overall gain or loss				
Name of activity	(a) Net income (line 2a)		(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c ▶										
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.				
Name of activity	Form or schedule and line number to be reported on (see instructions)		(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
KARAMCHEDU		E Ln 22		8,970.	1.0000	0000	8,97	0.	0.	
Total Allocation of Unallowed L		<b>&gt;</b>	uction	8,970.	1.00	)	8,97	0.	0.	
Allocation of Orlanowed L	US			5.						
Name of activity	Form or sche and line nur to be reporte (see instruct		mber ed on (a) L		Loss		(b) Ratio (c		(c) Unallowed loss	
Total			. •				1.00			
Part VIII Allowed Losses. See instru										
Name of activity		Form or sched and line numb to be reported (see instruction		(a) L	Loss	(b) Unallowed loss		(	c) Allowed loss	
									-	
Total										