#### Department of the Treasury Internal Revenue Service

### **IRS e-file Signature Authorization**

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	er's name	Social security nu	mber
MAN	II DEEPIKA KAJJAYAM	808-24-58	69
Spouse	o's name	Spouse's social se	ecurity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	er year you are a	uthorizing.)
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	65,633.
2	Total tax	2	7,359.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	10,027.
4	Amount you want refunded to you	4	2,668.
5		5	

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

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

	raumonze	GLUDAL	IAVES	ERO firm name	to enter or generate my PIN	Ent	e
X	l authorize	CLOBAL	TAYES	TTC	to optor or gonorato my PIN		L

Enter five digits, but don't enter all zeros								
	4	5	8	6	9			

my

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

#### Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date

		as my
er fiv n't er		

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►	Date 🕨				
Practitioner PIN Method Returns Only—continue below					
Part III Certification and Authentication – Practition	er PIN Method Only				
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-	digit self-selected PIN. 5 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros				

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 >		Date 🕨			
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So					
For Paperwork Reduction Act Notice, see your tax return in	nstructions. RAA	REV 03/12/22 PRO	Form <b>8879</b> (Rev. 01-2021)		

<b>1040</b>	-NR Department of the Treasury-Ir U.S. Nonresident	nternal Revenue Service Alien Income Tax	(99) <b>Return</b>	2021	OMB No. 15		IRS Use Only—Do not write or staple in this space.			
Filing Status	Single Married filing se		Qualifying	widow(er) (QW	)					
Check only one box.	3	If you checked the QW box, enter the child's name if the qualifying person is a child but not your dependent								
Your first name a	and middle initial	Last name	Last name				Your identifying number (see instructions)			
MANI DEEP	IKA	KAJJAYAM	KAJJAYAM 808-24-5869							
Home address (I	number and street or rural route). If you	have a P.O. box, see inst	ve a P.O. box, see instructions. Apt. no.			Check	if: 🛛 Individual			
2424 DWAN	MIST DRIVE						Estate or Trust			
City, town, or pos	st office. If you have a foreign address, als	o complete spaces below.	State	ZIP coc	е					
LITTLE ELI	M		TX	75068	3					
Foreign country	name	Foreign province/state/co	ounty	Foreign	postal code					
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?										

<b>Dependents</b>									if qualifi	es for (see inst.):
(see instructions):		(1) First name Last n	ame	(2) Dependidentifying i			ependent's		x credit	Credit for other dependents
If more than four dependents, see										
instructions and										
check here ►										
Income	1a	Wages, salaries, tips, etc. Attacl	h Form(s) W-	2					1a	74,795.
Effectively	b	Scholarship and fellowship gran	ts. Attach Fo	orm(s) 1042-S	or required	d stateme	ent. See in	structions .	1b	
Connected	с	Total income exempt by a treat	y from Sche	dule OI (Form	1040-NR)	), Item				
With U.S.		L, line 1(e)	•	· · · ·			1c			
Trade or	2a	Tax-exempt interest	2a		<b>b</b> Tax	able inte	rest		2b	2.
Business	3a	Qualified dividends	3a		<b>b</b> Ord	dinary div	idends .		3b	
	4a	IRA distributions	4a		<b>b</b> Tax	able amo	ount		4b	
	5a	Pensions and annuities	5a		<b>b</b> Tax	able amo	ount		5b	
	6	Reserved for future use							6	
	7	Capital gain or (loss). Attach Scl	nedule D (Fo	rm 1040) if rec	uired. If no	ot require	ed, check h	nere. 🕨 🗌	7	-1,934.
	8	Other income from Schedule 1 (	Form 1040),	line 10					8	-7,230.
	9	Add lines 1a, 1b, 2b, 3b, 4b, 5b,	7, and 8. Th	nis is your <b>tota</b>	l effective	ly conne	ected inco	me 🕨	9	65,633.
	10	Adjustments to income:								
	а	From Schedule 1 (Form 1040), li	ne 26			[	10a			
	b	Reserved for future use					10b			
	с	Scholarship and fellowship gran	ts excluded			[	10c			
	d	Add lines 10a and 10c. These a	re your <b>total</b>	adjustments	to income	ə		🕨	10d	
	11	Subtract line 10d from line 9. Th	is is your <b>ad</b>	justed gross	income	<sub>.</sub>		🕨	11	65,633.
	12a	Itemized deductions (from So								
		residents of India, standard ded	uction. See i	nstructions Sta	_Dedn US/Indi	.a Treaty	12a	12,550.		
	b	Charitable contributions for certa	ain residents	of India. See i	nstructions	s.	12b	300.		
	с	Add lines 12a and 12b							12c	12,850.
	13a	Qualified business income dedu	ction from F	orm 8995 or F	orm 8995-	A.	13a			
	b	Exemptions for estates and trus	ts only. See	instructions		[	13b			
	с	Add lines 13a and 13b							13c	
	14	Add lines 12c and 13c							14	12,850.
	15	Taxable income. Subtract line	14 from line	11. If zero or le	ess, enter -	-0			15	52,783.
For Disclosure,	Priva	cy Act, and Paperwork Reduction	Act Notice,	see separate i	nstruction	IS.	BAA	REV 03/12/22 PRC	, Fo	rm <b>1040-NR</b> (2021)

