Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

| Submission Identification Number (SID) | |
|--|--|
| Taxpayer's name | Social security number |
| VAMSHI KRISHNA GINNA | 829-11-2260 |
| Spouse's name | Spouse's social security number |
| LAKSHMINARSIMHARAMYA BANTU | 976-94-4911 |
| Part I Tax Return Information — Tax Year Ending Decer | mber 31, 2021 (Enter year you are authorizing.) |
| Enter whole dollars only on lines 1 through 5. | |
| Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 bla | ınk. |
| 1 Adjusted gross income | |
| 2 Total tax | |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | .,,=== |
| 4 Amount you want refunded to you | |
| 5 Amount you owe | |
| Part II Taxpayer Declaration and Signature Authorization Under penalties of perjury, I declare that I have examined a copy of the income | n (Be sure you get and keep a copy of your return) |
| my knowledge and belief, it is true, correct, and complete. I further declare the return (original or amended) I am now authorizing. I consent to allow my intermed to send my return to the IRS and to receive from the IRS (a) an acknowledgem for any delay in processing the return or refund, and (c) the date of any refund. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the final payment of my federal taxes owed on this return and/or a payment of estimated authorization is to remain in full force and effect until I notify the U.S. Treasur payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-45 business days prior to the payment (settlement) date. I also authorize the finant taxes to receive confidential information necessary to answer inquiries and repersonal identification number (PIN) below is my signature for the income tax or Electronic Funds Withdrawal Consent. | ediate service provider, transmitter, or electronic return originator (ERO) ent of receipt or reason for rejection of the transmission, (b) the reason If applicable, I authorize the U.S. Treasury and its designated Financial inancial institution account indicated in the tax preparation software for d tax, and the financial institution to debit the entry to this account. This ry Financial Agent to terminate the authorization. To revoke (cancel) a 37. Payment cancellation requests must be received no later than 2 cial institutions involved in the processing of the electronic payment of resolve issues related to the payment. I further acknowledge that the |
| Taxpayer's PIN: check one box only | |
| • • | to enter or generate my PIN |
| ERO firm name | don't enter all zeros |
| signature on the income tax return (original or amended) I am | 9 |
| | original or amended) I am now authorizing. Check this box only g the Practitioner PIN method. The ERO must complete Part III |
| Your signature ▶ | Date ▶ |
| | |
| Spouse's PIN: check one box only | |
| X I authorize GLOBAL TAXES LLC | to enter or generate my PIN 4 4 9 1 1 as my |
| ERO firm name signature on the income tax return (original or amended) I am | Enter five digits, but don't enter all zeros |
| | original or amended) I am now authorizing. Check this box only |
| | g the Practitioner PIN method. The ERO must complete Part III |
| Spouse's signature ▶ | Date ► |
| Practitioner PIN Method Return | ns Only—continue below |
| Part III Certification and Authentication — Practitioner Pl | N Method Only |
| ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit s | elf-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 authorized to file for tax year indicated above for the taxpayer(s) indicated ab requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and Pub. 1345, Handbook for Authorized to file practitioner PIN method and PID metho | ove. I confirm that I am submitting this return in accordance with the |
| ERO's signature ▶ | Date ► |
| ERO Must Retain This Form | |
| | |

