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.

Submission Identification Number (SID)

Taxpay	er's name	Social security nur	nber	
SAM	ARTH SUBRAMANYA JYOTHI		318-41-02	78
Spouse	's name	Spouse's social se	curity number	
Par	Tax Return Information – Tax Year Ending December 31,	2021 (Enter	year you are a	uthorizing.)
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	84,806.
2	Total tax		2	11,583.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	14,321.
4	Amount you want refunded to you		4	2,738.
5	Amount you owe		5	

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

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

				FBO firm name		Ē
X	l authorize	GLOBAL :	TAXES	LLC	to enter or generate my PIN	
			-			

	1 Ent	0 or fi	2	7	8	as			
Enter five digits, but don't enter all zeros									

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	mv	PIN
ιO	enter	0I	yenerate	IIIY	

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 Returns Only—continue									
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.	5	8	7	-	 -	6 all ze	9	89	•

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 🕨	
ERO Must Retain This Don't Submit This Form to th			
For Paperwork Reduction Act Notice, see your tax return instruction	IS. BAA	REV 03/19/22 PRO	Form 8879 (Rev. 01-2021)

E1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		(99)	202	1	OMB No. 1	545-007	74 IRS Us	e Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly u checked the MFS box, enter the national on is a child but not your dependent	ame of y										low(er) (QW) he qualifying
Your first name	and mi	ddle initial	Last na	me							Your so	ocial securi	ty number
SAMARTH	SUBI	RAMANYA	JYOI	ΗI							318-	41-027	8
lf joint return, s	pouse's	first name and middle initial	Last na	me							Spouse	's social se	curity number
2341, G	IBBOI								Apt. no.		Check	here if you	on Campaign , or your htly, want \$3
	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.		State			ode				Checking a
HAYWARD						CA		-	4541			low will not	0
Foreign countr	y name		ŀ	Foreign provir	nce/state/c	county	/	Fo	reign postal	code	your ta	x or refund	
At any time du	ring 20	21, did you receive, sell, exchange,	or othe	rwise dispo	se of any	, finar	ncial intere	st in a	ny virtual o	currer	ncy?	X Yes	No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate return			•		a depende	nt					
Age/Blindness	S You:	Were born before January 2, 1	957	Are blind	Spo	ouse:	Was	born b	efore Jani	uary 2	2, 1957	🗌 ls b	lind
Dependent	s (see i	instructions):			al security		(3) Relatio		(4)	🖊 if q	ualifies fo	or (see instru	uctions):
If more	(1) Fi	rst name Last name		nu	mber	$ \rightarrow $	to you	1	Child	tax ci	redit	Credit for ot	ther dependents
than four dependents,						$ \rightarrow $							<u> </u>
see instruction	s ——					\rightarrow				<u> </u>			<u> </u>
and check						\rightarrow							<u> </u>
here 🕨 🔄			- ())									<u> </u>	
Attach	1	Wages, salaries, tips, etc. Attach F	11	N-2	· · ·	•	• • •	· ·		•	. 1		94,744.
Sch. B if	2a	· ·	2a		-		xable inte			•	. 2k	-	22.
required.	3a		3a				dinary divi			•	. 3k	-	1.
	4a 5a		4a 5a				axable amo axable amo			•	. 4k . 5k	-	
Ot and and	5a 6a		5a 6a				ixable amo			·	. 51. . 61.	-	
Standard Deduction for –	0a 7	Capital gain or (loss). Attach Scher		required If						► Г	. <u>01</u>		4.
 Single or Married filing 	8	Other income from Schedule 1. line					CHECK HEI	с.			. 8		-9,965.
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a						• •		•	. <u> </u>		
\$12,550Married filing	10	Adjustments to income from Sche		-						•	10		<u> </u>
jointly or	11	Subtract line 10 from line 9. This is									► <u>1</u> 1		84,806.
Qualifying widow(er),	12a	Standard deduction or itemized	,					12a	12	,550			<u> </u>
\$25,100 • Head of	b	Charitable contributions if you take		•		,		12b		300			
household,	c				`		, L					с	12,850.
\$18,800 If you checked	13	Qualified business income deducti											
any box under Standard	14												12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14											71,956.

