Form **8879**

(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
VAMSEE KRISHNA KOSURU	840-30-7800
Spouse's name	Spouse's social security number
JAHNAVI MAHANKALI	651-67-6605
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.	
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be	sure you get and keep a copy of your return)
my knowledge and belief, it is true, correct, and complete. I further declare that the return (original or amended) I am now authorizing. I consent to allow my intermediate to send my return to the IRS and to receive from the IRS (a) an acknowledgement of for any delay in processing the return or refund, and (c) the date of any refund. If app Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financi payment of my federal taxes owed on this return and/or a payment of estimated tax, authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent at 1-888-353-4537. Pubusiness days prior to the payment (settlement) date. I also authorize the financial in taxes to receive confidential information necessary to answer inquiries and resolve personal identification number (PIN) below is my signature for the income tax return Electronic Funds Withdrawal Consent.	service provider, transmitter, or electronic return originator (ERO) receipt or reason for rejection of the transmission, (b) the reason blicable, I authorize the U.S. Treasury and its designated Financial al institution account indicated in the tax preparation software for and the financial institution to debit the entry to this account. This ancial Agent to terminate the authorization. To revoke (cancel) a ayment cancellation requests must be received no later than 2 stitutions involved in the processing of the electronic payment of existing issues related to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
I authorize GLOBAL TAXES LLC	to enter or generate my PIN 0 7 8 0 0 as my
ERO firm name signature on the income tax return (original or amended) I am now a	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.	al or amended) I am now authorizing. Check this box only
Your signature ►	Date ▶
Spouse's PIN: check one box only	
	to enter or generate my PIN 7 6 6 0 5 as my
X I authorize GLOBAL TAXES LLC ERO firm name	to enter or generate my PIN [7 6 6 0 5] as my Enter five digits, but
signature on the income tax return (original or amended) I am now a	
I will enter my PIN as my signature on the income tax return (origin if you are entering your own PIN and your return is filed using the below.	al or amended) I am now authorizing. Check this box only
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Or	nly—continue below
Part III Certification and Authentication — Practitioner PIN M	ethod Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-se	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electrathrorized to file for tax year indicated above for the taxpayer(s) indicated above. I requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized	confirm that I am submitting this return in accordance with the
ERO's signature ▶	Date ►
ERO Must Retain This Form —	
LITO MUSI NEGILI IIIIS FUITI —	000 mod 4000m

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 unchecked the MFS box, enter the notes is a child but not your dependent	- ame of	ied filing separately your spouse. If you		_		. ,	_		
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securit	y number
VAMSEE H	KRISI	HNA	KOS	URU					840-30-7800		
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse'	s social sec	curity number
JAHNAVI			MAH	ANKALI					651-	67-660	5
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Election	on Campaign
9430 AU	CUMN	GLEN DR								nere if you,	,
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP	code			tly, want \$3 Checking a
FRISCO					T	X	75	033	0	ow will not	0
Foreign country	/ name			Foreign province/stat	te/count	ty	Fore	ign postal code		or refund.	•
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	any fina	ancial interest i	in an	virtual currer	ncy?	Yes	X No
Standard Deduction	_	eone can claim:	•			a dependent					
Age/Blindness	You:	Were born before January 2, 1	957	Are blind S	pouse	: Was bor	rn be	fore January 2	, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	nip	(4) ✓ if qu	alifies fo	r (see instru	ctions):
If more		rst name Last name	number to you Child tax		Child tax cr	edit	Credit for otl	ner dependents			
than four										[
dependents, see instructions										[
and check										[
here ▶ □										[
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	2	06,553.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		2b		
Sch. B if required.	3a	Qualified dividends	3a		b C	ordinary divide	nds		3b		
required.	4a	IRA distributions	4a		b T	axable amoun	t.		4b		
	5a	Pensions and annuities	5a		b T	axable amoun	t.		5b		
Standard	6a	Social security benefits	6a		b T	axable amoun	t.		6b		
Deduction for—	7	Capital gain or (loss). Attach Sched	dule D	if required. If not re	quired	, check here		🕨 🗌	7	-	-3,000.
Single or Married filing	8	Other income from Schedule 1, line	e 10						8	-1	10,070.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total ir	come)	9	19	93,483.
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	your a	adjusted gross inc	ome		٠.)	► 11	19	93,483.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	ıle A)	12:	а	25,100).		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	ee instr	ructions) 12	b	432	2.		
household, \$18,800	С	Add lines 12a and 12b							120	2	25,532.
If you checked	13	Qualified business income deducti	on fror	m Form 8995 or Fo	rm 899	5-A			13		
any box under Standard	14	Add lines 12c and 13							14		25,532.
Deduction, see instructions.	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0								16	57,951.