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

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

| Filing Status | S | Single X Married filing jointly [| Marri | ed filing separately | (MFS) | Head of | hous | sehold (HOF | H) [| Qual | ifying wid | low(er) (QW) |
|---|--------------------------|--|-----------------|------------------------------|------------|-----------------|---------------|----------------|------------|----------------------------|---------------|------------------------------|
| Check only | | u checked the MFS box, enter the i | | | | _ | | • | . — | _ | | |
| one box. | pers | on is a child but not your depender | nt 🕨 | | | | | | | | | |
| Your first name | and mi | ddle initial | Last na | ame | | | | | Y | our so | cial securi | ty number |
| VAMSHI I | KRISI | ANH | GIN | NA | | | | | 8 | 329-1 | 11-226 | 0 |
| If joint return, spouse's first name and middle initial Last name Spo | | | | | pouse's | s social se | curity number | | | | | |
| LAKSHMII | NARS | IMHARAMYA | BAN' | ru | | | | | 9 | 76-9 | 94-491 | 1 |
| Home address | (numbe | r and street). If you have a P.O. box, see | e instruct | ions. | | | | Apt. no. | P | resider | ntial Electi | on Campaign |
| 4490 ELI | OORAI | OO PKWY | | | | | | 1025 | | Check here if you, or your | | |
| City, town, or p | ost offic | ce. If you have a foreign address, also c | omplete : | spaces below. | Sta | ite | ZIP | code | | | | ntly, want \$3 Checking a |
| MCKINNE | Y | | | | T | X | 75 | 070 | | _ | ow will not | • |
| Foreign country | / name | | | Foreign province/state | e/coun | ty | Fore | eign postal co | ode y | our tax | or refund | |
| | | | | | | | | | | | You | Spouse |
| At any time du | ring 20 | 21, did you receive, sell, exchange | , or oth | erwise dispose of a | ny fina | ancial interest | in an | y virtual cu | irrency | y? | Yes | ⊠ No |
| Standard | Som | eone can claim: 🗌 You as a de | epender | nt | ise as | a dependent | | | | | | |
| Deduction | | Spouse itemizes on a separate retu | rn or yo | u were a dual-statu | s alier | 1 | | | | | | |
| Age/Blindness | You: | Were born before January 2, | 1957 [| Are blind S | oouse | : Was bo | rn be | fore Janua | ıry 2, 1 | 1957 | ☐ Is b | lind |
| Dependents | s (see | instructions): | | (2) Social secur | ity | (3) Relations | hip | (4) 🗸 | if qual | ifies for | (see instru | uctions): |
| If more | (1) First name Last name | | | number | | to you | | Child tax cre | | lit | Credit for ot | ther dependents |
| than four | | | | | | | | | | | | |
| dependents, see instruction: | | | | | | | | | | | | |
| and check | <i></i> | | | | | | | | | | | |
| here ▶ 🗌 | | | | | | | | | | | | |
| | _1_ | Wages, salaries, tips, etc. Attach | Form(s) | W-2 | | | | | | 1 | | 86,232. |
| Attach | 2a | Tax-exempt interest | 2a | | b T | axable interes | st | | | 2b | | |
| Sch. B if required. | 3a | Qualified dividends | 3a | | b (| Ordinary divide | ends | | | 3b | | |
| required. | 4a | IRA distributions | 4a | | b T | axable amour | nt . | | | 4b | | |
| | 5a | Pensions and annuities | 5a | | b T | axable amour | nt . | | | 5b | | |
| Standard | 6a | Social security benefits | 6a | | b T | axable amour | nt . | | | 6b | | |
| Deduction for— | 7 | Capital gain or (loss). Attach Sche | edule D | if required. If not red | quired | , check here | | • | ▶ □ | 7 | | |
| Single or Married filing | 8 | Other income from Schedule 1, lin | ne 10 | | | | | | | 8 | | -7,960. |
| separately, \$12,550 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, | and 8. | This is your total in | come | | | | . ▶ | 9 | ' | 78,272. |
| Married filing | 10 | Adjustments to income from Sche | edule 1, | line 26 | | | | | | 10 | | |
| jointly or Qualifying | 11_ | Subtract line 10 from line 9. This i | s your a | djusted gross inc | ome | | | | . ▶ | 11 | ' | 78,272. |
| widow(er), \$25,100 | 12a | Standard deduction or itemized | deduc | tions (from Schedu | le A) | 12 | la 📗 | 25,2 | 100. | | | |
| Head of | b | Charitable contributions if you take | the sta | ndard deduction (se | e insti | ructions) 12 | b | (| 600. | | | |
| household, \$18,800 | С | Add lines 12a and 12b | | | | | | | | 12c | ; | 25,700. |
| If you checked | 13 | Qualified business income deduc | tion fron | n Form 8995 or For | m 899 | 95-A | | | | 13 | | |
| any box under Standard | 14 | Add lines 12c and 13 | | | | | | | | 14 | | 25,700. |
| Deduction, see instructions. | 15 | Taxable income. Subtract line 14 | from li | ne 11. If zero or less | s, ente | er-0 | | | | 15 | | 52,572. |