Form 1040-NR (	2021)							Page <b>2</b>
	16	Tax (see instructions). Check if any from Form	i(s): 1 🗌 8	314 <b>2</b> 🗌 497	'2 <b>3</b>		16	7,359.
	17	Amount from Schedule 2 (Form 1040), line 3					17	0.
	18	Add lines 16 and 17					18	7,359.
	19	Nonrefundable child tax credit or credit for c	ther depende	nts from Schedule	8812 (Form 104	D)	19	
	20	Amount from Schedule 3 (Form 1040), line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	7,359.
	23a	Tax on income not effectively connected from Schedule NEC (Form 1040-NR), line 15			23a			
	b	Other taxes, including self-employment tax, line 21		( ).	23b			
	с	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total tax				. 🕨	24	7,359.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 10	,027.		
	b	Form(s) 1099			25b			
	с	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	10,027.
	e	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S					25g	
	26	2021 estimated tax payments and amount a					26	
	27	Reserved for future use			27			
	28	Refundable child tax credit or additional c 8812 (Form 1040)	hild tax credi	from Schedule	28			
	29	Credit for amount paid with Form 1040-C			29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3 (Form 1040), line 1			31			
	32	Add lines 28, 29, and 31. These are your <b>tot</b>				. ►	32	
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. The					33	10,027.
Refund	34	If line 33 is more than line 24, subtract line 2					34	2,668.
lioraria	35a	Amount of line 34 you want refunded to you			•	► □	35a	2,668.
Direct deposit?	►b	Routing number         0         8         1         0         0         0				Savings	oou	2,000.
See instructions.	►d	Account number 3 5 5 0 1 1				ouvingo		
	► e	If you want your refund check mailed to an			es not shown on	page 1,		
	26	enter it here. Amount of line 34 you want applied to your						
Amenut	36 37	, II <b>,</b>			36		07	
Amount You Owe		Amount you owe. Subtract line 33 from line			1 1		37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		ou want to allow another person to di astructions		eturn with the		Complete I	pelow.	X No
	Desig		Phone			nal identific	ation	
0.	name		no. 🕨			er (PIN)		
Sign Here	belief,	penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of	preparer (other 1	han taxpayer) is bas	ed on all information	n of which	oreparer ha	is any knowledge.
	Your	signature	Date	Your occupation	1			you an Identity , enter it here
				DEVOPS ENG	INEER		nst.) 🕨	
	Phone		Email addres				· L	
Dali		rer's name Preparer's si			Date	PTIN	CI	neck if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	•	GΠΡΨΑ ΨΔΙ.Ι.ΔΜ	03/22/2022	P02082		Self-employed
Preparer		name► GLOBAL TAXES LLC	I IVIII DAGAN	JOLIA IAUUAN	00/22/2022			) 965-9522
Use Only		address► 2530 Pebble Creek I	n Cummin	a CJ 20011				<u>965-9522</u> 1017196
Go to www.ire		m1040NR for instructions and the latest informa		y gr juu41	REV 03/12/22 PR0			<b>1040-NR</b> (2021)
SS 10 WWW.115.	90011 01	into reservice instructions and the latest informa			REV 03/12/22 PR		1 UII	

SCHEDULE	1
(Form 1040)	

