Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

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

Submission Identification Number (SID)

Taypayar'a nama

Taxpay	er siname	Social securi	ty nume	ler		
ANI	ANIRUDH AKKATI 114-06-					
Spouse	's name	Spouse's soo	cial secu	urity number		
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Enter	er year you a	are au	thorizing.)		
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	104,578.		
2	Total tax		2	16,032.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	17,092.		
4	Amount you want refunded to you		4	1,060.		
5	Amount you owe		5			
Darr	The second Declaration and Clanations Antheorization (Declaration and and	I		· · · · · · · · · · · · · · · · · · ·		

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

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

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	
				ERO firm name		

6	3	4	7	2	
Ent dor	er fiv n't er	/e di nter a	gits, all ze	but ros	as my

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

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

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	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 >	Date ►	
Practitioner PIN Method Ret	Irns 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 PIN. <u>5</u> 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros	

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

ERO's signature >		Date ►
	Must Retain This Form — See Instruc This Form to the IRS Unless Reques	
For Denemicarly Deduction Act Nation and vour t		Earm 8870 (Bay 01 2021)

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

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn 2	021	OMB No.	1545-00	74 IRS U	se Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent	ame of y	ed filing separ your spouse.	• •	· <u> </u>			'			low(er) (QW) he qualifying
Your first name	and m	iddle initial	Last na	me						Your so	ocial securi	ty number
ANIRUDH			AKKA	TI						114-	06-347	2
lf joint return, s	pouse's	first name and middle initial	Last na	me						Spouse	's social se	curity number
Home address 2419 KE.		er and street). If you have a P.O. box, see AVE H	instructio	ons.				Apt. no.			ential Election here if you,	i on Campaign , or your
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces below.	:	State	ZIF	² code				ntly, want \$3
CHARLOT	ΓE					NC	2	8269			low will not	Checking a t change
Foreign countr	y name		F	Foreign provinc	e/state/co	ounty	Fo	reign postal	code		x or refund.	•
At any time du	uring 20	021, did you receive, sell, exchange,	, or othe	rwise dispose	e of any f	inancial inter	rest in a	ny virtual	curre	ncy?	Ves	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you	were a dual-	status al			- (. 4057		
-		Were born before January 2, 1	957	Are blind	Spou			efore Jan		-	Is bl	
Dependent				(2) Social num		(3) Relat		1			or (see instru	uctions): ther dependents
lf more than four	(1) F	First name Last name						Child tax cre		euit	Credit for ot	
dependents,									\square			
see instruction and check	s —								\square		'	
here									$\overline{\Box}$			
	1	Wages, salaries, tips, etc. Attach F	- orm(s) \	N-2						. 1	1	05,800.
Attach	2a		2a		Ь	Taxable int	erest			. 2b		
Sch. B if	3a	Qualified dividends	3a	63		Ordinary di				. 3b	,	91.
required.	4a	IRA distributions	4a			Taxable am				. 4b	,	
	5a	Pensions and annuities	5a		b	Taxable arr	ount.			. 5b	,	
Standard	6a	Social security benefits	6a		b	Taxable am	ount .			. 6b	,	
 Deduction for – Single or 	7	Capital gain or (loss). Attach Sche	dule D if	required. If r	ot requir	ed, check he	ere .			7		3,087.
Married filing	8	Other income from Schedule 1, lin	e10 .							. 8		-4,400.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	'his is your to	tal incon	ne				▶ 9	1	04,578.
Married filing	10	Adjustments to income from Sche	dule 1, l	ine 26 .						. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted gros	s income	э	· · ·			► <u>11</u>	1	04,578.
widow(er), \$25,100	12a	Standard deduction or itemized				,	12a	12	,55			
 Head of household, 	b	Charitable contributions if you take					12b		30	0.		
\$18,800	с											12,850.
 If you checked any box under 	13	Qualified business income deduct										
Standard Deduction,	14			 								12,850.
see instructions.	15	Taxable income. Subtract line 14	trom lin	e 11. lf zero o	or less, er	nter -0			•	. 15	·	91,728.