| | 16 | Tax (see instructions). Check if any from Form(s): 1 🗌 8814 2 🔲 4972 3 🔲 | 16 | 5,911. |
|------------------------------------|---------|---|-------------|---|
| | 17 | Amount from Schedule 2, line 3 | 17 | |
| | 18 | Add lines 16 and 17 | 18 | 5,911. |
| | 19 | Nonrefundable child tax credit or credit for other dependents from Schedule 8812 | 19 | |
| | 20 | Amount from Schedule 3, line 8 | 20 | 2,000. |
| | 21 | Add lines 19 and 20 | 21 | 2,000. |
| | 22 | Subtract line 21 from line 18. If zero or less, enter -0 | 22 | 3,911. |
| | 23 | Other taxes, including self-employment tax, from Schedule 2, line 21 | 23 | 0. |
| | 24 | Add lines 22 and 23. This is your total tax | 24 | 3,911. |
| | 25 | Federal income tax withheld from: | | |
| | а | Form(s) W-2 | | |
| | b | Form(s) 1099 | | |
| | С | Other forms (see instructions) | | |
| | d | Add lines 25a through 25c | 25d | 7,394. |
| If you have a | 26_ | 2021 estimated tax payments and amount applied from 2020 return | 26 | |
| qualifying child, | 27a | Earned income credit (EIC) | | |
| attach Sch. EIC. | | Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ▶ □ | | |
| | b | Nontaxable combat pay election 27b | | |
| | C | Prior year (2019) earned income | | |
| | 28 | Refundable child tax credit or additional child tax credit from Schedule 8812 28 | | |
| | 29 | American opportunity credit from Form 8863, line 8 | \dashv | |
| | 30 | Recovery rebate credit. See instructions | \dashv | |
| | 31 | Amount from Schedule 3, line 15 | \dashv | |
| | 32 | Add lines 27a and 28 through 31. These are your total other payments and refundable credits | 32 | 1 |
| | 33 | Add lines 25d, 26, and 32. These are your total payments | | 7,394. |
| D. 6 | 34 | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid | 34 | 3,483. |
| Refund | 35a | Amount of line 34 you want refunded to you. If Form 8888 is attached, check here | 35a | 3,483. |
| Direct deposit? | ▶b | Routing number 0 7 2 0 0 0 8 0 5 ▶c Type: ★ Checking Savings | | , , , , , , , , , , , , , , , , , , , |
| See instructions. | ▶d | Account number 3 7 5 0 1 6 3 0 2 1 2 6 | | |
| | 36 | Amount of line 34 you want applied to your 2022 estimated tax > 36 | | |
| Amount | 37 | Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions . ▶ | 37 | |
| You Owe | 38 | Estimated tax penalty (see instructions) | | |
| Third Party Designee | | you want to allow another person to discuss this return with the IRS? See structions | e below. | X No |
| | | signee's Phone Personal ider | | |
| | | ne ▶ no. ▶ number (PIN) | | |
| Sign Here | beli | der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whi | ich prepar | rer has any knowledge. |
| | You | | | ent you an Identity PIN, enter it here |
| Joint return? See instructions. | Sno | BUSINESS INTELLIGENCE-DAT (se | e inst.) 🕨 | |
| Keep a copy for | Орс | | | ection PIN, enter it here |
| your records. | | HOME MAKER (se | ee inst.) ► | |
| | Pho | one no. (248)795-8104 Email address VAMSHI2111@GMAIL.COM | | |
| Paid | Pre | eparer's name Preparer's signature Date PTIN | · | Check if: |
| Preparer Preparer | SYAM | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/08/2022 P020 | 82703 | Self-employed |
| Use Only | Firr | m's name ► GLOBAL TAXES LLC Ph | one no. | (678)965-9522 |
| | Firr | m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Fir | m's EIN I | 30-1017196 |
| Go to www.irs.go | ov/Form | n1040 for instructions and the latest information. BAA REV 01/31/22 PRO | | Form 1040 (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

