(Rev. January 2021)

Department of the Treasury

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

OMB No. 1545-0074

| Internal Revenue Service Go to www.irs.gov/Form8879 for the latest information. | | | |
|--|---|--|--|
| Submission Identification Number (SID) | | | |
| Taxpayer's name | Social security | y number | |
| VINEETH REDDY JUNNUTHULA | 9078 | | |
| Spouse's name | al security number | er | |
| Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter v | vear vou ar | e authorizino | 1) |
| Enter whole dollars only on lines 1 through 5. | your you ui | e admonzing | ·- <i>)</i> |
| Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | |
| 1 Adjusted gross income | | 1 120 | 0,941. |
| 2 Total tax | | | 9,963. |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | | 5,737. |
| 4 Amount you want refunded to you | | | 5,774. |
| 5 Amount you owe | | 5 | <i>y</i> , , , <u>, , , , , , , , , , , , , , , ,</u> |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get and ke | | of your retu | urn) |
| return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitt to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indice payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment agent to receive confidential information necessary to answer inquiries and resolve issues related to the paymersonal identification number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate meson authorize to 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 if you are entering your ours PIN and your return in filed using the Prestitioner PIN method. | tion of the tra Treasury are ated in the tau to debit the the authorizates from the tau to debit the the authorizates from the tracks of the | ansmission, (b) to dissipate of the diss | the reason of Financial oftware for count. This (cancel) a ter than 2 sayment of e that the icable, my as my |
| if you are entering your own PIN and your return is filed using the Practitioner PIN methologies. Your signature ▶ Date ▶ | a. The ERO | must complet | ie Part III |
| | | | |
| Spouse's PIN: check one box only | | | 1 |
| I authorize to enter or generate m | - | | as my |
| ERO firm name signature on the income tax return (original or amended) I am now authorizing. | | er five digits, but 't enter all zeros | |
| I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN metho below. | | • | _ |
| Spouse's signature ▶ Date ▶ | | | |
| Practitioner PIN Method Returns Only—continue below | | | |
| Part III Certification and Authentication — Practitioner PIN Method Only | | | |
| ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8 | 7 2 7 8 Don't ente | | 8 9 |
| I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Indiana. | ting this retu | rn in accordanc | |
| ERO's signature ▶ Date ▶ | | | |
| ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do | o So | | |

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 [u checked the MFS box, enter the roon is a child but not your depender | name of | ied filing separately your spouse. If you | , | _ | | , | - | _ | | |
|---|---------------|--|------------|---|------------|----------------|------------------|----------------|----------|------------------|---------------------------|----------------|
| Your first name | and mi | ddle initial | Last na | ame | | | | | Y | our so | cial securit | ly number |
| VINEETH | REDI | DY | JUN: | NUTHULA | | | | | 6 | 85-3 | 37-907 | 8 |
| If joint return, spouse's first name and middle initial Last name Spo | | | | | pouse's | s social sed | curity number | | | | | |
| | | | | | | | | | | | | |
| Home address | (numbe | er and street). If you have a P.O. box, see | e instruct | tions. | | | | Apt. no. | Р | resider | ntial Election | on Campaign |
| 11700 L | JNA I | RD | | | | | | 4304 | C | heck h | nere if you, | or your |
| City, town, or p | ost offic | ce. If you have a foreign address, also c | omplete | spaces below. | Sta | te | ZIP | code | | | | ntly, want \$3 |
| DALLAS | | | | | T | ζ | 75 | 5234 | | • | tnis tuna. ow will not | Checking a |
| Foreign countr | y name | | | Foreign province/stat | e/coun | ty | For | eign postal co | | | or refund. | |
| | | | | 5 . | | • | | • | | | You | Spouse |
| At any time du | ıring 20 | 021, did you receive, sell, exchange | , or oth | erwise dispose of a | ıny fina | ncial interes | st in an | ıy virtual cu | ırrenc | y? | X Yes | ☐ No |
| Standard | Som | eone can claim: | epender | nt Your spor | use as | a dependen | ıt | | | | | |
| Deduction | | Spouse itemizes on a separate retu | rn or yo | u were a dual-statu | ıs alien | l | | | | | | |
| Age/Blindnes: | s You: | Were born before January 2, | 1957 | Are blind S | pouse | : Was b | orn be | efore Janua | ıry 2, 1 | 1957 | ☐ Is bl | ind |
| Dependent | s (see | instructions): | | (2) Social security number (3) Relationship (4) ✓ if of the control of the contr | | if qual | ifies for | r (see instru | ctions): | | | |
| If more | (1) Fi | rst name Last name | | | | to you | to you Child tax | | ax cred | it | Credit for oth | her dependents |
| than four | | | | | | | | | | | | |
| dependents, see instruction | s —— | | | | | | | | | | | |
| and check | | | | | | | | | | | | |
| here ► | | | | | | | | | | | | |
| | _1_ | Wages, salaries, tips, etc. Attach | Form(s) | W-2 | | | | | | 1 | 1 | 34,407. |
| Attach | 2a | Tax-exempt interest | 2a | | b T | axable intere | est | | | 2b | | |
| Sch. B if required. | 3a | Qualified dividends | 3a | | b C | ordinary divid | dends | | | 3b | | |
| required. | 4a | IRA distributions | 4a | | b T | axable amoi | unt . | | | 4b | | |
| | 5a | Pensions and annuities | 5a | | b T | axable amoi | unt . | | | 5b | | |
| Standard | 6a | Social security benefits | 6a | | b T | axable amoi | unt . | | | 6b | | |
| Deduction for— | 7 | Capital gain or (loss). Attach Schedule D if required. If not required, check here | | | | | | 7 | - | -2 , 036. | | |
| Single or Married filing | 8 | Other income from Schedule 1, lir | | | ٠ | | | | | 8 | - . | 11,430. |
| separately, \$12,550 | 9 | Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income | | | | | . ▶ | 9 | | 20,941. | | |
| Married filing | 10 | Adjustments to income from Sche | edule 1, | line 26 | | | | | | 10 | | |
| jointly or Qualifying | 11 | Subtract line 10 from line 9. This i | s your a | adjusted gross inc | ome | | | | . ▶ | 11 | 12 | 20,941. |
| widow(er), | 12a | Standard deduction or itemized | • | - | | 1 | 12a | 12,5 | 550. | | | |
| \$25,100 Head of | b | Charitable contributions if you take | | • | , | | 12b | | 300. | | | |
| household, | С | Add lines 12a and 12b | | | | | | | | 12c | : : | 12,850. |
| \$18,800 If you checked | 13 | Qualified business income deduc- | tion fror | n Form 8995 or Fo | m 899 | 5-A | | | | 13 | | |
| any box under Standard | 14 | Add lines 12c and 13 | | | | | | | | 14 | | 12,850. |
| Deduction, | 15 | Taxable income. Subtract line 14 | from li | ne 11. If zero or les | s, ente | r-0 | | | | 15 | | 08,091. |
| see instructions. | | | | | ., | | - | | | | | , |

