Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

- Internal F	heveride Service					
Submis	ssion Identification Number (SID)					
Taxpaye	r's name	Social securi	ty number			
VISW	JANATH KOLACHINA	809-65	-9307			
Spouse's	s name	Spouse's so	Spouse's social security number			
Dort	Tax Return Information — Tax Year Ending December 31, 2021 (E	Entor year your	ro author	izina \		
Part	whole dollars only on lines 1 through 5.	nter year you a	ire autrior	ızırıg.)		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
	Adjusted gross income		11	83.	724.	
2	Total tax		2		341.	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		228.	
	Amount you want refunded to you		4		887.	
	Amount you owe		5			
Part	Taxpayer Declaration and Signature Authorization (Be sure you get a	nd keep a cop	y of you	retur	n)	
return (or to send for any Agent to payment authorize payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I original or amended) I am now authorizing. I consent to allow my intermediate service provider, true my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to territ, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to alidentification number (PIN) below is my signature for the income tax return (original or amende nic Funds Withdrawal Consent.	ansmitter, or electror rejection of the table U.S. Treasury and indicated in the tatitution to debit the ininate the authorizan requests must be the processing of the payment. I fur	onic return or ransmission and its designated as preparated entry to the ation. To reduce received of the electrother acknowns	originato , (b) the inated F ion softwants is account voke (cano later onic pay wledge 1	or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the	
	yer's PIN: check one box only					
X		rate my PIN	9 3 0		as my	
<u> </u>	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En	ter five digits n't enter all	s, but	ao my	
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Your si	ignature ► K.Viswanath Date	▶ <u>03/06/2</u>	022			
Spous	e's PIN: check one box only					
Ороцэ	I authorize to enter or gene	rate my PIN			as my	
	ERO firm name		ter five digit		ao my	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter all	zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.					
Spouse	e's signature ▶ Date	•				
	Practitioner PIN Method Returns Only—continue be	elow				
Part I	Certification and Authentication — Practitioner PIN Method Only					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.		8 6 1	9 8	9	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual incozed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provider	submitting this ret	urn in acco	dance v		
ERO's	signature ▶ Date	>				
	ERO Must Retain This Form — See Instruction					
	Don't Submit This Form to the IRS Unless Requested					

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		0 _ 0, , _	_	ried filing separately	` ′			,	_	, ,	` , ` ,
one box.	•	u checked the MFS box, enter the r on is a child but not your dependen		f your spouse. If you	checl	ked the HOH o	r QV	V box, enter th	e child's	s name if th	ne qualifying
Your first name	and mi	iddle initial	Last n	ame					Your so	cial securit	ty number
VISWANA'	ГН		KOL	ACHINA					809-65-9307		
If joint return, s	pouse's	s first name and middle initial	Last r	iame					Spouse	's social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	1		on Campaign
		HALL STREET						3609		here if you,	or your ntly, want \$3
	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta		1	code			Checking a
HOUSTON					T		-	054	1	low will not	•
Foreign country	y name			Foreign province/state	e/coun	ity	Fore	eign postal code	your tax or refund. You Spou		. Spouse
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of ar	ny fina	ancial interest	in an	y virtual curre	ncy?	X Yes	☐ No
Standard	Som	eone can claim:	pende	nt	se as	a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a dual-status	alier	1					
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Sp	ouse	: Was bo	rn be	fore January 2	2, 1957	☐ Is bl	ind
Dependent	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip	(4) ✓ if q	ualifies fo	r (see instru	ictions):
If more		irst name Last name		number		to you		Child tax c	redit	Credit for ot	her dependents
than four											
dependents, see instruction											
and check											
here ►											
	1	Wages, salaries, tips, etc. Attach	orm(s) W-2					. 1		92,004.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b)	
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary divide	nds		. 3b)	
	4a	IRA distributions	4a		b T	axable amoun	ıt.		. 4t)	
	5a	Pensions and annuities	5a		b T	axable amoun	ıt.		. 5b)	
Standard	6a	Social security benefits	6a		b T	axable amoun	ıt.		. 6b		
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D	if required. If not red	uired	l, check here		▶[7		990.
 Single or Married filing 	8	Other income from Schedule 1, lin	e 10						. 8		-9 , 270.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome				▶ 9	8	83,724.
Married filing	10	Adjustments to income from Sche	dule 1	, line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your	adjusted gross inco	me				▶ 11	1 8	83,724.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedul	e A)	12	а	12,55	0.		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e insti	ructions) 12	b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 12	c i	12,850.
If you checked	13	Qualified business income deduct	ion fro	m Form 8995 or For	n 899	95-A			. 13	3	
any box under Standard	14	Add lines 12c and 13							. 14		12 , 850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from I	ine 11. If zero or less	, ente	er -0			. 15	5	70,874.

