# 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	number		
HARISH MATETI	019-04-	7640	
Spouse's name	Spouse's socia	al security numb	er
RAMYA NAMANI	977-98-	7072	
Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year you ar	e authorizin	g.)
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		<b>1</b> 14	2,168.
2 Total tax		2 1	7,117.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 1	6 <b>,</b> 507.
4 Amount you want refunded to you		4	790.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	кеер а сору	of your ret	urn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indice payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requirements and payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I an Electronic Funds Withdrawal Consent.	itter, or electron of the trans. Treasury an cated in the tax on to debit the earthorizations must be processing of ayment. I furth	nic return original return original return (b) dits designate and preparation sentry to this action. To revoke received no latte electronic per acknowledges	nator (ERO) the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the
Taxpayer's PIN: check one box only			7
▼ I authorize GLOBAL TAXES LLC to enter or generate r	my PIN	7 6 4 0	as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ž Ente	er five digits, but 't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN method below.			
Your signature ► Date ► _0	3-21-2022	2	
Spouse's PIN: check one box only			٦
I authorize GLOBAL TAXES LLC to enter or generate resignature on the income tax return (original or amended) I am now authorizing.	Ente	7 0 7 2 er five digits, but 't enter all zeros	
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN methodelow.			
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
Part III Certification and Authentication — Practitioner 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  Don't ente		8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income ta authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submirequirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of In	itting this retur	n in accordance	) I am now ce with the
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

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

E1040 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.