| | 16 | Tax (see instructions). Check if any from Form(s): 1 ☐ 88 | 14 2 🗌 4972 | 3 🗌 | | 16 | 19,963. |
|--|---------|--|--------------------|-------------------------|----------------|------------|---|
| | 17 | Amount from Schedule 2, line 3 | | | | 17 | |
| | 18 | Add lines 16 and 17 | | | | 18 | 19,963. |
| | 19 | Nonrefundable child tax credit or credit for other depende | ents from Schedule | 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 less, enter -0 | | | | 22 | 19,963. |
| | 23 | Other taxes, including self-employment tax, from Schedu | le 2, line 21 | | | 23 | 0. |
| | 24 | Add lines 22 and 23. This is your total tax | | | | 24 | 19,963. |
| | 25 | Federal income tax withheld from: | | | | | · |
| | а | Form(s) W-2 | | 25a | 25,737. | . | |
| | b | Form(s) 1099 | | 25b | | | |
| | С | Other forms (see instructions) | | 25c | | | |
| | d | Add lines 25a through 25c | | | | 25d | 25,737. |
| | 26 | 2021 estimated tax payments and amount applied from 2 | | | | 26 | , |
| If you have a Lagrangian qualifying child, | 27a | Earned income credit (EIC) | NΤΩ | 27a | | | |
| attach Sch. EIC. | | Check here if you were born after January 1, 1998 | | | | | |
| | | January 2, 2004, and you satisfy all the other requ | uirements for | | | | |
| | | taxpayers who are at least age 18, to claim the EIC. See i | nstructions ► | | | | |
| | b | Nontaxable combat pay election | | - | | | |
| | С | Prior year (2019) earned income | | | | | |
| | 28 | Refundable child tax credit or additional child tax credit from | | 28 | | - | |
| | 29 | American opportunity credit from Form 8863, line 8 | | 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 your total ot | | | | 32 | 05 808 |
| | 33 | Add lines 25d, 26, and 32. These are your total payment | | | | 33 | 25,737. |
| Refund | 34 | If line 33 is more than line 24, subtract line 24 from line 33 | | • | | 34 | 5,774. |
| D: 1.1 '10 | 35a | Amount of line 34 you want refunded to you. If Form 888 | | ck here . Checking | ► ∐ Savings | 35a | 5,774. |
| Direct deposit? See instructions. | ▶b | Routing number 1 2 1 0 0 0 3 5 8 Account number 3 2 5 0 4 8 2 3 5 3 | | | | | |
| | ► d | | | | | | |
| A | 36 | Amount of line 34 you want applied to your 2022 estima | | 36 | | 07 | |
| Amount You Owe | 37 | Amount you owe. Subtract line 33 from line 24. For deta | | 1 1 | ns . ► | 37 | |
| | 38 | Estimated tax penalty (see instructions) | | 38 | | | |
| Third Party Designee | | you want to allow another person to discuss this retructions | | | s. Complete | below | × No |
| Designee | | ignee's Phon | | | Personal ident | | |
| | | no. | | | number (PIN) | | |
| Sign | | ler penalties of perjury, I declare that I have examined this return a | | | | | |
| Here | | ef, they are true, correct, and complete. Declaration of preparer (oth | 1 | ased on all infor | 1 | | , , |
| | You | r signature Date | Your occupation | | | | nt you an Identity IN, enter it here |
| Joint return? | | | SOFTWARE | DEVELOPE | | e inst.) | |
| See instructions. | Spo | use's signature. If a joint return, both must sign. Date | Spouse's occupat | | | e IRS ser | nt your spouse an |
| Keep a copy for | | | | | I | • | ection PIN, enter it here |
| your records. | | | | | (see | e inst.) 🕨 | |
| | | ne no. (510) 944-7748 Email address | VINEETHREDDY | | | | T |
| Paid | | parer's name Preparer's signature | | Date | PTIN | | Check if: |
| Preparer | | PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR | GUPTA TALLAM | 04/14/20 | | | Self-employed |
| Use Only | | | | | | | (678) 965-9522 |
| | Firr | n's address ▶ 2530 Pebble Creek Ln Cummin | ng GA 30041 | | Firn | n's EIN ▶ | |
| Go to www.irs.go | ov/Form | 1040 for instructions and the latest information. | BAA | REV 04/09/22 F | 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