Form 1040 (2021)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	11,3	341.
	17	Amount from Schedule 2, lin						17		
	18	Add lines 16 and 17	18	11,3	341.					
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		19		
	20	Amount from Schedule 3, lin						20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	11,3	341.
	23	Other taxes, including self-e						23		0.
	24	Add lines 22 and 23. This is	your total tax				. ▶	24	11,3	341.
	25	Federal income tax withheld	from:			1				
	а	Form(s) W-2				25a 13	,228.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	13,2	228.
If you have a	26	2021 estimated tax payment	s and amount a	pplied from 20	20 return	.,		26		
qualifying child,	27a	Earned income credit (EIC)				27a				
attach Sch. EIC.		Check here if you were by January 2, 2004, and you taxpayers who are at least at	u satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for					
	b	Nontaxable combat pay elec								
	С	Prior year (2019) earned inco								
	28	Refundable child tax credit or additional child tax credit from Schedule 8812								
	29	American opportunity credit from Form 8863, line 8								
	30	Recovery rebate credit. See								
	31	Amount from Schedule 3, line 15								
	32	-		-				32		
	33	Add lines 25d, 26, and 32. T					. ▶	33		228.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid						34		887.
	35a							35a	1,8	887.
Direct deposit? See instructions.	►b	Routing number 1 1 1 0 0 0 0 2 5 ▶ c Type: X Checking Savings								
occ manachons.	►d	Account number 4 8 8 0 6 4 9 7 6 4 4 6								
	36	Amount of line 34 you want a				36				
Amount	37	Amount you owe. Subtract				1 I	. ▶	37		
You Owe	38	Estimated tax penalty (see in				38				
Third Party Designee	ins	you want to allow another tructions	•		n with the IRS?	. 🕨 🗌 Yes. Co	omplete b		⊠ No	
		ne •		no.			oer (PIN)			
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com								
11010	You	ur signature		Date	Your occupation				nt you an Identi N, enter it here	
laint vatuum?				SOFTWARE ENGINEER		FNCTNFFP	l l	nst.) ▶	N, enter it here	<u>,</u>
Joint return? See instructions.	Spo	ouse's signature. If a joint return, t	ooth must sian.	Date	Spouse's occupat		1110011		nt your spouse	an
Keep a copy for your records.				oposed o dodupation			Ident	Identity Protection PIN, enter it her (see inst.)		
	Pho	one no. (870) 949-472	3	Email address	VISWA.KOLAC	HINA@GMAIL.CO	M			
Paid	Pre	parer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Preparer Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/05/2022	P02082	2703	Self-emp	loyed
Use Only	Firr	m's name ▶ GLOBAL TAX	XES LLC				Phon	e no. (678) 965-	9522
	Firr	m's address ▶ 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm'	s EIN 🕨	30-101	7196
Go to www.irs.go	ov/Form	1040 for instructions and the late	st information.		BAA	REV 02/17/22 PRO			Form 10 4	10 (2021)

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

VISWANATH KOLACHINA

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

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

Your social security number 809-65-9307

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	s	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	-		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E		5	-9, 270.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation	,	7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶			
_		8z		
9	Total other income. Add lines 8a through 8z	040 4040 00	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-SR, or	40	

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 D (Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

Attachment

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

▶ 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.

Sequence No. **12**

Your social security number

VI	SWANATH KOLACHINA			809-	-65-	9307
	ou dispose of any investment(s) in a qualified opportunity	•	•			
If "Y	es," attach Form 8949 and see its instructions for additiona	al requirements for	r reporting your ga	in or loss.		
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year o	or Less (se	e ins	tructions)
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 e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	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					
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	1,435.	445.			990.
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	24	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	990.
Par	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see	instructions)
	instructions for how to figure the amounts to enter on the	-		(g)	•	(h) Gain or (loss)
This	below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	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					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	ions, estates, and	trusts from Scheo	dule(s) K-1	12 13	
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	y, from line 13 of y	our Capital Loss	Carryover	14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back				15	, ,

BAA

Schedule D (Form 1040) 2021 Page 2

Part III Summary 990. 16 Combine lines 7 and 15 and enter the result 16 • 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 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

OMB No. 1545-0074

Attachment

Sequence No. 12A

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

▶ 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.

Social security number or taxpayer identification number

VISWANATH KOLACHINA

809-65-9307

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

★ (C) Short-term transactions ★ (C) Short-term transact	not reported	d to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, it If you enter an enter a co	(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	1,435.	445.			990.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	1,435.	445.			990.

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.

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.

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 809-65-9307 VISWANATH KOLACHINA 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 H.NO 7-2-129/A, ASHOKCOLONY SANATHNAGAR, HYDERABAD TELANGANA IN 500018 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 . 3 610. 4 4 Royalties received Expenses: 5 Advertising 5 6 Auto and travel (see instructions) . 6 7 Cleaning and maintenance . . . 7 1,920. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 1,870. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 2,150. 14 Repairs. 14 1,730. 15 15 Supplies . Taxes 16 16 17 2,210. 17 18 Depreciation expense or depletion . . 18 Other (list) ----19 19 Total expenses. Add lines 5 through 19 20 20 9,880. 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 -9,270. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,270.) 610. 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 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 9,880. 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 9,270. 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 -9,270.