### Additional Income and Adjustments to Income

► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form1040 for instructions and the latest OMB No. 1545-0074 2 Att ool

information.		Sequence No. 01
	Your soci	ial security number
		-5869

#### Department of the Treasury Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR

MANI DEEPIKA KAJJAYAM

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		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, trusts, etc. Schedule E		5	-7,230.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	)		
b	Gambling income			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555       .       .       8d	)		
е	Taxable Health Savings Account distribution   ••••••••••••••••••••••••••••••••••••			
f	Alaska Permanent Fund dividends			
g	Jury duty pay			
h	Prizes and awards			
i	Activity not engaged in for profit income			
j	Stock options			
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			
Ι	Olympic and Paralympic medals and USOC prize money (see instructions)       81			
m	Section 951(a) inclusion (see instructions)			
n	Section 951A(a) inclusion (see instructions)			
0	Section 461(I) excess business loss adjustment			
р	Taxable distributions from an ABLE account (see instructions)       8p			
Z	Other income. List type and amount ► 8z			
0	Total other income. Add lines 8a through 8z		0	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-	SR, or	9 10	7 000
<b>F D</b> .	1040-NR, line 8	· · ·		-7,230.

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

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	 14	
15	Deductible part of self-employment tax. Attach Schedule SE	 15	
16	Self-employed SEP, SIMPLE, and qualified plans	 16	l
17	Self-employed health insurance deduction	 17	
18	Penalty on early withdrawal of savings	 18	l
19a	Alimony paid	 19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
20	IRA deduction	 20	l
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 81 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans <b>24g</b>		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law 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 <b>adjustments to inc</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

REV 03/12/22 PRO

BAA

#### SCHEDULE NEC (Form 1040-NR)

### Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074 2021

%

Department of the Treasury Internal Revenue Service (99) Name shown on Form 1040-NR ► Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

Sequence No. 7B Your identifying number

Attachment

MANI DEEPIKA KAJJAYAM

808-24-5869

Enter a	amount of income under the appropriate rate of tax. See instructions.						
	Nature of Income		<b>(a)</b> 10%	<b>(b)</b> 15%	(c) 30%	(d) Other	(specify)
			(,,		%	%	
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations						
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transaction	s <b>1c</b>					
2	Interest:						
а	Mortgage						
b	Paid by foreign corporations	2b					
с	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	10c					
11	Gambling winnings—Residents of countries other than Canada. Note: Losses not allowed	11					
12	Other (specify) ►						
		10					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add colu					NR, line 23a 🕨 15	
	Capital Gains and Losse	s From	Sales or Excha	anges of Proper	ty		
losses exchan	nly the capital gains and from property sales or ges that are from sources the United States and not       16       (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)       (b) Date a mm/dc		<b>(c)</b> Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
effectiv	ely connected with a U.S. ss. Do not include a gain						
or loss	on disposing of a U.S. real						
	ty interest; report these nd losses on Schedule D						

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

(Form 1040).

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.	

**17** Add columns (f) and (g) of line 16

18

. 🕨

17 (

SCHE	DU	LE	ΟΙ
(Form	104	0-N	R)