VAMSHI KRISHNA GINNA & LAKSHMINARSIMHARAMYA BANTU

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 829-11-2260

| Par | t I Additional Income | | | |
|-----|---|------------------|----|---------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | 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, transchedule E | | 5 | -7,960. |
| 6 | Farm income or (loss). Attach Schedule F | | 6 | |
| 7 | Unemployment compensation | | 7 | |
| 8 | Other income: | | | |
| а | Net operating loss | 8a (|) | |
| b | Gambling income | 8b | | |
| С | Cancellation of debt | 8c | | |
| d | Foreign earned income exclusion from Form 2555 | 8d (|) | |
| е | Taxable Health Savings Account distribution | 8e | | |
| f | Alaska Permanent Fund dividends | 8f | | |
| g | Jury duty pay | 8g | | |
| h | Prizes and awards | 8h | | |
| i | Activity not engaged in for profit income | 8i | | |
| j | Stock options | 8j | | |
| k | Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property | 8k | | |
| I | Olympic and Paralympic medals and USOC prize money (see instructions) | 81 | | |
| m | Section 951(a) inclusion (see instructions) | 8m | | |
| n | Section 951A(a) inclusion (see instructions) | 8n | | |
| 0 | Section 461(I) excess business loss adjustment | 80 | | |
| р | Taxable distributions from an ABLE account (see instructions) . | 8p | | |
| Z | Other income. List type and amount ▶ | | | |
| _ | | 8z | | |
| 9 | Total other income. Add lines 8a through 8z | 040 4040 00 | 9 | |
| 10 | Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR line 8 | 040, 1040-SK, or | 10 | 7.060 |

Schedule 1 (Form 1040) 2021 Page **2**

| Par | Adjustments to Income | | | |
|-----|--|-------------|-----|--|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106 | | | |
| 13 | Health savings account deduction. Attach Form 8889 | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form | 3903 | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | 16 | |
| 17 | Self-employed health insurance deduction | | 17 | |
| 18 | Penalty on early withdrawal of savings | | 18 | |
| 19a | Alimony paid | | 19a | |
| b | Recipient's SSN | > | _ | |
| С | Date of original divorce or separation agreement (see instructions) | • | | |
| 20 | IRA deduction | | 20 | |
| 21 | Student loan interest deduction | | 21 | |
| 22 | Reserved for future use | | 22 | |
| 23 | Archer MSA deduction | | 23 | |
| 24 | Other adjustments: | | | |
| а | Jury duty pay (see instructions) | 24a | | |
| b | Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit | 24b | | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l | 24c | | |
| d | Reforestation amortization and expenses | 24d | | |
| е | Repayment of supplemental unemployment benefits under the Trade Act of 1974 | 24e | | |
| f | Contributions to section 501(c)(18)(D) pension plans | 24f | | |
| g | Contributions by certain chaplains to section 403(b) plans | 24 g | | |
| h | 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 | 24 j | | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) | 24k | | |
| z | Other adjustments. List type and amount ▶ | 24z | | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line | | | |

SCHEDULE 3 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Credits and Payments

