(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
MUKTESH ADUSUMILLI	742-85-9347
Spouse's name	Spouse's social security number
AMULYA MUJAKARI	972-92-9784
Part I Tax Return Information — Tax Year Ending December 31, 2	21 (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 blank.	
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	3,333.
5 Amount you owe	
Part II Taxpayer Declaration and Signature Authorization (Be sure you Under penalties of perjury, I declare that I have examined a copy of the income tax return (original	
return (original or amended) I am now authorizing. I consent to allow my intermediate service pro to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I au Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finan authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can business days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues relapersonal identification number (PIN) below is my signature for the income tax return (original or a Electronic Funds Withdrawal Consent.	eason for rejection of the transmission, (b) the reason thorize the U.S. Treasury and its designated Financial account indicated in the tax preparation software for notal institution to debit the entry to this account. This to terminate the authorization. To revoke (cancel) a cellation requests must be received no later than 2 volved in the processing of the electronic payment of the to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter of the content of	5 9 3 4 7
X I authorize GLOBAL TAXES LLC to enter c	as my
signature on the income tax return (original or amended) I am now authorizing	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitions below.	
Your signature Adusumilli Muktash	Date ► 02/16/2022
Spouse's PIN: check one box only	
· _	or generate my PIN 2 9 7 8 4 as my
ERO firm name	Enter five digits, but
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 amen if you are entering your own PIN and your return is filed using the Practitions below.	
Spouse's signature Amulya Muzakari Practitioner PIN Method Returns Only—conti	Date Date 02/16/2022
	nue below
Part III Certification and Authentication — Practitioner PIN Method On	ly
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-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 electronic individe authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Files.	at I am submitting this return in accordance 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.

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the notion is a child but not your dependent	- ame of	ied filing separately your spouse. If you	. ,	_		, ,	_		
Your first name	and mi	ddle initial	Last na	ame					Your so	cial securit	y number
MUKTESH			ADU	SUMILLI					742-	85-934	7
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse	's social sec	curity number
AMULYA			MUJ.	AKARI					972-	92-978	4
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Election	on Campaign
7342 OAF	K MAI	NOR DR						1303	Check	here if you,	or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP	code			tly, want \$3
SAN ANTO	ONIO				T	X	78	229			Checking a change
Foreign country	/ name			Foreign province/state	e/coun	ty	Fore	b		box below will not change your tax or refund. You Spo	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ancial interest i	n an	y virtual currer	ncy?	X Yes	□ No
Standard Deduction	_	eone can claim:				•					
Age/Blindness	You:	Were born before January 2, 19	957	Are blind S	oouse	: Was bor	n be	fore January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social secur	ty	(3) Relationsh	iip	(4) ✓ if q	ualifies fo	r (see instru	ctions):
If more	(1) Fi	rst name Last name		number to you Child tax c			redit	Credit for otl	ner dependents		
than four										[
dependents, see instructions										[
and check	5 ——									[
here ►										[
	1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	(94,024.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds		. 3b)	
required.	4a	IRA distributions	4a		b T	axable amoun	t.		. 4b)	
	5a	Pensions and annuities	5a		b T	axable amoun	t.		. 5b		
Standard	6a	Social security benefits	ба		b T	axable amoun	t.		. 6b		
Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not re	quired	l, check here		▶ [7	-	-2,551.
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8	-	-8,917.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total in	come				▶ 9	3	32,556.
Married filing	10	Adjustments to income from Schee	dule 1,	line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your a	djusted gross inc	ome				▶ 11		32 , 556.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	e A)	12	а	25,100	ο. 🦳		
Head of	b	Charitable contributions if you take	the sta	ndard deduction (se	e instr	ructions) 12	b	600	0.		
household, \$18,800	С	Add lines 12a and 12b							. 12	c 2	25,700.
If you checked	13	Qualified business income deducti	on fror	n Form 8995 or For	m 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14	1 2	25,700.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	s, ente	er -0			. 15	;	56 , 856.