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

Form **1040** (2021)

Form 1040 (2021	1)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	11,583.
	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	11,583.
	19	Nonrefundable child tax cree						19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,583.
	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	11,583.
	25	Federal income tax withheld	from:			1 1			
	а	Form(s) W-2				25a 14	,321.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	,			25c			
	d	Add lines 25a through 25c						25d	14,321.
If you have a	26	2021 estimated tax payment			37			26	
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a			
		Check here if you were k							
		January 2, 2004, and you taxpayers who are at least a							
	b	Nontaxable combat pay elec	-	1 1					
	с	Prior year (2019) earned inco	ome	. 27c					
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Recovery rebate credit. See	instructions .			30			
	31	Amount from Schedule 3, lin	e15			31			
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable cred	lits 🕨	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	otal payments			. 🕨	33	14,321.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	unt you overpaid		34	2,738.
	35a	Amount of line 34 you want			3 is attached, che	eck here		35a	2,738.
Direct deposit?	►b	Routing number 1 2 4			🕨 c Type: 🚺	Checking	Savings		
See instructions.	►d	Account number 8 8 7	3 6 3 2	4 8 6					
	36	Amount of line 34 you want a	,			36			
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37	
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38			
Third Party		you want to allow another			rn with the IRS'		omploto l		X No
Designee		signee's		Phone			onal identi		
		me ►		no.			ber (PIN)		
Sign		der penalties of perjury, I declare t		ed this return and					
Here	bel	ief, they are true, correct, and com	plete. Declaration	of preparer (othe	r than taxpayer) is b	based on all information			, ,
TICIC	Yo	ur signature		Date	Your occupation				it you an Identity
La instructions 0					DATA ENGI	NEED		inst.) 🕨	N, enter it here
Joint return? See instructions.	Sp	ouse's signature. If a joint return, i	ooth must sign	Date	Spouse's occupa		· ·	,	t your spouse an
Keep a copy for	- Cp	oudo o digitataro. Il a joint rotarii, i	our maor orgin.	Duto					ection PIN, enter it here
your records.							(see	inst.) 🕨	
	Ph	one no. (352)284-969	7	Email address	SJSAMARTHO	794@GMAIL.CC	M		
Paid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	T	Check if:
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAN	1 03/29/2022	P0208	2703	Self-employed
Use Only		m's name 🕨 GLOBAL TAX					Phor	ne no. (678)965-9522
	Fir	m's address ► 2530 Pebb.	le Creek I	n Cummin	g GA 30041		Firm	's EIN ►	30-1017196
Go to www.irs.ge	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/19/22 PRO			Form 1040 (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

Internal Revenue Service	► Go to www.irs.gov/Form1040 for instructions and the latest information.	•
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	
SAMARTH SUBRAM	ANYA JYOTHI	

Your social security number 318-41-0278

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tru Schedule E		5	-9,965.
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		8m	-	
n	Section 951A(a) inclusion (see instructions)	8n	-	
0	Section 461(I) excess business loss adjustment	80	-	
р	Taxable distributions from an ABLE account (see instructions) .	8p	-	
z	Other income. List type and amount ►	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8		10	-9,965.

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-basis governmen officials. Attach Form 2106		2
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	i
16	Self-employed SEP, SIMPLE, and qualified plans	16	i
17	Self-employed health insurance deduction	17	,
18	Penalty on early withdrawal of savings	18	k
19a	Alimony paid	19	а
b	Recipient's SSN	_	
С	Date of original divorce or separation agreement (see instructions)	_	
20	IRA deduction	20	1
21	Student loan interest deduction	21	
22	Reserved for future use	22	2
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)		
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	j
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	
	B ∆∆ REV 03/19/22 PRO	Sche	dule 1 (Form 1040) 2021

REV 03/19/22 PRO

SCHEDULE D

(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.

Attachment Sequence No. **12**

20

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

Department of the Treasury

SAMARTH SUBRAMANYA JYOTHI

Your social security number

318-41-0278

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 This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, columr	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result 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	167.	180.			-13.
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	68.	51.			17.
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	through 6 in colu	mn (h). If you have	e any long-	7	4.