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

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. 03

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

VAMSHI KRISHNA GINNA & LAKSHMINARSIMHARAMYA BANTU

Your social security number 829-11-2260

| Par | t I Nonrefundable Credits | | | |
|-----|--|-----------------|---|--------|
| 1 | Foreign tax credit. Attach Form 1116 if required | | 1 | |
| 2 | Credit for child and dependent care expenses from Form 2441, Form 2441 | line 11. Attach | 2 | |
| 3 | Education credits from Form 8863, line 19 | | 3 | 2,000. |
| 4 | Retirement savings contributions credit. Attach Form 8880 | | 4 | |
| 5 | Residential energy credits. Attach Form 5695 | | 5 | |
| 6 | Other nonrefundable credits: | | | |
| а | General business credit. Attach Form 3800 | 6a | | |
| b | Credit for prior year minimum tax. Attach Form 8801 | 6b | | |
| С | Adoption credit. Attach Form 8839 | 6c | | |
| d | Credit for the elderly or disabled. Attach Schedule R | 6d | | |
| е | Alternative motor vehicle credit. Attach Form 8910 | 6e | | |
| f | Qualified plug-in motor vehicle credit. Attach Form 8936 | 6f | | |
| g | Mortgage interest credit. Attach Form 8396 | 6g | | |
| h | District of Columbia first-time homebuyer credit. Attach Form 8859 | 6h | | |
| i | Qualified electric vehicle credit. Attach Form 8834 | 6i | | |
| j | Alternative fuel vehicle refueling property credit. Attach Form 8911 | 6j | | |
| k | Credit to holders of tax credit bonds. Attach Form 8912 | 6k | | |
| 1 | Amount on Form 8978, line 14. See instructions | 61 | | |
| Z | Other nonrefundable credits. List type and amount ▶ | 6z | | |
| 7 | Total other nonrefundable credits. Add lines 6a through 6z | | 7 | |
| 8 | Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-line 20 | SR, or 1040-NR, | 8 | 2,000. |

Schedule 3 (Form 1040) 2021 Page **2**

| Par | t II Other Payments and Refundable Credits | | | |
|-----|--|-----|----|---|
| 9 | Net premium tax credit. Attach Form 8962 | | 9 | |
| 10 | Amount paid with request for extension to file (see instructions) . | | 10 | |
| 11 | Excess social security and tier 1 RRTA tax withheld | | 11 | |
| 12 | Credit for federal tax on fuels. Attach Form 4136 | | 12 | |
| 13 | Other payments or refundable credits: | | | |
| а | Form 2439 | 13a | | |
| b | Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021 | 13b | | |
| С | Health coverage tax credit from Form 8885 | 13c | | |
| d | | 13d | | |
| е | Reserved for future use | 13e | | |
| f | Deferred amount of net 965 tax liability (see instructions) | 13f | | |
| g | Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441 | 13g | | |
| h | Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021 | 13h | | |
| Z | Other payments or refundable credits. List type and amount ▶ | 13z | | |
| 14 | Total other payments or refundable credits. Add lines 13a through | 13z | 14 | ı |
| 15 | Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31 | | 15 | |

BAA

SCHEDULE E (Form 1040)

Department of the Treasury

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.

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

OMB No. 1545-0074 Attachment Sequence No. 13

Internal Revenue Service (99) Name(s) shown on return Your social security number VAMSHI KRISHNA GINNA & LAKSHMINARSIMHARAMYA BANTU 829-11-2260 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, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α SRI VENKATESWARA NAGAR HYDERABAD TELANGANA IN 500034 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a 365 0 Α Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 460. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 1,450. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 1,200. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest. 13 1,750. 14 Repairs. 14 15 1,550. 15 Supplies . Taxes 16 16 17 17 2,470. 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 8,420. 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 -7,960. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 7,960.) 460 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 For Paperwork Reduction Act Notice, see the separate instructions.

24

25

26

c Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. Do not include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here.

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

Schedule E (Form 1040) 2021

7,960.

-7,960.

23c

23d 23e

8,420.