	16	Tax (see instructions). Check if any from Form	(s): 1 🗌 881	4 2 🗌 4972	3 🗌		16	6,427.
	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	6,427.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	8812		19	
	20	Amount from Schedule 3, line 8					20	1,382.
	21	Add lines 19 and 20					21	1,382.
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	5,045.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax				▶	24	5,045.
	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a	8,400.		
	b	Form(s) 1099			25b		1	
	С	Other forms (see instructions)			25c		1	
	d	Add lines 25a through 25c					25d	8,400.
16	26	2021 estimated tax payments and amount a					26	
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)	•		27a			
attach Sch. EIC.		Check here if you were born after Janu						
		January 2, 2004, and you satisfy all the						
		taxpayers who are at least age 18, to claim t	1 1	structions ► □				
	b	Nontaxable combat pay election						
	С	Prior year (2019) earned income		<u> </u>				
	28	Refundable child tax credit or additional child			28		-	
	29	American opportunity credit from Form 8863			29		-	
	30	Recovery rebate credit. See instructions .			30		-	
	31	Amount from Schedule 3, line 15			31		+	
	32	Add lines 27a and 28 through 31. These are	-				32	0 400
	33	Add lines 25d, 26, and 32. These are your to					33	8,400.
Refund	34	If line 33 is more than line 24, subtract line 24			•		34	3,355.
Di	35a	Amount of line 34 you want refunded to you					35a	3,355.
Direct deposit? See instructions.	▶b	Routing number 0 3 1 2 0 2 0 Account number 3 8 3 0 1 2 7			Checking	Savings		
	► d							
A	36	Amount of line 34 you want applied to your			36		07	
Amount You Owe	37 38	Amount you owe. Subtract line 33 from line			1 1	. ▶	37	
		Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc structions		n with the IRS?		Complete I	nelow	⋉ No
Besignee		signee's	Phone			sonal identi		
		me ►	no. 🕨			nber (PIN)		
Sign		der penalties of perjury, I declare that I have examine						
Here		ief, they are true, correct, and complete. Declaration of			ised on all informat			, ,
	You	ur signature	Date	Your occupation				nt you an Identity N, enter it here
Joint return?				SOFTWARE E	ENGINEER	l l	inst.) ▶	
See instructions.	Spo	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.	,			_				ection PIN, enter it here
, 50 500100.		4405.400.5.55		HOME MAKEF			inst.) ▶	
		one no. (425) 499-0499	Email address	ADUSUMILLI.M				Chaple if
Paid		eparer's name Preparer's signat		OHDER	Date	PTIN	0700	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/17/2022	P0208		Self-employed
Use Only		m's name GLOBAL TAXES LLC		G7. 00045				678) 965-9522
		m's address ▶ 2530 Pebble Creek L	n Cummin			Firm	's EIN ▶	
Go to www.irs.go	ov/Form	n1040 for instructions and the latest information.		BAA	REV 02/05/22 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

MUKTESH ADUSUMILLI & AMULYA MUJAKARI

Your social security number
742-85-9347

Par	Additional income					
1	Taxable refunds, credits, or offsets of state and local income taxes	s			1	
2 a	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, truschedule E				5	-8 , 917.
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) .	8р				
Z	Other income. List type and amount ▶	8z				
9	Total other income. Add lines 8a through 8z				9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10	040,	1040-	SR, or	10	0 017

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	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	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 t 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 MUKTESH ADUSUMILLI & AMULYA MUJAKARI

Your social security number 742-85-9347

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, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	1,382.
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 6l		
Z	Other nonrefundable credits. List type and amount ▶		
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-SR, or 1040-NR, line 20	8	1,382.

(continued on page 2)

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

Par	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	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

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SCHEDULE D (Form 1040)

Capital Gains and Losses

1040, 1040-SB, or 1040-NB

2021

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

MUKTESH ADUSUMILLI & AMULYA MUJAKARI

742-85-9347

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 57,738. 62,532. 1,748. -3,046. 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 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 -3,046.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 1,456. 1,951. 495. 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 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

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

495.

13

14

15

Schedule D (Form 1040) 2021 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -2,551. • 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 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. 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 2,551.) 21 • (\$3,000), or if married filing separately, (\$1,500) **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.

8949

Sales and Other Dispositions of Capital Assets

Social security number or taxpayer identification number

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. Attachment Sequence No. 12A

OMB No. 1545-0074

742-85-9347 MUKTESH ADUSUMILLI & AMULYA MUJAKARI 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. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) (e) enter a code in column (f). (d) Cost or other basis Gain or (loss). (c) (a) (b) See the separate instructions. Date sold or Proceeds See the Note below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions AMERITRADE 06/05/21 12/11/21 5,159. 6,125. -966. 12/12/21 Robinhood Securities LLC 06/05/21 52,579. 56,407. 1,748. -2,080. 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

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.

57,738.

-3,046.

1,748.

above is checked), or line 3 (if Box C above is checked) ▶

62,532.

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 MUKTESH ADUSUMILLI & AMULYA MUJAKARI

Social security number or taxpayer identification number

742-85-9347

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☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below Adjustment, if any, to gai If you enter an amount in center a code in column See the separate instructions.		amount in column (g), ode in column (f).	(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	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	06/05/21	12/12/21	1,951.	1,456.			495.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) ▶

1,951.

1,456.

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

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.