### **Other Information**

OMB No. 1545-0074 

(1011)	11040-111)	► Go	to www.irs.gov/Form1040		d the latest information	า.	20	21
	nent of the Treasury Revenue Service (99)			ich to Form 1040-NR.			Attachment Sequence N	 7C
	shown on Form 104					Your identifyii		0.10
	I DEEPIKA K					808-24-	•	
Α	Of what countr	y or countries v	were you a citizen or nation	al during the tax year?	IN			
в		-	residence for tax purpose		1			
С	Have you ever	applied to be a	green card holder (lawful )	permanent resident) of	the United States? .		2 Yes	XNo
D	Were you ever:							
	A U.S. citizen?							🛛 No
2.	-		rmanent resident) of the U				Yes	🗙 No
	-		2), see Pub. 519, chapter 4					
Е	immigration sta	tus on the last	day of the tax year, enter y day of the tax year. <u>F1</u>			-		
F	-		visa type (nonimmigrant sta te the date and nature of th		on status?			🛛 No
G	List all dates ye	ou entered and	left the United States during	ng 2021. See instructio	ns.			
			Canada or Mexico AND co					
			r Mexico and skip to item			Mexico		
		United States dd/yy	Date departed United Sta mm/dd/yy	tes Da	te entered United State mm/dd/yy	s Date de	parted Unite mm/dd/yy	d States
н			vacation, nonworkdays, an					
1	Did you file a l	IS income tax	, 2020, return for any prior year? .	, and 20,	21	· · ·	X Yes	No
•	If "Yes." give the	ne latest vear ar	nd form number you filed	• • • • • • • • • • • • • • • • • • • •			103	
J	Are you filing a	return for a tru	st?				Yes	XNo
	lf "Yes," did th	e trust have a	U.S. or foreign owner under ribution from a U.S. persor	er the grantor trust rule	es, make a distributior	n or loan to a		No
к	-		sation of \$250,000 or more					XNo
	-	-	ative method to determine					🗌 No
L			f you are claiming exemp v. See Pub. 901 for more in			tax treaty wi	th a foreigr	n country,
1.			the applicable tax treaty an ne columns below. Attach F			claimed the	treaty benef	it, and the
		<b>(a)</b> Cou	untry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		mount of ex e in current t	
	(a) Total Enta	r this amount a	n Form 1040-NR, line 1c. I	 Do not ontor it on line 1	a or line 1b			
2.			preign country on any of th				Yes	No
3.			ts pursuant to a Competen	• •			X Yes	
5.			Competent Authority deter					
М	Check the app		, , , , , , , , , , , , , , , , , , , ,	<b>,</b>				
	T1 1 1 11 11 11 11		and the second sec	r .	The second second second second			

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected 

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions . . . . . . . . . . . . . . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 03/12/22 PRO Schedule OI (Form 1040-NR) 2021

# SCHEDULE D

(Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2021 Attachment Sequence No. 12

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

Department of the Treasury

MANI DEEPIKA KAJJAYAM

Your social security number

808-24-5869

Did you	dispose of any investment(s) in a qualified o	pportunity fund during the t	ax year?	Yes	× No
lf "Yes,"	attach Form 8949 and see its instructions	or additional requirements f	or reporting	your gain o	r 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 lines below.		<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, column	Part I,	combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	36,290.	38,928.	2	30.	-2,408.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	74,115.	73,641.			474.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5			
6						( )
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back						-1,934.

### 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.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I 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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824						
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1						
<b>13</b> Capital gain distributions. See the instructions						
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover</b> Worksheet in the instructions						( )
15	o to Part III	15				

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-1,934.
	• If line 16 is a <b>gain,</b> 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?		
	<ul> <li>Yes. Go to line 18.</li> <li>No. Skip lines 18 through 21, and go to line 22.</li> </ul>		
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>		
	□ 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:		
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	( 1,934.)
	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.		

REV 03/12/22 PRO

Schedule D (Form 1040) 2021

Form **8949** 

Department of the Treasury

Internal Revenue Service

## **Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

► 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

Name(s) shown on return	Social security number or taxpayer identification number				
MANI DEEPIKA KAJJAYAM	808-24-5869				

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e)	See the separate instruction		<b>(h)</b> Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	disposed of (sales price) and (Mo., day, yr.) (see instructions) ii		<b>(f)</b> Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	01/01/21	12/31/21	36,290.	38,928.	W	230.	-2,408.
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) ►			36,290.	38,928.		230.	-2,408.

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** 

Department of the Treasury

Internal Revenue Service

## **Sales and Other Dispositions of Capital Assets**

OMB No. 1545-0074

► 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

Name(s) shown on return	Social security number or taxpayer identification number			
MANI DEEPIKA KAJJAYAM	808-24-5869			

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	<b>(d)</b> Proceeds	(e) Cost or other basis. See the <b>Note</b> below	If you enter an enter a co	any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)		(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD CRYPTO LLC	01/01/21	12/31/21	74,115.	73,641.			474.
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) ▶			74,115.	73,641.			474.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

SCHEDULE	ΞE
(Form 1040)	

Name(s) shown on return

### **Supplemental Income and Loss**

OMB No. 1545-0074

Attachment Sequence No. 13

1

20

Your social security number

(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.