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

Form **1040** (2021)

Go to www.irs.ge	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 03/07/22 PRO			Form 1	040 (2021)
	Firr	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm	's EIN 🕨	30-10	17196
Use Only		n's name 🕨 GLOBAL TAX					Phor	ne no. (678)965	5-9522
Preparer	-	PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/11/2022	P02083			mployed
Paid			Preparer's signat			Date		1902	_	mployed
		one no. (609)815-113 parer's name		Email address	ANIRUDH.AK	CATI@GMAIL.CO	M PTIN		Check if:	
Keep a copy for your records.				Date	Spouse's occupa		Ident (see		nt your spou ection PIN, e	
Joint return? See instructions.	- Cr	ouse's signature. If a joint return, t	oth must sign	Date	SOFTWARE			inst.) ►		se an
Here		ur signature		Date	Your occupation		If the Prote	IRS ser	nt you an Ide N, enter it h	entity
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
		signee's ne ►		Phone no.			onal identi per (PIN) 🖡			
Third Party Designee	ins		person to disc			. 🕨 🗌 Yes. Co	•		X No	
You Owe	38	Estimated tax penalty (see in				38				
Amount	37	Amount you owe. Subtract			1 2		. 🕨	37		
	36	Amount of line 34 you want a				36				
See instructions.	►d	Account number 4 4 6	0 3 2 5	7 0 9 2	2 6 6		-			
Direct deposit?	►b	Routing number 0 5 2			_		Savings			
Refund	35a	Amount of line 34 you want i				•		35a		,060.
Defined	34	If line 33 is more than line 24						34		,0 <u>52</u> . ,060.
	32 33	Add lines 25d, 26, and 32. T						33	17	,092.
	31 32	Add lines 27a and 28 throug					lits 🕨	32		
	30 31	Recovery rebate credit. See Amount from Schedule 3, lin				30 31				
	29 20	American opportunity credit				29				
	28	Refundable child tax credit or				28		-		
	c	Prior year (2019) earned inco			<u></u>					
	b	Nontaxable combat pay elec				-				
		Check here if you were b January 2, 2004, and you taxpayers who are at least a	u satisfy all the ge 18, to claim t	e other requi	rements for					
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a		-		
If you have a	26	2021 estimated tax payment		• •	37		• •	26		
	d	Add lines 25a through 25c						25d	1/	,092.
	C	Other forms (see instructions	•			25c			1 0	000
	b	Form(s) 1099				25b		-		
	а	Form(s) W-2					,092.	-		
	25	Federal income tax withheld	from:			1 1				
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	16	,032.
	23	Other taxes, including self-e						23		0.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	16	,032.
	21	Add lines 19 and 20						21		
	20	Amount from Schedule 3, lin	e8					20		
	19	Nonrefundable child tax cred	dit or credit for o	ther depender	nts from Schedul	e 8812		19		
	18	Add lines 16 and 17 .						18	16	,032.
	17	Amount from Schedule 2, lin	-					17	-	
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3 🗌		16	16	,032.
Form 1040 (2021	1)									Page 2

SCHEDULE	1
(Form 1040)	

L

Additional Income and Adjustments to Income

OMB No. 1545-0074

(Form	1040)		;		<u>୬</u> ୩1
Department of the Treasury ► Attach to Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service ► Go to www.irs.gov/Form1040 for instructions and the latest inform				AS	ttachment equence No. 01
	. ,	orm 1040, 1040-SR, or 1040-NR			ecurity number
	UDH AKKATI	onal Income	114-0	16-34	.72
1		unds, credits, or offsets of state and local income taxes		1	
	-			2a	
b		inal divorce or separation agreement (see instructions)			
3		come or (loss). Attach Schedule C		3	
4	•	or (losses). Attach Form 4797		4	
5	Rental real Schedule E	estate, royalties, partnerships, S corporations, trusts, etc. A		5	-4,400.
6		e or (loss). Attach Schedule F		6	-4,400.
7				7	
8	Other incon	· · · · · · · · · · · · · · · · · · ·	•••	1	
a		ng loss	N		
b	-	icome	/		
c	-	n of debt			
d		ned income exclusion from Form 2555 8d (
	•	alth Savings Account distribution	/		
e f		nanent Fund dividends			
f					
g		ay			
h :		awards			
		engaged in for profit income			
J		ns			
ĸ		or profit but were not in the business of renting such			
	property .	8k 8k			
Ι	• •	d Paralympic medals and USOC prize money (see)			
m	Section 951	(a) inclusion (see instructions) 8m			
n	Section 951	A(a) inclusion (see instructions) 8n			
ο	Section 461	(I) excess business loss adjustment			
р	Taxable dis	tributions from an ABLE account (see instructions) . 8p			
Z	Other incom	ne. List type and amount ▶			
		8z			
9	Total other i	income. Add lines 8a through 8z		9	