	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972	3 🗌		16	28,446.
	17	Amount from Schedule 2, line 3			17	
	18	Add lines 16 and 17			18	28,446.
	19	Nonrefundable child tax credit or credit for other dependents from Schedul	e 8812		19	
	20	Amount from Schedule 3, line 8			20	
	21	Add lines 19 and 20			21	
	22	Subtract line 21 from line 18. If zero or less, enter -0			22	28,446.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is your total tax			24	28,446.
	25	Federal income tax withheld from:				
	а	Form(s) W-2	25a	36,483.		
	b	Form(s) 1099	25b			
	С	Other forms (see instructions)	25c			
	d	Add lines 25a through 25c			25d	36,483.
	26				26	
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)	27a			
attach Sch. EIC.		Check here if you were born after January 1, 1998, and before				
		January 2, 2004, and you satisfy all the other requirements for				
		taxpayers who are at least age 18, to claim the EIC. See instructions ▶ ☐				
	b	Nontaxable combat pay election	-			
	С	Prior year (2019) earned income				
	28	Refundable child tax credit or additional child tax credit from Schedule 8812	28		- !	
	29	American opportunity credit from Form 8863, line 8	29		- !	
	30	Recovery rebate credit. See instructions	30		- !	
	31	Amount from Schedule 3, line 15	31		-	
	32	Add lines 27a and 28 through 31. These are your total other payments and			32	26 402
	33	Add lines 25d, 26, and 32. These are your total payments			33	36,483.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amou			34	8,037. 8,037.
Direct deposit?	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, che Routing number $\begin{vmatrix} 1 & 1 & 1 & 0 & 0 & 0 & 6 & 1 & 4 \end{vmatrix}$ \triangleright c Type: \boxed{x}	Checking	. ▶ ∐ Savings	35a	0,037.
See instructions.	►b ►d	Routing number 1 1 1 0 0 0 6 1 4 ► c Type: X Account number 5 6 8 7 7 6 6 1 8				
	36	Amount of line 34 you want applied to your 2022 estimated tax	36			
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay,		ıs . >	37	
You Owe	38	Estimated tax penalty (see instructions)	38	15 .	31	
Third Party		you want to allow another person to discuss this return with the IRS?				
Designee		tructions		. Complete l	selow.	X No
	Des	signee's Phone		ersonal identi		
	nar	ne ▶ no. ▶	r	umber (PIN)	>	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying scl				
Here		ef, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is b	ased on all intorr			,
	You	ur signature Date Your occupation				nt you an Identity IN, enter it here
Joint return?		SOFTWARE	DEVELOPER	1.	inst.) ▶	
See instructions.	Spo	ouse's signature. If a joint return, both must sign. Date Spouse's occupa			IRS ser	nt your spouse an
Keep a copy for your records.	,					ection PIN, enter it here
your records.		SOFTWARE		. `	inst.) 🕨	
		one no. (716)907-4319 Email address VAMSEEKOSU				01 1 1
Paid		parer's name Preparer's signature	Date	PTIN	0000	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM	1 03/31/202			Self-employed
Use Only		n's name ► GLOBAL TAXES LLC				678)965-9522
		n's address ► 2530 Pebble Creek Ln Cumming GA 30041		Firm	's EIN ▶	
Go to www.irs.go	ov/Form	11040 for instructions and the latest information.	REV 03/19/22 PI	80		Form 1040 (2021)

Form 1040 (2021)

Page **2**

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

VAMSEE KRISHNA KOSURU & JAHNAVI MAHANKALI

► 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 840-30-7800

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	8	1	0.
2a	Alimony received		2 a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	ı
4	Other gains or (losses). Attach Form 4797		4	ı
5	Rental real estate, royalties, partnerships, S corporations, truschedule E		5	-10,070.
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 ▶	8z		
9	Total other income. Add lines 8a through 8z	I	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10			
	1040-NR, line 8		10	_10 070

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)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

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

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

Name(s) shown on return Your social security number 840-30-7800 VAMSEE KRISHNA KOSURU & JAHNAVI MAHANKALI

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) lines below. Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 6,821,553. 7,031,251. 180,576. -29,122. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with 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 -29,122.

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

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 le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	(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	5,875.	4,560.			1,315.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	•	-	-	14	()
15	15	1,315.				

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -27,807. • 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 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.) • (\$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.

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Attachment Sequence No. 12A

VAMSEE	KRISHNA	KOSIIRII	χ,	TVANHAT	ΜΔΗΔΝΚΔΤ.Τ

Social security number or taxpayer identification number 840-30-7800

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.