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. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and 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					
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.					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	()	12 13			
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	Carryover	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•			15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 4.
	• 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?	
	 Yes. Go to line 18. X 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 03/19/22 PRO

Schedule D (Form 1040) 2021

Form **8949**

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

12

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.

b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A

Name(s) shown on return	Social security number of taxpayer identification number
SAMARTH SUBRAMANYA JYOTHI	318-41-0278

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	(D) Date sold or Proceeds See the Note bel		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.)	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	05/05/21	12/12/21	167.	180.			-13.	
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) ►			167.	180.			-13.	

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**

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

12

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.

tor lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A

Name(s) shown on return	Social security number of taxpayer identification number
SAMARTH SUBRAMANYA JYOTHI	318-41-0278

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 reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	sold or Proceeds See the Note below			f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(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 CRYPTO LLC	05/05/21	12/12/21	68.	51.			17.	
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) ►			68.	51.			17.	

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

SCHEDULE	Ε
(Form 1040)	

OMB No. 1545-0074 20

Attachment Sequence No. **13**

21

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.

Department of the Treasury Internal Revenue Service (99)

►

	Oel VICE (33)	l
Name(s) shown		

	P Aut		10, 10, 10, 10		V + 11
Go	to www.irs.g	ov/ScheduleE	for instructions	and the la	test information

Name(s)	shown on return							Your so	cial securit	y number
SAMA	RTH SUBRAMANYA								41-027	
Part		s From Rental Real Estate and Roy	-					• •		
		instructions. If you are an individual, repo							-	
		nts in 2021 that would require you to		()						
		ou file required Form(s) 1099?							. 🗆 `	Yes 🗌 No
<u>1a</u>		each property (street, city, state, ZIP								
	#3, 3RD MAIN,5	TH CROSS SARASWATHIPURAM	1 MYS	SURU K	ARNA	TAKA	IN 570009)		
 1b	Turne of Duor out i	0				Eair	Rental	Doroor	nal Use	
D	Type of Property (from list below)	2 For each rental real estate prop above, report the number of fail	ir rent:	al and			Days			QJV
Α	3	personal use days. Check the if you meet the requirements to qualified joint venture. See inst	QJV b	ox only	Α		365		0	
B		gualified joint venture. See inst	ruction	sa ns.	B		303		0	
<u> </u>				-	C					
	f Property:				•					
	le Family Residence	3 Vacation/Short-Term Rental	5 Iar	nd		7 Self-	Rental			
0	i-Family Residence			valties		8 Othe	r (describe)			
Incom	•	Properties:			Α	0 0 11 0	B			С
3	Rents received		3			625.				
4			4							
Expen										
5	Advertising		5							
6	Auto and travel (see i	nstructions)	6							
		nance	7		1,	850.				
8			8							
9			9							
10	-	essional fees	10							
11	-		11		1,	950.				
12		d to banks, etc. (see instructions)	12							
			13			1 = 0				
14			14			150.				
			15 16		⊥,	990.				
			17		2	650.				
		e or depletion	18		۷,	050.				
			19							
20	Total expenses Add	lines 5 through 19	20		10.	590.				
21		line 3 (rents) and/or 4 (royalties). If			/					
21		instructions to find out if you must								
			21		-9,	965.				
22	Deductible rental real	l estate loss after limitation, if any,								
	on Form 8582 (see in		22	(9,9	965.)	()()
23a	Total of all amounts r	eported on line 3 for all rental prope	rties			23a		625.		
		eported on line 4 for all royalty prope	erties			23b				
		eported on line 12 for all properties				23c				
		eported on line 18 for all properties				23d				
		eported on line 20 for all properties				23e	10	,590.		
		e amounts shown on line 21. Do no		-		•••		. 24		
		sses from line 21 and rental real estate) (9,965.)
26		ate and royalty income or (loss).								
		V, and line 40 on page 2 do not a								-0.005
		40), line 5. Otherwise, include this ar				iine 41	on page 2 -9,965	. 26		-9,965.
For Pap	perwork Reduction Act	Notice, see the separate instructions.		INI	PA		, 505	• •	schedule E	(Form 1040) 2021