### 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	ver's name	Social secu	irity numb	er				
NAG	ARJUNA CHILAKA	675-0	8-4137	7				
Spouse	s's name	Spouse's s	ocial secu	rity number				
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	er year you	are aut	horizing.)				
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	96,422.				
2	Total tax		2	14,201.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14,237.				
4	Amount you want refunded to you		4	36.				
5	Amount you owe		5					
Par	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)							

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

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

X	l authorize	GLOBAL TAXES		to enter or generate my PIN	Fr
			ERO firm name		- Li

8	4	1	3	7	as my
Ent					

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

Date 🕨

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

I authorize

to enter c	r generate	my PIN

as mv Enter five digits, but don't enter all zeros

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 >	D	ate 🖡								
Practitioner PIN Method Returns Only—continue below										
Part III Certification and Authentication – Practitioner PIN Method	Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected F	YN.	5	8			 	6 all zer	 9	89	

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >							
ERO Must Retain Thi							
Don't Submit This Form to the IRS Unless Requested To Do So							
For Paperwork Reduction Act Notice, see your tax return instruction	ns. BAA	REV 02/17/22 PRO	Form 8879 (Rev. 01-2021)				

E104(		artment of the Treasury—Internal Revenue Serv S. Individual Income Tax		<sup>(99)</sup> 20	21	OMB No. 1545	5-0074	IRS Use	Only-	–Do not v	write or staple	in this space.
Filing Status Check only one box.	lf yc	Single D Married filing jointly but checked the MFS box, enter the moson is a child but not your dependen	ame of	ed filing separatel your spouse. If yo								
Your first name	and m	iddle initial	Last na	me						Your so	ocial securi	ity number
NAGARJU	NA		CHII	AKA						675-	08-413	57
lf joint return, s	pouse':	s first name and middle initial	Last na	me						Spouse	's social se	curity number
		er and street). If you have a P.O. box, see	instructi	ons.				Apt. no.			ential Electi here if you	ion Campaign
1521 RO			malata a		C+	240		odo	_			ntly, want \$3
DALLAS	JOSLOIII	ce. If you have a foreign address, also co	impiete s	paces below.		ate V	ZIP c	229				Checking a
Foreign countr	v name			Foreign province/st				gn postal co	ode		low will not x or refund	0
loroigh obunt y hand				Foreign province/state/county Fore				gri postal oc		jeu. iu	You	Spouse
At any time du	iring 20	021, did you receive, sell, exchange	, or othe	rwise dispose of	any fin	ancial interest	in any	virtual cu	Irren	icy?	Yes	X No
Standard	Som	neone can claim: 🗌 You as a de	penden	t 🗌 Your spo	ouse as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-stat	tus alie	n						
Age/Blindnes	s You	: Were born before January 2, 1	957	Are blind	Spouse	e: 🗌 Was bo	rn bef	ore Janua	ary 2	, 1957	🗌 ls b	lind
Dependent	<b>s</b> (see	instructions):		(2) Social sec	urity	(3) Relationsh	nip	• • •	•		pr (see instru	,
If more	<b>(1)</b> F	irst name Last name		number		to you		Child ta	ax cre	ədit	Credit for of	ther dependents
than four dependents,												<u> </u>
see instruction	s —							L	<u> </u>			
and check here ►								L	<u> </u>			
	-							L				
Attach	1	Wages, salaries, tips, etc. Attach I	I	//-2	· · ·		· ·	• •	• •	1		96,285.
Sch. B if	2a	'	2a			Faxable interes				2b	-	
required.	3a		3a			Ordinary divide			• •	36		
	/ 4a		4a 5a			Faxable amoun Faxable amoun			• •	4b 5b	-	
Chan dand	5a		5a 6a			Faxable amoun		• •	• •	66	-	
Standard Deduction for—	6a 7	Capital gain or (loss). Attach Sche		roquirod If not r					· ·	7	-	137.
Single or	8	Other income from Schedule 1, lin		required. If flot i	equiled	, check here	• •					
Married filing separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		bis is your <b>total</b> i	 incoma		• •	• •				96,422.
<ul><li>\$12,550</li><li>Married filing</li></ul>	10	Adjustments to income from Sche					• •	• •		10		50,422.
jointly or	11	Subtract line 10 from line 9. This is	,				• •			► 11		96,422.
Qualifying widow(er),	12a	Standard deduction or itemized				12	 a	 12,	· • 550			JO <b>,</b> 122.
\$25,100 • Head of	b	Charitable contributions if you take			,		-			÷		
household,	c	Add lines 12a and 12b	110 0101		500 110		<b>~</b>			12	C.	12,550.
\$18,800 If you checked	13	Qualified business income deduct	ion from	 Form 8995 or Fo	 	95-A	• •		• •	13		<u></u> , JJU.
any box under	14								• •	14		12,550.
Standard Deduction,	15	Taxable income. Subtract line 14								15		83,872.
see instructions.												