9 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 10 1040-NR, line 8

10 -4,400. Schedule 1 (Form 1040) 2021

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basic officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	3	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) \blacktriangleright			
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)			
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81 24c			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans 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			
j	Housing deduction from Form 2555			
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 to in here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

REV 03/07/22 PRO

SCHEDULE	D
(Eorm 1040)	

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

2021 Attachment Sequence No. 12

Name(s) shown on return ANIRUDH AKKATI

Department of the Treasury

Internal Revenue Service (99)

Your social security number

114-06-3472

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X 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	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fr Form(s) 8949, Pa	om	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.		, , , , , , , , , , , , , , , , , , ,	line 2, column	(g)	with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	130,607.	127,426.	1	7.	3,198.
2	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					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise		7	3,198.		

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 lines below.		(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and	
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	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 Box D checked	140.	251.			-111.	
9	Totals for all transactions reported on Form(s) 8949 with Box E checked						
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.						
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11				
12		. ,	12				
13	Capital gain distributions. See the instructions		13				
14	14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions						
15	Net long-term capital gain or (loss). Combine lines 8a				14	/ /	
	on the back				15	-111.	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 3,087.
	• 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 line 22.	
	• 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?	
	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 amount, if any, from line 7 of that worksheet	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.	
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 03/07/22 PRO

Schedule D (Form 1040) 2021

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Sequence No. 12A

Attachment

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.

Name(s) shown on returnSocial security number or taxpayer identification numberANIRUDH AKKATI114-06-3472

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)			If you enter an amount in column (g), enter a code in column (f). See the separate instructions.			
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions			combine the result with column (g)			
Robinhood Securities LLC	01/01/21	08/23/21	130,607.	127,426.	W	17.	3,198.			
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►			130,607.	127,426.		17.	3,198.			

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

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

Form 8949 (2021)	Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification number	ber

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

114-06-3472

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.

(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

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
Robinhood Securities LLC	11/07/18	01/29/21	140.	251.			-111.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►		140.	251.			-111.	

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.

REV 03/07/22 PRO

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

Attachment Sequence No. 13

20

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
 Go to www.irs.gov/ScheduleE for instructions and the latest information.

Department of the Treasury Internal Revenue Service (99)

.,	shown on return								cial securit	-
	UDH AKKATI								06-347	
Part		s From Rental Real Estate and Ro								
		instructions. If you are an individual, rep								
		nts in 2021 that would require you to								res 🛛 No
B If "		ou file required Form(s) 1099?							. 🗆 Y	res 🗌 No
1 a	Physical address of	each property (street, city, state, ZIF	o code	e)						
Α	KUKATPALLY HYD	PERABAD TELANGANA IN 5000	046							
В										
C										
1b	Type of Property	2 For each rental real estate prop	perty li	isted			Rental	Person		QJV
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	ur renta Q.IV b	al and			Days	Da	ys	
Α	2	if you meet the requirements to	o file a	is a	Α		365		0	
В		qualified joint venture. See inst	tructio	ns.	В					
С					С					
Туре	of Property:									
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd	7	7 Self-	Rental			
2 Mul	ti-Family Residence	4 Commercial	6 Ro	yalties	8	B Othe	er (describe))		
Incom	ie:	Properties:			Α		E	6		С
3	Rents received		3		(600.				
4			4							
Expen										
5	Advertising		5							
6	-	nstructions)	6							
7		nance	7			800.				
8			8							
9			9							
10		ssional fees	10							
11			11		1	500.				
12	-	d to banks, etc. (see instructions)	12							
13			13							
14			14		1.	200.				
15			15			000.				
16			16		,					
17			17		1.	500.				
18		or depletion	18		- /					
19	Other (list)		19							
20	` '	lines 5 through 19	20		5.0	000.				
21	-	line 3 (rents) and/or 4 (royalties). If			- 1					
21		instructions to find out if you must								
	file Form 6198		21		-4.4	400.				
22		l estate loss after limitation, if any,			- /	•				
22	on Form 8582 (see in		22	(44	00.)	()	
23a		eported on line 3 for all rental prope		N		23a	\	600.		
b		eported on line 4 for all royalty prop				23b				
c		eported on line 12 for all properties				23c				
d		eported on line 18 for all properties				23d				
e e		eported on line 20 for all properties				23u		5,000.		
24		e amounts shown on line 21. Do no				206		. 24		
24 25		sses from line 21 and rental real estate				 nter tot	 al losses hor		_	4,400.
										I,IUU.
26		ate and royalty income or (loss). V, and line 40 on page 2 do not								
		40), line 5. Otherwise, include this a								-4,400

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021

Form 8582

Passive Activity Loss Limitations

► See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

► Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

Identifying number 114-06-3472

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

Part I

Department of the Treasury

ANIRUDH AKKATI

2021 Passive Activity Loss

Caution: Complete Parts IV and V before completing Part I.