Attachment

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

OMB No. 1545-0074

Sequence No. 13

Name(s) shown on return Your social security number 742-85-9347 MUKTESH ADUSUMILLI & AMULYA MUJAKARI Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I 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 11-76/1 SRIDEVI RICEMILL VIJAYAWADA ANDHRA PRADESH IN 521228 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 Α 365 Α 0 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 . 3 590. 4 Royalties received 4 Expenses: 5 Advertising 5 6 Auto and travel (see instructions) . 6 7 Cleaning and maintenance . . . 7 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 12 Mortgage interest paid to banks, etc. (see instructions) 12 4,227. 13 13 Other interest. 14 Repairs. 14 15 15 Supplies . Taxes 16 16 5,280. 17 17 18 Depreciation expense or depletion . . 18 Other (list) ----19 19 Total expenses. Add lines 5 through 19 20 20 9,507. 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 -8,917.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,917.) 590. 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 c Total of all amounts reported on line 12 for all properties 23c 4,227. d Total of all amounts reported on line 18 for all properties 23d 23e 9,507. Total of all amounts reported on line 20 for all properties Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 8,917. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 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 26 -8,917.

Education Credits (American Opportunity and Lifetime Learning Credits)

► Attach to Form 1040 or 1040-SR.

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

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

MUKTESH ADUSUMILLI & AMULYA MUJAKARI

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

Your social security number 742-85-9347



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	Refundable American Opportunity Credit				
1	After completing Part III for each student, enter the total of all amounts from all P	arts II	II, line 30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,				
	or qualifying widow(er)	2			
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	3			
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4			
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
_	qualifying widow(er)	5			
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 (rou at least three places)			6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th	e yea	ar and meet the		
	conditions described in the instructions, you can't take the refundable America				
	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 a	mount here and		
Part	on Form 1040 or 1040-SR, line 29. Then go to line 9 below			8	
	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	. (000	in atmustic no	9	
9 10	After completing Part III for each student, enter the total of all amounts from a	•	,	9	
10	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19		10	6,912.	
11	Enter the smaller of line 10 or \$10,000			11	6,912.
12	Multiply line 11 by 20% (0.20)			12	1,382.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or	Ι			1,302.
10	qualifying widow(er)	13	180,000.		
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	14	82,556.		
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	15	97,444.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	qualifying widow(er)	16	20,000.		
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 (roun places)			17	1.000
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			18	1,382.
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	•	,		·
	instructions) here and on Schedule 3 (Form 1040), line 3 $$		· · · · · ·	19	1,382.

Name(s) shown on return	Your social security number
MUKTESH ADUSUMILLI & AMULYA MUJAKARI	742-85-9347

	A
ı	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.

Dar	Student and Educational Institution Information	n Saai	netructions		
					1 - 4
20	Student name (as shown on page 1 of your tax return) MUKTESH		Student social security number (as s our tax return)	nown on pa	age i oi
	ADUSUMILLI		742-85-9347		
22	Educational institution information (see instructions)				
	Name of first educational institution	b. N	lame of second educational institut	ion (if any)	
	NEW ENGLAND COLLEGE			()	
- 1	1) Address. Number and street (or P.O. box). City, town or	/1)	Address. Number and street (or P.	O box) Cit	y town or
(post office, state, and ZIP code. If a foreign address, see instructions. 98 BRIDGE ST	(1)	post office, state, and ZIP code. If instructions.		
	HENNIKER NH 03242				
(2) Did the student receive Form 1098-T from this institution for 2021? ✓ Yes ✓ No	(2)	Did the student receive Form 1098 from this institution for 2021?	-T Ye	s 🗌 No
(3) Did the student receive Form 1098-T from this institution for 2020 with box ☐ Yes ☒ No 7 checked?	(3)	Did the student receive Form 1098 from this institution for 2020 with b 7 checked?		s 🗌 No
(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.	ı	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 institution.	an opportu . You can	nity credit or
	02-0223955				
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. No	— Go to lin	e 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 Ye		— Stop! Go his student	
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 to lin	e 26.
26	Was the student convicted, before the end of 2021, of a felony for possession or distribution of a controlled substance?	I Go		Complet ugh 30 for t	e lines 27 this student.
CAUT	You can't take the American opportunity credit and the li you complete lines 27 through 30 for this student, don't don			in the sam	e year. If
	American Opportunity Credit				
27	Adjusted qualified education expenses (see instructions). Dor	n't enter	more than \$4,000	27	
28	Subtract \$2,000 from line 27. If zero or less, enter -0			28	
29				29	
				20	
30	If line 28 is zero, enter the amount from line 27. Otherwise, a			00	
	enter the result. Skip line 31. Include the total of all amounts f	rom all l	raπs III, line 30, on Part I, line 1.	30	
	Lifetime Learning Credit				
31	Adjusted qualified education expenses (see instructions). Incl		total of all amounts from all Parts	31	6,912.