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)

(C) Short-term transactions	•	٠,,	_	sis wasn t report	ea to the ir	10	
1 (a) Description of property	(b) Date acquired	(b) (c) (d) (d) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		amount in column (g), ode in column (f).	(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	05/04/21	08/16/21	73,931.	70,914.	EW	189.	3,206.
ROBINHOOD SECURITIES LLC	01/06/21	01/07/21	6,747,622.	6,960,337.	EW	180,387.	-32,328.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above is checked) or line 3 (if Box	al here and ince is checked), li	lude on your ne 2 (if Box B	6 821 553	7 031 251		180 576	_29 122

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 VAMSEE KRISHNA KOSURU & JAHNAVI MAHANKALI

Social security number or taxpayer identification number 840-30-7800

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.

✗ (D) Long-term transactions☐ (E) Long-term transactions							e)
(F) Long-term transactions	not reported	to you on Fo	orm 1099-B				
(a) Description of property	(b) Date acquired (Mo., day, yr.)	(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.)		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)
180,694.74	06/02/20	01/07/21	5,875.	4,560.			1,315.
2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) ▶

1,315.

5,875.

4,560.

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

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

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

Sequence No. 13

Name(s)	shown on return							You	r social securit	y number
VAMS	EE KRISHNA KOSUR	U & JAHNAVI MAHANKALI						84	0-30-780	0
Part	Income or Loss F	rom Rental Real Estate and Ro	yaltie	s Note	: If you	are in th	e business o	f rentin	ng personal pr	operty, use
	Schedule C. See ins	structions. If you are an individual, repo	ort farr	m rental	income	or loss f	rom Form 48	35 on	page 2, line 4	0.
A Dic	you make any payments	s in 2021 that would require you to	file F	orm(s) 1	099? 5	See insti	uctions .		🗆 Y	∕es ⊠ No
B If "	Yes," did you or will you	file required Form(s) 1099?							🗆 \	∕es □ No
1a		ch property (street, city, state, ZIF								
Α	FLAT NO 103, SR	I SUVEELA APTS,MOOSAPE	T H	YDERAI	BAD,T	ELANG	ANA IN !	50002	18	
В										
С										
1b	Type of Property	2 For each rental real estate prop	perty li	isted		Fair	Rental	Pers	onal Use	0.11/
	(from list below)	above, report the number of fa	ir renta	al and			ays		Days	QJV
Α	3	personal use days. Check the of if you meet the requirements to	QJV b	ox only	Α		360		0	
В		qualified joint venture. See inst	ructio	ns.	В					
С					С					
Type o	of Property:									
1 Sing	le Family Residence	3 Vacation/Short-Term Rental	5 Lai	nd		7 Self-	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Ro	yalties		8 Othe	r (describe))		
Incom		Properties:			Α	0 0 10	<u>- (disestines)</u>			С
3	Rents received		3			780.				
4			4							
Expen										
5			5							
6	_	tructions)	6			300.				
7	Cleaning and maintenar	,	7			650.				
8	Commissions		8							
9	Insurance		9							
10		ional fees	10							
11			11		1.	100.				
12		to banks, etc. (see instructions)	12							
13			13							
14	Repairs		14		3,	600.				
15			15			800.				
16	Taxes		16							
17	Utilities		17		2,	400.				
18		r depletion	18							
19	Other (list)	•	19							
20	Total expenses. Add line	es 5 through 19	20		10,	850.				
21		ne 3 (rents) and/or 4 (royalties). If								
		structions to find out if you must								
	file Form 6198		21		-10,	070.				
22	Deductible rental real es	state loss after limitation, if any,								
	on Form 8582 (see instr	ructions)	22	(10,0	070.)	()()
23a	Total of all amounts rep	orted on line 3 for all rental prope	rties			23a		78	0.	
b	Total of all amounts rep	orted on line 4 for all royalty prope	erties			23b				
С		orted on line 12 for all properties				23c				
d	Total of all amounts rep	orted on line 18 for all properties				23d				
е	Total of all amounts rep	orted on line 20 for all properties				23e	1	0,85	0.	
24	· ·	amounts shown on line 21. Do no		-				-	24	
25	Losses. Add royalty losse	es from line 21 and rental real estate	losse	s from lii	ne 22. E	nter tota	al losses her	e	25 (10,070.)
26	Total rental real estate	e and royalty income or (loss).	Comb	ine line	s 24 ar	nd 25. E	inter the res	sult		
		and line 40 on page 2 do not						on		
	Schedule 1 (Form 1040)	, line 5. Otherwise, include this ar	nount	in the t	otal on	line 41	on page 2	.	26	-10,070.

NPA