Age/Blindness You:	Filing Status Check only one box.	If yo	Single   Married filing jointly  u checked the MFS box, enter the none is a child but not your dependent	- ame of	ried filing separately if your spouse. If you	. ,	<del></del>		, ,	_		. , . ,
If joint return, spouse's first name and middle initial   Last name   NAMANI   Spouse's social security number   NAMANI   Spouse's social security   Spouse's spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spouse's   Spous	Your first name and middle initial Last name You							Your social security number				
NAMANI	HARISH MATETI 01						019-	019-04-7640				
Home address (number and street). If you have a P.O. box, see instructions.   Apt. no.   Apt. no.   Apt. no.   Check here If you, or your spouse as a dependent   You have a foreign address, also complete spaces below.   State   ZIP code   TX   75 070	If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse	's social se	curity number
City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  TX 75070  Foreign province/state/county  Foreign province/sta	RAMYA			NAM	ANI					977-	98-707	2
City, town, or post office. If you have a foreign address, also complete spaces below.  State 2IP code TX 75 0 7 0	Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Preside	ntial Election	on Campaign
MCKINNEY Foreign country name    Foreign province/state/county	4512 TO	RTUG	A LN								, ,	,
MCKINNEY	City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP	code			
Foreign province/state/county   Foreign province/state/county   Foreign province/state/county   Foreign province/state/county   Foreign province/state/county   Foreign postal code   You   Spouse   You   Spouse   At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?   Yes   No	MCKINNE	Y				T	X	75	070			•
Standard Deduction  Age/Blindness You: Were born before January 2, 1957	Foreign country	y name			Foreign province/state	coun	ty	Fore	eign postal code		x or refund.	
Deduction         Spouse itemizes on a separate return or you were a dual-status alien           Age/Blindness         You:	At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of ar	ny fina	ancial interest i	in an	y virtual curre	ncy?	X Yes	☐ No
Dependents (see instructions):  (1) First name  Last name  Last name  Last name  Last name  Last name  Credit for other dependents to you  Child tax credit  Credit for other dependents cheependents, see instructions and cheek here  There ▶   1 Wages, salaries, tips, etc. Attach Form(s) W-2  Attach Sch. B if required.  4a Tax-exempt interest  2a Description of the dependents of the properties of the prope	Standard Deduction		<del>_</del>		_ '		•					
If more than four dependents, see instructions and check here	Age/Blindness	You:	Were born before January 2, 19	957	Are blind Sp	ouse	: Was bo	rn be	fore January 2	2, 1957	☐ Is bl	lind
If more than four dependents, see instructions and check here	Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	qin	<b>(4) ✓</b> if q	ualifies fo	r (see instru	uctions):
than four dependents, see instructions and check here b	•	•	•						l			
see instructions and check here      Attach   2a	than four											
and check here ▶ □  Attach Sch. B if required.  Attach Sch. B if required.  1 Wages, salaries, tips, etc. Attach Form(s) W-2  2a Tax-exempt interest . 2a	dependents,											
Attach   2a   Tax-exempt interest   2a   b   Taxable interest   2b   Sch. B if required.   4a   BA distributions   4a   BA distributions   5a   Bandard Peduction for Married filing separately, \$12,550   Married filing jointly or Qualifying widowiden, \$25,100   Head of household, \$18,800   Head of Phousehold, \$18,800   Head of Phousehold, \$18,800   Head of Phousehold, \$18,800   Head of Marked And And I and And		5 —										
Attach Sch. B if required.  2a	here ▶											
Sch. B if required.  3a Qualified dividends 3a 47. b Ordinary dividends		1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	41,066.
required.    Taxable amount   Standard		2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b	)	
Taxable amount   Taxable income   Taxa		За	Qualified dividends	3a	47.	b C	Ordinary divide	nds		. 3b	)	47.
Standard Deduction for—Single or Married filing separately, \$12,550	requirea.	4a	IRA distributions	4a			,			. 4t	)	
Deduction for — Single or Married filing separately, \$12,550     7     Capital gain or (loss). Attach Schedule D if required. If not required, check here     7     11,075.       Married filing jointly or Qualifying widow(er), \$25,100     10     Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income     ▶     9     142,168.       Head of household, \$18,800     12a     Standard deduction or itemized deductions (from Schedule A)     12a     25,100.       If you checked any box under Standard Deduction, Deduc		5a	Pensions and annuities	5a		<b>b</b> T	axable amoun	t.		. 5b	)	
Single or Married filing separately, \$12,550  Married filing jointly or Qualifying widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25,700.  Single or Married filing separately, \$12,550  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	Standard	6a	Social security benefits	6a		b T	axable amoun	t.		. 6k	)	
Single or Married filing separately, \$12,550  Married filing jointly or Qualifying Widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25,700.  Married filing separately, \$12,550  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  10  Subtract line 10 from line 9. This is your adjusted gross income  11  12a  25,100  12b  600  12c  25,700  13  Add lines 12a and 12b  Add lines 12a and 13  14  Add lines 12c and 13  15  Taxable income. Subtract line 14 from line 11. If zero or less enter -0-	Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not rec	uired	l, check here		▶[	<b>7</b>		<u>11,</u> 075.
separately, \$12,550  Married filing jointly or Qualifying widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25,700.  Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income \$		8								. 8	-:	10,020.
Married filing jointly or Qualifying widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25,700.  Married filing jointly or Qualifying widow(er), \$25,100  Local Figure 10 Adjustments to income from Schedule 1, line 26		9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total inc	ome				▶ 9		
Qualifying widow(er), \$25,100     12a     Standard deduction or itemized deductions (from Schedule A)     12a     25,100       Head of household, \$18,800     c     Add lines 12a and 12b     12a     12b     600       If you checked any box under standard any box under standard any box under standard any box under standard any box under Deduction, 15     Add lines 12c and 13     14     25,700       In any box under standard Deduction, 15     Taxable income. Subtract line 14 from line 11. If zero or less enter -0-     15     11 142,168       12a     25,100     25,700       12b     600     600       12c     25,700       13     14     25,700       14     25,700       15     116,468		10	Adjustments to income from Schee	dule 1,	line 26					. 10		
widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25,700.  Add lines 12c and 13  Add lines 12c and 13  Add lines 12c and 13  Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-		11	Subtract line 10 from line 9. This is	your <b>a</b>	adjusted gross inco	me				<b>▶</b> 11	1 14	42,168.
Head of household, \$18,800  If you checked any box under Standard Deduction, Deduction, Deduction, Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	widow(er),	12a		•			12	а	25 <b>,</b> 10	0.		,
household, \$18,800         c         Add lines 12a and 12b         12c         25,700           If you checked any box under Standard Deduction, Deduction,         14         Add lines 12c and 13         14         25,700           15         Taxable income         Subtract line 14 from line 11 lf zero or less enter -0-         15         116,468					•	,						
try ou checked any box under Standard Deduction, Taxable income. Subtract line 14 from line 11. If zero or less enter -0-	household,		•								c :	25 <b>,</b> 700.
any box under Standard       14       Add lines 12c and 13       14       25,700         Deduction, Deduction, 15       Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-       15       116,468				on from	m Form 8995 or Forr	n 899	95-A					
Deduction, 15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-	any box under											
		15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	, ente	er -0					

