Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2022**

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....▶

509.

REV 03/07/22 PRO

1555

336-63-6203 THARUN RAMAGONI

4900 MEDICAL DR APT 614 SAN ANTONIO TX 78229

Department of the Treasury Internal Revenue Service

Calendar Year — Due 06/15/2022

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....▶

509.

REV 03/07/22 PRO

1555

336-63-6203 THARUN RAMAGONI

4900 MEDICAL DR APT 614 SAN ANTONIO TX 78229

Department of the Treasury Internal Revenue Service

Calendar Year — Due 09/15/2022

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

509.

REV 03/07/22 PRO

1555

336-63-6203 THARUN RAMAGONI

4900 MEDICAL DR APT 614 SAN ANTONIO TX 78229

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/17/2023**

2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

509.

REV 03/07/22 PRO

1555

336-63-6203 THARUN RAMAGONI

4900 MEDICAL DR APT 614 SAN ANTONIO TX 78229

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

Subm	nission Identification Number (SID)				
Taxpay	ver's name	Social securit	y number		
THP	-6203				
Spouse	ial security	number			
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	r year you a	re autho	rizing.)	
	whole dollars only on lines 1 through 5.	, ,		<u> </u>	
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	92,0	34.
2	Total tax		2	13,1	67.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	11,1	33.
4	Amount you want refunded to you		4		
5	Amount you owe		5	2,0	48.
Par	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of you	ır return)	1
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejuy delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account independent of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutionization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I a poinc Funds Withdrawal Consent.	itter, or electro- ection of the tr .S. Treasury are icated in the ta on to debit the the authoriza- uests must be processing of payment. I furt	nic return ansmission and its desi ax prepara entry to the tion. To re- received the election	originator (on, (b) the reignated Fina tition softwa his account revoke (can no later the ronic payme	(ERO) eason ancial are for t. This acel) a han 2 ent of at the
	ayer's PIN: check one box only				
	I authorize GLOBAL TAXES LLC to enter or generate	my PIN 3	6 2 er five digi	$\frac{0 \mid 3}{\text{its. but}}$ as	s my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.		i't enter al		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Your	signature ▶ Date ▶ _				
Snou	ana'a Dibly cheek and hay only				
Spou	se's PIN: check one box only	may CINI			
L	I authorize to enter or generate to enter or generate	,	er five diai		s my
	signature on the income tax return (original or amended) I am now authorizing.		n't enter al		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	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		8 6 1 er all zeros		9
autho	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income to rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submarried the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Inc.	itting this retu	rn in acco	ordance wit	
FR∩'	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V 2021 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2021**

▼ Detach Here and Mail With Your Payment and Return **▼**

Department of the Treasury Internal Revenue Service

(99)

21

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ▶

2,048.

REV 03/07/22 PRO 1555

100

THARUN RAMAGONI

4900 MEDICAL DR 614
SAN ANTONIO TX 78229

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

202	1

OMB No. 1545-0074

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 f your spouse. If you	, ,			, ,	_		. , . ,
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securit	ty number
THARUN			RAM	AGONI					336-	63-620	3
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse	's social se	curity number
Home address	•	er and street). If you have a P.O. box, see L DR	instruc	tions.				Apt. no. 614		ntial Election	on Campaign or your
	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Sta			code 229	to go to	this fund.	tly, want \$3 Checking a
Foreign country				Foreign province/stat				eign postal code		low will not x or refund.	
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of a	ny fina	ıncial 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	pouse	: Was bor	n be	fore January 2	2, 1957	☐ Is bl	ind
Dependents If more	•	instructions): irst name Last name	(2) Social security (3) Relationship number to you		(4) ✓ if que Child tax cr		r (see instru Credit for ot	ctions): her dependents			
than four											
dependents,											
see instructions and check	s ——										
here ▶											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		78 , 153.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b)	·
Sch. B if	3a	Qualified dividends	3a	7.	b C	ordinary divide	nds		. 3b)	7.
required.	4a	IRA distributions	4a			axable amoun			. 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	, check here		▶ [7	2	23,804.
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8		-9 , 930.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total in	come				▶ 9	(92,034.
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	adjusted gross inc	ome				▶ 11		92,034.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	le A)	12:	а	12,550	0.		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e instr	ructions) 12	b	300	0.		
household, \$18,800	С	Add lines 12a and 12b							. 12	c	12,850.
If you checked	13	Qualified business income deducti	on fror	m Form 8995 or For	m 899	5-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14	1 :	12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	s, ente	r-0			. 15	5 7	79,184.