24

25

26

Department of the Treasury Internal Revenue Service (99)

Education Credits (American Opportunity and Lifetime Learning Credits)

► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 Attachment Sequence No. **50**

Name(s) shown on return

VAMSHI KRISHNA GINNA & LAKSHMINARSIMHARAMYA BANTU

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

Your social security number 829-11-2260



Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

| Part | | | |
|------|---|----|---------|
| 1 | After completing Part III for each student, enter the total of all amounts from all Parts III, line 30 | 1 | |
| 2 | Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er) | | |
| 3 | Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter | | |
| 4 | Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit | | |
| 5 | Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er) | | |
| 6 | If line 4 is: | | |
| | • Equal to or more than line 5, enter 1.000 on line 6 | | |
| | • Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rounded to | 6 | |
| | at least three places) | | |
| 7 | Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the | | |
| | conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box | 7 | |
| 8 | Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and | | |
| 0 | on Form 1040 or 1040-SR, line 29. Then go to line 9 below. | 8 | |
| Part | | | |
| 9 | Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) . | 9 | |
| 10 | After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If | | |
| | zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19 | 10 | 11,250. |
| 11 | Enter the smaller of line 10 or \$10,000 | 11 | 10,000. |
| 12 | Multiply line 11 by 20% (0.20) | 12 | 2,000. |
| 13 | Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er) | | |
| 14 | Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter | | |
| 15 | Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on | | |
| | line 18, and go to line 19 | | |
| 16 | Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er) | | |
| 17 | If line 15 is: | | |
| | • Equal to or more than line 16, enter 1.000 on line 17 and go to line 18 | | |
| | • Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounded to at least three places) | 17 | 1.000 |
| 18 | Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ▶ | 18 | 2,000. |
| 19 | Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see | | |
| | instructions) here and on Schedule 3 (Form 1040), line 3 | 19 | 2,000. |

| (===-) | 9 |
|---|-----------------------------|
| Name(s) shown on return | Your social security number |
| VAMSHI KRISHNA GINNA & LAKSHMINARSIMHARAMYA BANTU | 829-11-2260 |

| A |
|---------|
| CAUTION |

Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

| _ | | | | | |
|----------|--|---|---|---------------------------|----------------------------------|
| Par | | | | | |
| 20 | Student name (as shown on page 1 of your tax return) VAMSHI KRISHNA | 21 Student social security number (as shown on page 1 of your tax return) | | | on page 1 of |
| | GINNA | | 829-11-2260 | | |
| 22 | Educational institution information (see instructions) | | | | |
| а | Name of first educational institution UNIVERSITY OF CUMBERLANDS | b. Na | ame of second educational instituti | ion (if a | ny) |
| (| Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. 6419 COLLEGE STATION DRIVE | | Address. Number and street (or P. post office, state, and ZIP code. If instructions. | | |
| | WILLIAMSBURG KY 40769 | | | | |
| (| 2) Did the student receive Form 1098-T from this institution for 2021? ✓ Yes ☐ No | | Did the student receive Form 1098 from this institution for 2021? | -Т | Yes 🗌 No |
| (| 3) Did the student receive Form 1098-T from this institution for 2020 with box ☐ Yes ☒ No 7 checked? | | Did the student receive Form 1098 from this institution for 2020 with b7 checked? | | Yes 🗌 No |
| (4 | 4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution. | | Enter the institution's employer (EIN) if you're claiming the America if you checked "Yes" in (2) or (3) from Form 1098-T or from the insti | an oppo . You | ortunity credit or |
| | 61-0470593 | | | | |
| 23 | Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2021? | | s — Stop! to line 31 for this student. X No | – Go t | o line 24. |
| 24 | Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2021 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions. | X Yes | | – Stop his stud | o! Go to line 31 dent. |
| 25 | Did the student complete the first 4 years of postsecondary education before 2021? See instructions. | × Go | s — Stop! to line 31 for this No | — Go t | o line 26. |
| 26 | Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance? | ☐ Go | | | plete lines 27 for this student. |
| CAUT | | | | in the | same year. If |
| | American Opportunity Credit | | | | |
| 27 28 | Adjusted qualified education expenses (see instructions). Don Subtract \$2,000 from line 27. If zero or less, enter -0 | | | 27 | |
| 29 30 | Multiply line 28 by 25% (0.25) | add \$2,0 | | 30 | |
| | Lifetime Learning Credit | . 5111 411 1 | a | | |
| 31 | Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10 | | otal of all amounts from all Parts | 31 | 11,250. |