	16	Tax (see instructions). Check if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	17,117.
	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	17,117.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	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, e	enter -0				22	17,117.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>				•	24	17,117.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			<b>25a</b> 16	5,507.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	16,507.
16	26	2021 estimated tax payments and amount ap					26	
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)			27a			
attach Sch. EIC.		Check here if you were born after Janua						
		January 2, 2004, and you satisfy all the						
		taxpayers who are at least age 18, to claim the	1 1	structions				
	b	Nontaxable combat pay election			-			
	С	Prior year (2019) earned income		0 1 1 1 22 12				
	28	Refundable child tax credit or additional child t			28		-	
	29	American opportunity credit from Form 8863			29	1 400		
	30	Recovery rebate credit. See instructions .				1,400.		
	31	Amount from Schedule 3, line 15			31			1 400
	32	Add lines 27a and 28 through 31. These are					32	1,400.
	33	Add lines 25d, 26, and 32. These are your to					33	17,907.
Refund	34	If line 33 is more than line 24, subtract line 24			•		34	790. 790.
Di	35a	Amount of line 34 you want <b>refunded to you</b> Routing number 1 1 1 1 0 0 0 0 0	35a	790.				
Direct deposit? See instructions.	▶b	Account number 4 8 8 0 8 1 4			Checking	Savings		
	► d							
A	36	Amount of line 34 you want applied to your 2 Amount you owe. Subtract line 33 from line			36	. ▶	07	
Amount You Owe	37 38	Estimated tax penalty (see instructions) .			38		37	
					l			
Third Party Designee		you want to allow another person to disc tructions				omplete b	elow	× No
Besignee		signee's	Phone			onal identif		
		ne ►	no. 🕨			ber (PIN)		
Sign		der penalties of perjury, I declare that I have examine						
Here		ief, they are true, correct, and complete. Declaration o	of preparer (other		sed on all informat			, ,
	You	ur signature	Date	Your occupation		-		nt you an Identity IN, enter it here
Joint return?	1	V	03-21-2022	   SOFTWARE D	EVELOPER	I	inst.) ▶	IIV, enter it fiere
See instructions.	Spo	buse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation		If the	IRS ser	nt your spouse an
Keep a copy for your records.	, n	A 144 I I A . 14 .						ection PIN, enter it here
your records.		amya.n	03-21-2022	HOMEMAKER		(see	inst.) 🕨	
		one no. (972) 202–6945	Email address	HARISHMATE'		1		01 1 1
Paid		parer's name Preparer's signate			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/05/2022	P02082		Self-employed
Use Only		m's name ► GLOBAL TAXES LLC						678) 965-9522
		m's address ▶ 2530 Pebble Creek L	n Cummin			Firm	s EIN 🕨	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 02/17/22 PRO			Form <b>1040</b> (2021)

Form 1040 (2021)

Page 2

# SCHEDULE 1 (Form 1040)

# **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

HARISH MATETI & RAMYA NAMANI

Your social security number 019-04-7640

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	S	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C	3		
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E		5	-10,020.
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 ▶			
	<del></del>	8z		
9	Total other income. Add lines 8a through 8z	040 1040 00	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-5K, Or	40	

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)	·		
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	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
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 t</b> here 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 019-04-7640 HARISH MATETI & RAMYA NAMANI

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) (or other basis) Form(s) 8949, Part I, combine the result 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 . . . . . . . . . . . . . . 308,290. 304,521. 7,306. 11,075. 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 11,075. 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 (or other basis) Form(s) 8949, Part II, (sales price) 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 9 Totals for all transactions reported on Form(s) 8949 with 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 15

Schedule D (Form 1040) 2021 Page 2

## Part III Summary 16 Combine lines 7 and 15 and enter the result 16 11,075. • 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. □ 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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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**

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ 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.