Renta Allowa			
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1a0.Activities with net loss (enter the amount from Part IV, column (b))1b(4,400.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c()Combine lines 1a, 1b, and 1c	1d	-4,400.
All Ot	her Passive Activities		
2a b c d	Activities with net income (enter the amount from Part V, column (a)) 2a Activities with net loss (enter the amount from Part V, column (b)) 2b Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c Combine lines 2a, 2b, and 2c	2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-4,400.

If line 3 is a loss and: • Line 1d is a loss, go to Part II.

• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II. Instead, go to line 10.

Part II Special Allowance for Rental Real Estate Activities With Active Participation								
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruct	tions for an o	example.			
4	Enter the smaller of the loss on line 1	d or the loss on lir	ne3				4	4,400.
5	5 Enter \$150,000. If married filing separately, see instructions 5 150,000.							
6	6 Enter modified adjusted gross income, but not less than zero. See instructions 6 108,978.							
	Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.							
7	Subtract line 6 from line 5			7	41	,022.		
8 Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions							8	20,511.
9 Enter the smaller of line 4 or line 8						9	4,400.	
Part III Total Losses Allowed								
10 Add the income, if any, on lines 1a and 2a and enter the total						10	0.	
11	11 Total losses allowed from all passive activities for 2021. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return						11	4,400.
Par	t IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instruct	ions.			
	Name of activity	Current year Pr		Prior yea	ars	Ove		ain or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallo loss (line		(d) Gair	ו	(e) Loss
KUK.	ATPALLY	0.	4,400.					4,400.

 Total. Enter on Part I, lines 1a, 1b, and 1c ►
 0.
 4,400.

For Paperwork Reduction Act Notice, see instructions. BAA

REV 03/07/22 PRO

Form 8582 (2021)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Partv	Complete This Part Belor	e Part I, Lilles 2	a, 20,	anu zc. S		suons.				
		Currei		Prior years		Overall gain or loss				
	Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
		(inte Za)	(1)	116 2.0)	1033 (111	6 20)				
Total. Enter	on Part I, lines 2a, 2b, and 2c ►									
Part VI	Use This Part if an Amou	nt Is Shown on I	Part II,	Line 9. S	ee instruc	ctions.				
	Name of activity	Form or schedule and line number to be reported on (see instructions)	d line number be reported on (a		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
KUKATPAI	KUKATPALLY		4,400.		1.00000000		4,400.		0.	
		E Ln 22		,						
Total		•		4 400	1.0	•			0	
Total Part VII	Allocation of Unallowed L	►	uction	4,400.	1.0	0	4,40	10.	0.	
	Anocation of Onanowed L			5.						
	Name of activity	Form or sch and line nur to be report (see instruct	nber ed on	(a) I	Loss		(b) Ratio (d		(c) Unallowed loss	
T . 4 . 1		I					4.00			
Total Part VIII	Allowed Losses. See instr	<u></u> ructions	. 🕨				1.00			
	Name of activity	Form or sch and line nur to be reporte (see instruct	nber (a) L ed on		Loss	(b) Ur	(b) Unallowed loss		(c) Allowed loss	
		I								
Total .			. 🕨							
				1		1		1		

REV 03/07/22 PRO

Form **8582** (2021)