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 🗌 4972	3		16	14,201.
	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	14,201.
	19	Nonrefundable child tax cree	dit or credit for a	ther depender	nts from Schedule	8812		19	
	20	Amount from Schedule 3, lin	ie8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	14,201.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				. 🕨	24	14,201.
	25	Federal income tax withheld	from:						
	а	Form(s) W-2				<b>25a</b> 14	,237.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	14,237.
If you have a	26	2021 estimated tax payment	ts and amount a	pplied from 20	20 return .			26	
qualifying child,	27a	Earned income credit (EIC)			No	27a			
attach Sch. EIC.		Check here if you were b	oorn after Janu	ary 1, 1998,	and before				
		January 2, 2004, and you							
		taxpayers who are at least a	-	1 1	structions				
	b	Nontaxable combat pay elec				-			
	C	Prior year (2019) earned inco			0 1 1 0010				
	28	Refundable child tax credit or				28		-	
	29	American opportunity credit				29		-	
	30	Recovery rebate credit. See				30		-	
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27a and 28 throug						32	14 007
	33	Add lines 25d, 26, and 32. T						33	14,237.
Refund	34	If line 33 is more than line 24					· ·	34	36.
Diverse de la secito	35a	Amount of line 34 you want						35a	36.
Direct deposit? See instructions.	►b	Routing number 1 2 1				Checking	Savings		
	►a	Account number 3 2 5							
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Amount you owe. Subtract				1 1	. 🕨	37	
	38	Estimated tax penalty (see in	i			38			
Third Party Designee		you want to allow another	person to disc	cuss this retui	rn with the IRS?	See 📄 Yes. Co	omolata h		XNo
Designee		signee's		Phone			onal identif		
		me 🕨		no. ►			ber (PIN)		
Sign	Un	der penalties of perjury, I declare t	hat I have examine	ed this return and	d accompanying sch	edules and stateme	nts, and to	the best	of my knowledge and
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is ba	ased on all informatio	on of which	preparer	has any knowledge.
TIELE	Yo	ur signature		Date	Your occupation				you an Identity
	N.					NCINEED		nst.) 🕨 🗌	I, enter it here
Joint return? See instructions.	- Sn	ouse's signature. If a joint return, I	hoth must sign	Date	SOFTWARE I Spouse's occupat			Ý L	your spouse an
Keep a copy for	Sp	ouse's signature. It a joint return, i	bour must sign.	Dale	Spouse's occupat	1011			tion PIN, enter it here
your records.							(see i	nst.) 🕨	
	Ph	one no. (669) 900-208	8	Email address	CHILAKA.NAGA	.co	M		
Deid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	(	Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/02/2022	P02082	2703	Self-employed
Preparer		m's name 🕨 GLOBAL TAX					-		578)965-9522
Use Only	-	m's address ► 2530 Pebb.		n Cummin	g GA 30041			s EIN 🕨	30-1017196
Go to www.irs.ou		n1040 for instructions and the late			BAA	REV 02/17/22 PRO			Form <b>1040</b> (2021)

# SCHEDULE D

(Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

20

Attachment Sequence No. 12

Attach to Form	1040,	1040-SR,	or 1040-N	R.
 way/CabadylaD	fan 1	-	ما مماد امسم	

▶ 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.

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

Department of the Treasury

NAGARJUNA CHILAKA

Your social security number

675-08-4137

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes × No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

#### Part I Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (see instructions)

lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to gain or loss fro Form(s) 8949, Par line 2, column (g	tI,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1</b> a	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	1,137.	1,000.			137.
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					
4	Short-term gain from Form 6252 and short-term gain or (li	oss) from Forms 4	684, 6781, and 88	324 4	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	Carryover	6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .	, ,	7	137.

#### 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 from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	-	14	( )		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•	.,		15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> 137.
	• 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:	
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	☑ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 02/17/22 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 NAGARJUNA CHILAKA

675-08-4137

Social security number or taxpaver identification number

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 (Example: 100 sh. XYZ Co.)	Date acquired dispos	<b>(c)</b> Date sold or	sold or Proceeds sed of (sales price)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions	See the separate instructions.		(h) Gain or (loss). Subtract column (e)
		disposed of (Mo., day, yr.)			(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	02/06/21	11/08/21	1,137.	1,000.			137.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	1,137.	1,000.			137.

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.