Sequence No. 12A

ivame(s)	snown	on	return		

Social security number or taxpayer identification number

019-04-7640

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)

	<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>				sis <b>wasn't</b> report	ed to the IF	RS	
1	_ · ·	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, if If you enter an enter a co	(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	ate (f) (g		from column (d) and combine the result with column (g)
E*	TRADE SECURITIES LLC	05/05/21	12/12/21	308,290.	304,521.	W	7,306.	11,075.
2	Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and ince is checked), <b>lir</b>	lude on your ne 2 (if Box B	308,290.	304,521.		7,306.	11,075.

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.

### **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

Your social security number

HARI	SH MATETI & RAMY	YA NAMANI						01	9-04	-7640	)
Part		From Rental Real Estate and Roy astructions. If you are an individual, repo			-				• .		
		ts in 2021 that would require you to u file required Form(s) 1099?									es 🗵 No es 🗌 No
1a	Physical address of ea	ach property (street, city, state, ZIP	code	e)							<del>_</del>
Α	<del>                                     </del>	AMABAD RAMNAGAR HYDERABA			A IN	500	020				
В											
С											
1b	Type of Property (from list below)	2 For each rental real estate propagore, report the number of fair	r rent	al and			Rental ays	Personal Use Days		QJV	
Α	3	personal use days. Check the cif you meet the requirements to	) file a	as a	Α		365			0	
В		qualified joint venture. See instr	ructio	ns.	В						
С					С						
	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	Self-	Rental				
	ti-Family Residence		6 Ro	yalties	8	Othe Other	r (describe)				
Incom		Properties:			Α		В	1			<u>C</u>
3		<del> </del>	3		- 6	520.					
4			4								
Exper			_								
5	-		5								
6	•	structions)	6			270					
7	-	ance	7		۷,۷	270.					
8 9			8 9								
10		sional fees	10								
11			11		2 3	340.					
12	-	to banks, etc. (see instructions)	12		۷, ۰	740.					
13			13								
14			14		1.8	380.					
15	•		15			720.					
16			16								
17			17		2,4	130.					
18		or depletion	18								
19	Other (list) ▶		19								
20	Total expenses. Add lin	nes 5 through 19	20		10,6	540.					
21	Subtract line 20 from li	ine 3 (rents) and/or 4 (royalties). If									
	result is a (loss), see in	nstructions to find out if you must									
	file <b>Form 6198</b>		21	-	-10,0	)20.					
22	Deductible rental real on Form 8582 (see ins	estate loss after limitation, if any, tructions)	22	(	10,02	20.)	(		)(		)
23a	·	ported on line 3 for all rental proper				23a		62	20.		,
b		ported on line 4 for all royalty prope				23b					
С		ported on line 12 for all properties				23c					
d	Total of all amounts re	ported on line 18 for all properties				23d					
е	Total of all amounts re	ported on line 20 for all properties				23e	1	0,64	10.		
24	Income. Add positive	amounts shown on line 21. Do not	t inclu	ude any lo	sses				24		
25	Losses. Add royalty los	ses from line 21 and rental real estate	losse	s from line	22. En	nter tota	al losses here	e . [	25 (		10,020.)
26	Total rental real estat	te and royalty income or (loss).	Comb	ine lines 2	24 and	d 25. E	nter the res	sult			
		, and line 40 on page 2 do not a						on			
	Schedule 1 (Form 1040	0), line 5. Otherwise, include this an	noun	t in the tot	al on I	ine 41	on page 2		26		-10,020.