D-40 < Stap	le All	• •	of Yo		2021			<u>li</u> na D		Tax Ret		DOR Use Only				
For ca	llenda RUDH	r year 20	021, o	or fiscal ye AK	ear beginning KATI	9		_	and ending	SN: 114063	ls	re you a ve your spous ere you gra	se a vetera			lo X lo □ file your
Filing	Status		1. Sing 4. Hea	ad of House	ehold	5. Quali	ed Filing	dow(er)		ried Filing Separa	tely	/ear spou	Yes se died:	No		040?
Was y N.C. E your c	<u>our s</u> Educa	pouse a tion End lyment to	reside lowme o the F	ent for the ent Fund: ⁻ und. To r	make a contr	ntribute ibution,	enclose	<u>No</u> I.C. Edu Form N	cation Endo	Return for decea Return for decea wment Fund by your payment o	ased spo making a f \$	a contribu 0	Date o tion or de To desi	-		
Se Se	elect b	oox if you	u, or if	f married f	filing jointly,	our spc	ouse we	re out of	f the country	ctions for inform on April 15, 20 ointed Personal	22, and a	a U.S. citiz		sident.		
FS	1	PP	Y		DT	Ν	OC	Ν	TPRES	Y SP	RES	Ν	VT	Ν	SVT	N
AKKA		2419	1	2826	9 DS	Ν	EA	Ν	TD		SI	C			FDEX	Γ N
ANIR	UDH	I			AKKA'	ΓI				114063	472		MEC	KL		
												NC	282	69		
2419	KE	ATON	í AV	7E H						CHARL	OTTE					
06		1	.045	578		16			0	2	6C			0		
07				0		18	Y		0	20	бE			0		
09				0		20A			5118	EI	IJ					15002
10A				0		20B			0	2'	7			0		
10B				0		21A			0	2	9			0		
11	S	Y	I	Ν		21B			0	3	0			0		
11			107	750		21C			0	32	1			0		
13			000	000		21D			0	32	2			0		
14			938	328		26A			0	34	4		1	92		
15			49	926		26B			0							
TN	6	0981	511	36		PN	б	7896	59522	PI	P	P02	0827	03		
		urn Be			Refund D		hedules ar	192 nd stateme		yment Due	f vou auth		0 orth Caro	lina Depa	artment of Re	evenue
I declare and certify that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Check here if you authorize the North Carolina Department of Rever 6098151136									OW.							
Your Signature Date Spouse's Signature (If filing joint return, both must sign.) Date Contact Phone No. (Include area code) PAID PREPARER USE ONLY If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.																
SYAM PRIYA RAM SAGAR GUPT 03 11 2 6789659522 Paid Preparer's Signature Date Preparer's Contact Phone Number (Include area code)								P02082703 Preparer's FEIN, SSN, or PTIN								

If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001 If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

►

Last Name (First 10 Characters) AKE

Your Social Security Number

114063472

e	Foderal Adjusted Cross Income	6	104570
6. 7	Federal Adjusted Gross Income	6. 7	104578
7.	Additions to Federal Adjusted Gross Income	7.	0
8.	Add Lines 6 and 7	8.	104578
9.	Deductions From Federal Adjusted Gross Income	9.	0
10.	Child Deduction	10-	0
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	0
11	b. Enter the amount of the child deduction	10b.	0
11.	N.C. Standard Deduction	11.	Y
11.	N.C. Itemized Deduction	11.	N
11.	Deduction amount	11.	10750
12.	a. Add Lines 9, 10b, and 11	12a.	10750
	b. Subtract amount on Line 12a from Line 8	12b.	93828
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.0000
14.	N.C. Taxable Income	14.	93828
15.	N.C. Income Tax	15.	4926
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	4926
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	4926
20a.	Your tax withheld	20a.	5118
20b.	Spouse's tax withheld	20b.	0
21a.	2021 estimated tax	21a.	0
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Amended Returns Only - Previous payments	22.	0
23.	Total Payments	23.	5118
24.	Amended Returns Only - Previous refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	5118
26a.	Tax Due	26a.	0
26b.	Penalties	26b.	0
26c.	Interest	26c.	0
26d.	Add Lines 26b and 26c and enter the total on 26d	26d.	0
EU	Exception to Underpayment of Estimated Tax	EU	Ũ
26e.	Interest on the Underpayment of Estimated Income Tax	26e.	0
27.	Pay this Amount	27.	Ő
28.	Overpayment	28.	192
20.	ovolpayment	20.	171
<u>Αmoι</u>	Int of Refund to Apply to:		
29.	Amount of Line 28 to be applied to 2022 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	30.	0
31.	N.C. Education Endowment Fund	31.	0
32.	N.C. Breast and Cervical Cancer Control Program	32.	0
33.	Add Lines 29 through 32	33.	0
	5		

Amount to be Refunded

34.

192

34.

ers) AKKATI

D-400 Line-by-Line Information