	16	Tax (see instructions). Check if any from	Form(s): 1 881	4 2 🗌 4972	3 🗌			16	13 , 167.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	13,167.
	19	Nonrefundable child tax credit or credit	for other depender	nts from Schedule	e 8812			19	
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or le	ess, enter -0					22	13,167.
	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 t	ах				. ▶	24	13,167.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	11,	133.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	11,133.
If you have a	26	2021 estimated tax payments and amou	unt applied from 20	20 return				26	
qualifying child,	27a	Earned income credit (EIC)			27a				
attach Sch. EIC.		Check here if you were born after							
		January 2, 2004, and you satisfy a taxpayers who are at least age 18, to class							
	b	Nontaxable combat pay election	1 1	Structions -					
	c		27c						
	28	Refundable child tax credit or additional of		Schedule 8812	28				
	29	American opportunity credit from Form			29			1	
	30	Recovery rebate credit. See instructions			30			1	
	31	Amount from Schedule 3, line 15			31			1	
	32	Add lines 27a and 28 through 31. These				dable credit	s Þ	32	
	33	Add lines 25d, 26, and 32. These are yo	-					33	11,133.
Defined	34	If line 33 is more than line 24, subtract li						34	
Refund	35a	Amount of line 34 you want refunded to			•	=	▶ □	35a	
Direct deposit?	▶b	Routing number X X X X X X							
See instructions.	►d	Account number X X X X X X							
	36	Amount of line 34 you want applied to y	our 2022 estimate	ed tax ►	36	_			
Amount	37	Amount you owe. Subtract line 33 from	n line 24. For details	s on how to pay,	see ins	tructions	. ▶	37	2,048.
You Owe	38	Estimated tax penalty (see instructions)		🕨	38		14.		
Third Party	Do	you want to allow another person to	discuss this retur	n with the IRS?	See				
Designee	ins	tructions			. ▶	Yes. Con	nplete b	elow.	X No
		ignee's	Phone no. ▶				al identif		
0:				d			r (PIN)		t of my linewinder and
Sign		der penalties of perjury, I declare that I have exe ef, they are true, correct, and complete. Declara							
Here	You	ir signature	Date	Your occupation			If the	IRS ser	nt you an Identity
		3					Prote	ction Pl	N, enter it here
Joint return?	L			SR.DATABAS		IALYST	,	nst.) 🕨	
See instructions. Keep a copy for	Spo	ouse's signature. If a joint return, both must sig	ın. Date	Spouse's occupat	ion				nt your spouse an ection PIN, enter it here
your records.							1	nst.) ▶	CHOIT IN, enter it here
	———Pho	one no. (281) 216-7750	Email address	THARUN.RAMA	CONTR	GMATI, COM			
		parer's name Preparer's s		IIIII(ON , IVIIIA	Date		PTIN	\neg	Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRI	IYA RAM SAGAR	GUPTA TALLAM	03/1	.1/2022 F	02082	2703	Self-employed
Preparer		n's name ► GLOBAL TAXES LLC			1	-	_		678) 965-9522
Use Only		n's address ► 2530 Pebble Cree		g GA 30041				s EIN ▶	· · · · · · · · · · · · · · · · · · ·
Go to www.irs a		1040 for instructions and the latest information		BAA	REV 03	/07/22 PRO	1		Form 1040 (2021)
				שחת	L V UC	, , , , , , , , , , , , , , , , , , , ,			

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

THARUN RAMAGONI

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

Your social security number 336-63-6203

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	-9,930.
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 1040 00	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-5K, 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

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 Your social security number 336-63-6203 THARUN RAMAGONI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) lines below. Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (g) with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 981,763. 983,312. 26,472. 24,923. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 -448. 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 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 24,475. 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)

lines	below.	(d) Proceeds	(e) Cost	Adjustmen to gain or loss		Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, F	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with $\textbf{Box}\ \textbf{D}$ 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 Form from Forms 4684, 6781, and 8824		11	-671.		
12	Net long-term gain or (loss) from partnerships, S corpora	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	a through 14 in co	olumn (h). Then, go	to Part III	15	-671

BAA

Schedule D (Form 1040) 2021 Page 2

Part III Summary 23,804. 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 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. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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.

Sales and Other Dispositions of Capital Assets ▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Department of the Treasury ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Internal Revenue Service

Sequence No. 12A

Name(s) shown on return THARUN RAMAGONI Social security number or taxpayer identification number 336-63-6203

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☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•		•	2)
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 c 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	1,007.	926.			81.
E*TRADE SECURITIES LLC	05/05/21	12/12/21	980,756.	982,386.	W	26,472.	24,842.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc e is checked), lir	lude on your ne 2 (if Box B	981.763.	983.312.		26.472.	24.923.

