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

2021

OMB No. 1545-007

IBS Use Only—Do not write or staple in this space

Filing Status Check only one box.	If yo	Single X Married filing jointly bu checked the MFS box, enter the son is a child but not your dependent	name of									
Your first name	and m	iddle initial	Last na	ame					You	Your social security number		
VENKATA RAGHAVA RAJU				PATHIRAJU					81	813-44-2840		
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spo	Spouse's social security number		
SRAVYA			KAK	ARLAPUDI					APPLIED FOR			
Home address	(numbe	er and street). If you have a P.O. box, se	e instruct	ions.				Apt. no.	Pre	side	ntial Election	on Campaign
6115 ABI	ERCO:	RN AVE									nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete:	spaces below.	Sta	ate	ZIP	code				tly, want \$3
ATLANTA				GA			30			to go to this fund. Checking a box below will not change		
Foreign country	y name			Foreign province/state	/cour	nty	For			your tax or refund.		
											You	Spouse
At any time du	ring 20	021, did you receive, sell, exchange	e, or oth	erwise dispose of ar	y fina	ancial interest	in ar	ny virtual curr	ency?	?	Yes	X No
Standard Deduction		eone can claim:	•	•		a dependent n						
Age/Blindness	s You	: Were born before January 2,	1957	Are blind Sp	ouse	e: Was bo	orn be	efore January	, 2, 19	957	☐ Is bli	ind
Dependents				(2) Social securit		(3) Relations					r (see instru	
•	•	irst name Last name		number to you			Child tax c			1	•	her dependents
If more than four	(.,.								o.ou.	\dashv	[
dependents,												
see instructions and check	s —											
here >										_		
	. 1	Wages, salaries, tips, etc. Attach	Form(s)	W-2						1		<u> </u>
Attach	2a	Tax-exempt interest	2a		h 1	Faxable interes	et .		-	2b		30,210.
Sch. B if	3a	Qualified dividends	3a	10.		Ordinary divide			•	3b		10.
required.	4a	IRA distributions	4a						•	4b		
	5a	Pensions and annuities	5a							5b		
Standard	6a	Social security benefits	6a			Faxable amou				6b	,	
Deduction for—	7	Capital gain or (loss). Attach Sch		if required. If not req					\Box	7	1	223.
Single or Married filing	8	Other income from Schedule 1, line 10								8		
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							•	9	Ţ,	56,479.
\$12,550 Married filing	10		justments to income from Schedule 1, line 26							10		
jointly or Qualifying	11	•	ne 10 from line 9. This is your adjusted gross income						•	11		56,479.
widow(er),	12a	Standard deduction or itemized	-	-		12	2a	25,1	00.			30, 1, 30
\$25,100 Head of	b			•	,			,-	- •			
household,	c	Charitable contributions if you take the standard deduction (see instructions) Add lines 12a and 12b								120		25,100.
\$18,800 If you checked	13	Qualified business income deduc								13		
any box under Standard	14	Add lines 12c and 13							14	_	25,100.	
Deduction,	15	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0							15		31,379.	
see instructions.												,

Form 1040 (202	1)									Page Z	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	3 , 361.	
	17	Amount from Schedule 2, line 3									
	18	Add lines 16 and 17								3,361.	
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812									
	20	Amount from Schedule 3, line 8									
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18. If zero or less, enter -0								3,361.	
	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 total tax					. ▶	24	3,361.	
	25	Federal income tax withheld	I from:								
	а	Form(s) W-2				25a	4,	522.			
	b	Form(s) 1099				25b 25c					
	С	Other forms (see instruction									
	d	Add lines 25a through 25c								4,522.	
If you have a	26	2021 estimated tax paymen				1 1			26		
qualifying child, attach Sch. EIC.	27a										
attaon oon. Lio.		Check here if you were I									
		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		-	1 1							
	С										
	28	Refundable child tax credit or			Schedule 8812	28					
	29	American opportunity credit	29								
	30	Recovery rebate credit. See instructions						11.			
	31	Amount from Schedule 3, line 15									
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits							32	11.	
	33	Add lines 25d, 26, and 32. These are your total payments							33	4,533.	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you ov	erpaid		34	1,172.	
Tiolalia	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ▶ □						35a	1,172.		
Direct deposit?	▶b										
See instructions.	▶d	Account number									
	36	Amount of line 34 you want	applied to your	olied to your 2022 estimated tax ► 36							
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay, s	ee instru	ctions	. ▶	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38					
Third Party		you want to allow another	person to disc	cuss this retur	rn with the IRS?		1			No.	
Designee		structions					Yes. Co			× No	
		signee's ne ▶	Phone Personal no. ▶ number (
Sign	Un	der penalties of perjury, I declare	that I have examine	ed this return and	d accompanying sch	edules and		. ,		t of my knowledge and	
_				of preparer (other than taxpayer) is based on all information							
Here	Yo	Your signature		Date Your occupation					nt you an Identity		
	N.				NCINDED II			ection Pl inst.) ▶	N, enter it here		
Joint return? See instructions.	- Cn	ouse's signature. If a joint return,	SOFTWARE ENGINEER-II			<u> </u>		nt your spouse an			
Keep a copy for	Sp	ouse's signature. If a joint return, i	Date Spouse's occupation						ection PIN, enter it here		
your records.				HOME MAKER				(see	inst.) ►		
	Phone no. (571) 697-8355			Email address RAJUVISHNU2003@GMAIL.COM							
Paid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:	
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	RAM SAGAR	RAM SAGAR GUPTA TALLAM 02/23/2022 PO			P02082	2703	Self-employed		
Preparer	Firm's name ▶ GLOBAL TAXES LLC			,			Phor	Phone no. (678) 965-9522			
Use Only	Fir	Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041						Firm	Firm's EIN ▶ 30-1017196		
					-						

SCHEDULE D

Department of the Treasury

Internal Revenue Service (99)

(Form 1040)

Capital Gains and Losses

► 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.