Department of the Treasury Internal Revenue Service (99)

MANI	DEEPIKA KAJJAYAM					808-24			
Part I 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, rep	ort farm rental i	ncome o	r loss fr	rom <b>Form 48</b>	35 on page	2, line 4	0.	
A Did	you make any payments in 2021 that would require you to	file Form(s) 1	099? Se	e instr	ructions .		. 🗆 ۱	∕es ⊠	No
<b>B</b> If ""	Yes," did you or will you file required Form(s) 1099?						. 🗆 <b>١</b>	/es 🗌	No
1a	Physical address of each property (street, city, state, ZIF	, code)							
Α	24-32, MAIN BAZAR VINUKONDA GUNTUR ANI	,	ESH IN	1 522	647				
В			-		-				
С									
1b	Type of Property <b>2</b> For each rental real estate prop	perty listed		Fair	Rental	Personal	Use	•	
	(from list bolow) above report the number of fa	ir rental and		0	Days	Days		QJ	v
Α	3 personal use days. Check the	QJV box only	Α		365		0		1
В	3 if you meet the requirements to qualified joint venture. See inst	ructions.	B				-		<u>,</u> 1
	+		C						]
	of Property:		•						J
	le Family Residence 3 Vacation/Short-Term Rental	5 Land	7	' Self-	Rental				
•	i-Family Residence 4 Commercial	6 Royalties			r (describe)				
Incom	•		A		B			С	
	Rents received	3		580.				•	
	Royalties received	4							
Expen									
-	Advertising	5							
	Auto and travel (see instructions)	6							
	Cleaning and maintenance	7	1.6	540.					
	Commissions.	8	/						
		9							
	Legal and other professional fees	10							
11	Management fees	11	1.4	120.					
	Mortgage interest paid to banks, etc. (see instructions)	12	-7						
	Other interest	13							
	Repairs.	14	1.2	280.					
	Supplies	15		330.					
	Taxes	16		L40.					
	Utilities	17							
	Depreciation expense or depletion	18							
	Other (list) ►	19							
20	Total expenses. Add lines 5 through 19	20	7,8	310.					
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	-7,2	230.					
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22 (	-7,2	30.)	(	)(	r L		)
23a	Total of all amounts reported on line 3 for all rental prope	rties		23a		580.			
b	Total of all amounts reported on line 4 for all royalty prop	erties		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		7,810.			
24	Income. Add positive amounts shown on line 21. Do no	<b>t</b> include any	losses			. 24			
25	Losses. Add royalty losses from line 21 and rental real estate	losses from li	ne 22. Er	nter tota	al losses here	e. <b>25</b> (		7,2	30.)
26	Total rental real estate and royalty income or (loss).	Combine line	s 24 and	d 25. E	inter the res	ult			
	here. If Parts II, III, IV, and line 40 on page 2 do not								
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount in the t	otal on I	ine 41	on page 2	. 26		-7,	230.
For Pap	perwork Reduction Act Notice, see the separate instructions.					Sch	edule E	(Form 10	40) 2021

888 Form Department of the Treasury

# Health Savings Accounts (HSAs)

OMB No. 1545-0074 2021

Sequence No. 52

Attachment

Attach to Fori	m 1040 1040-9	SR or 1040-NR
	11 10 10, 10 10 0	

► Go to www.irs.gov/Form8889 for instructions and the latest information.

Internal Revenue Service			Go to www.irs.gov/Form8889 for instruction	ions and the	
	() 1	-	1010		

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Social security number of HSA
	beneficiary. If both spouses
MANI DEEPIKA KAJJAYAM	have HSAs, see instructions ► 808-24-5869

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.		-1	
•	See instructions	Sel	f-only	🗙 Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		0.
3	If you were under age 55 at the end of 2021 and, on the first day of <b>every</b> month during 2021, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,600 (\$7,200 for family coverage). <b>All others</b> , see the instructions for the amount to enter	3		7,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		7,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		7,200.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		0.
8	Add lines 6 and 7	8		7,200.
9 10	Employer contributions made to your HSAs for 20219937.Qualified HSA funding distributions10	-		
11	Add lines 9 and 10	11		937.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		6,263.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		0.
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.			
Part	<b>II HSA Distributions.</b> If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	rate H	-ISAs,	complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b		
c	Subtract line 14b from line 14a	14c		
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		
16	Taxable HSA distributions.       Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16		
17a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b		
Part	III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructi completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.			,
18		18		
19	Qualified HSA funding distribution	19		
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21		

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