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)

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. ▶ Go to www.irs.gov/ScheduleE for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 13

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

Your social security number

	UN RAMAGONI								86-63-		
Part	Income or Loss	From Rental Real Estate and Roy	yaltie	S Note:	: If you a	are in th	e business c	of renti	ng perso	nal pro	perty, use
	Schedule C. See i	instructions. If you are an individual, repo	ort far	m rental ir	ncome o	r loss fr	om Form 48	335 on	page 2,	line 40).
A Dic	d you make any paymer	nts in 2021 that would require you to	file F	orm(s) 10	099? Se	ee instr	uctions .			Y	es 🛛 No
B If "	Yes," did you or will yo	ou file required Form(s) 1099?								□ Y	es 🗌 No
1a	Physical address of e	each property (street, city, state, ZIP	code	e)							
Α	1-8-43/3 BALAS	AMUDRAM HANAMKONDA WARA	NGA:	L URBA	N TEI	LANGA	NA IN 5	0600	1		
В											
С											
1b	Type of Property	2 For each rental real estate prop	erty I	isted			Rental	Per	sonal U	se	QJV
	(from list below)	above, report the number of fai personal use days. Check the 0 if you meet the requirements to	r rent	al and			ays		Days		
A	3	if you meet the requirements to	file a	as a	Α		365		0		
B		qualified joint venture. See insti	ructio	ns.	В						
C					С						
	of Property:										
•	gle Family Residence	3 Vacation/Short-Term Rental			7	' Self-	Rental				
	ti-Family Residence		6 Ro	yalties		Othe	r (describe)				
Incom		Properties:			Α		E	3			С
3			3			580.					
4			4								
Expen											
5	-		5								
6	•	nstructions)	6								
7		nance	7		1,6	570.					
8			8								
9			9								
10	_	ssional fees	10			200					
11	•		11		1,9	920.					
12		d to banks, etc. (see instructions)	12								
13			13		0 1	1.4.0					
14	•		14			140.					
15			15		۷, ۲	410.					
16			16 17		2 1	270					
17					۷,3	370.					
18 19	Other (list)	or depletion	18								
20	` '	lines 5 through 19	20		10 6	1.0					
	•	•	20		10,5	J⊥U•					
21		line 3 (rents) and/or 4 (royalties). If									
	file Form 6198	instructions to find out if you must	21		-9,9	วรก					
22		estate loss after limitation, if any,									
~~	on Form 8582 (see in:		22	(9_9	30.)	()(١
23a		eported on line 3 for all rental prope				23a	\	.5.8	80.		
b		eported on line 4 for all royalty prope				23b					
C		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d					
e		eported on line 20 for all properties				23e	1	0,5	10.		
24		e amounts shown on line 21. Do no t	t inclı					. 1	24		
25	•	sses from line 21 and rental real estate				nter tota	al losses her	e .	25 (9,930.)
26		ate and royalty income or (loss).						T I			, /
20		V, and line 40 on page 2 do not a									
		10), line 5. Otherwise, include this an							26		-9,930.

Form **678**1

Gains and Losses From Section 1256 Contracts and Straddles

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form6781 for the latest information.

Attach to your tax return.

OMB No. 1545-0644

2021

Attachment
Sequence No. 82

Name(s) shown on tax return Identifying number 336-63-6203 THARUN RAMAGONI Check all applicable boxes. A ☐ Mixed straddle election **C** Mixed straddle account election See instructions. ${f B}$ \square Straddle-by-straddle identification election **D** ☐ Net section 1256 contracts loss election **Section 1256 Contracts Marked to Market** Part I (a) Identification of account (b) (Loss) (c) Gain Form 1099-B E*TRADE SECURITIES LLC -1,119.2 Add the amounts on line 1 in columns (b) and (c) 3 3 -1,119. 4 Form 1099-B adjustments. See instructions and attach statement 4 5 5 -1,119. Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to 6 be carried back. Enter the loss as a positive number. If you didn't check box D, enter -0- 6 7 7 -1,119. Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 8 -448. Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of -671.Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Part II Section A-Losses From Straddles (f) Loss. (a) Description of property (c) Date (d) Gross (e) Cost or (h) Recognized loss. (g) If column (e) is entered into closed out sales price other basis Unrecognized If column (f) is more than (d), or acquired or sold plus expense gain on more than (g), enter difference. of sale offsetting enter difference. Otherwise, Otherwise, enter -0-. positions enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b Section B-Gains From Straddles (f) Gain. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired or sold plus expense enter difference. of sale Otherwise, enter -0-. 12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D 13a Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) Part III (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) acquired other basis value on last is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-. 14