OMB No. 1545-0074

2021

Attachment Sequence No. **12**

Name(s) shown on return Your social security number V BHUPATHIRAJU & S KAKARLAPUDI 813-44-2840 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. 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 (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. line 2, column (a) with 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 4,954. 5,135. 181. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 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 7 181. 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 (g) (h) Gain or (loss) 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 (sales price) (or other basis) Form(s) 8949, Part II, 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 Box D checked 258. 300. 42. Totals for all transactions reported on Form(s) 8949 with Box E checked 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

42.

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Schedule D (Form 1040) 2021 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 223. • 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. Are lines 15 and 16 both gains? 17 X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 18 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see 19 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? X 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?

No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

for Forms 1040 and 1040-SR, line 16.

Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions

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8949 **8949**

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.

2021 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

V BHUPATHIRAJU & S KAKARLAPUDI

Social security number or taxpayer identification number

813-44-2840

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☐ (C) Short-term transactions☐	reported on	Form(s) 1099	9-B showing bas	sis wasn't report		•	-)
1		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if If you enter an enter a co See the sep	(h) 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	(g) Amount of adjustment	from column (d) and combine the result with column (g)
RC	DBINHOOD SECURITIES LLC	10/09/21	01/11/21	5,135.	4,954.			181.
2	Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and ince is checked), lir	lude on your ne 2 (if Box B	5,135.	4,954.			181.

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

Form 8949 (2021) Attachment Sequence No. **12A** Pa

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

V BHUPATHIRAJU & S KAKARLAPUDI

Social security number or taxpayer identification number

813-44-2840

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

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

	 ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS ☐ (F) Long-term transactions not reported to you on Form 1099-B 											
1	(a) Description of property	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below		(h) Gain or (loss). Subtract column (e)					
	(Example: 100 sh. XYZ Co.)				and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)				
ROBIN	HOOD SECURITIES LLC	08/31/20	11/02/21	300.	258.			42.				
nega Sche	Is. Add the amounts in columns tive amounts). Enter each tota dule D, line 8b (if Box D above e is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	300.	258.			42.				

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

Form W-7 (Rev. August 2019) Department of the Treasury Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents.
 ▶ See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

OMB No. 1545-0074

Application type (check one box):

Apply for a new ITIN Renew an existing ITIN Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN). Reason you're submitting Form W-7. Read the instructions for the box you check. Caution: If you check box b, c, d, e, f, or g, you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions). a Nonresident alien required to get an ITIN to claim tax treaty benefit **b** Nonresident alien filing a U.S. federal tax return c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return If d, enter relationship to U.S. citizen/resident alien (see instructions) ▶ **d** Dependent of U.S. citizen/resident alien e X Spouse of U.S. citizen/resident alien If d or e, enter name and SSN/ITIN of U.S. citizen/resident alien (see instructions) ▶ VENKATA RAGHAVA RAJU BHUPATHIRAJU f Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception g Dependent/spouse of a nonresident alien holding a U.S. visa h ☐ Other (see instructions) ▶ Additional information for a and f: Enter treaty country ▶ and treaty article number ▶ 1a First name Middle name Last name Name SRAVYA KAKARLAPUDI (see instructions) 1b First name Middle name Last name Name at birth if different . . > 2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. Applicant's 6115 ABERCORN AVE Mailing City or town, state or province, and country. Include ZIP code or postal code where appropriate. **Address** 30346 ATLANTA USA 3 Street address, apartment number, or rural route number. Don't use a P.O. box number. Foreign (non-**U.S.) Address** City or town, state or province, and country. Include postal code where appropriate. (see instructions) 4 Date of birth (month / day / year) Country of birth City and state or province (optional) **Birth** Male 09/16/1992 Information TNDTA X Female 6a Country(ies) of citizenship 6b Foreign tax I.D. number (if any) 6c Type of U.S. visa (if any), number, and expiration date Other TNDTA Information X Passport Driver's license/State I.D. **6d** Identification document(s) submitted (see instructions) USCIS documentation Other Date of entry into the United States (MM/DD/YYYY): Issued by: INDIA No.: K5695946 Exp. date: 07/05/2022 05/04/2021 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? No/Don't know. Skip line 6f. Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). 6f Enter ITIN and/or IRSN ▶ ITIN **IRSN** and name under which it was issued ▶ First name Middle name Last name 6g Name of college/university or company (see instructions) ▶ City and state ▶ Length of stay ▶ Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying Sign documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number. Here Signature of applicant (if delegate, see instructions) Date (month / day / year) Phone number Keep a copy for your records. Name of delegate, if applicable (type or print) Delegate's relationship Parent Court-appointed guardian to applicant Power of attorney Signature Date (month / day / year) Phone **Acceptance** Fax Agent's Name and title (type or print) Name of company PTIN **Use ONLY** Office code