VINEETH REDDY JUNNUTHULA

► 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 685-37-9078

| Par | Additional Income | | | |
|-----|---|---------------------------------------|----|----------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | 3 | 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, truschedule E | | 5 | -11,430. |
| 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 | · · · · · · · · · · · · · · · · · · · | 9 | |
| 10 | Combine lines 1 through 7 and 9. Enter here and on Form 10 | | | |
| | 1040-NR. line 8 | , | 10 | _11 /30 |

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 | • | 12 | |
| 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 | 24j | | |
| 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 here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, lin | | 26 | |

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99) ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Name(s) shown on return VINEETH REDDY JUNNUTHULA

Your social security number 685-37-9078

| | ou dispose of any investment(s) in a qualified opportunity areas," attach Form 8949 and see its instructions for additiona | | | | | |
|---------------|---|----------------------------------|--|---|------------------|---|
| Pa | <u> </u> | • | | | 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) |
| | 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 | 2,733. | 5 , 030. | | | -2,297. |
| | Totals for all transactions reported on Form(s) 8949 with Box B checked | 2,1000 | 2,200 | | | |
| 3 | Totals for all transactions reported on Form(s) 8949 with Box C checked | 6 , 147. | 5,886. | | | 261. |
| 4 | Short-term gain from Form 6252 and short-term gain or (kg | | | B24 | 4 | 2011 |
| 5 | Net short-term gain or (loss) from partnerships, Schedule(s) K-1 | S corporations, | estates, and tr | rusts from | 5 | |
| 6 | Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions | | | | 6 | () |
| 7 | Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise | | | | 7 | -2,036. |
| Par | t II Long-Term Capital Gains and Losses—Ger | nerally Assets F | leld More Than | One Year | (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 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 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 | | | | | |
| 11 | Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824 | | | | 11 | |
| 12 | Net long-term gain or (loss) from partnerships, S corporati | | | | 12 | |
| 13 | Capital gain distributions. See the instructions | | | | 13 | |
| | Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions | | | | 14 | () |
| 15 | Net long-term capital gain or (loss). Combine lines 8a | through 14 in co | lumn (h). Then, go | to Part III | 45 | |

BAA

Schedule D (Form 1040) 2021 Page 2

Part III Summary -2,036. 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 2,036.) • (\$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

Department of the Treasury

Internal Revenue Service

Part I

Sales and Other Dispositions of Capital Assets

▶ 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

VINEETH REDDY JUNNUTHULA

Social security number or taxpayer identification number

685-37-9078

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.

instructions). For long-term transactions, see page 2.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

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.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Securities LLC 05/05/21 12/12/21 2,733. 5,030. -2,297. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

2,733.

-2,297.

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) ▶

5,030.

8949

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

Name(s) shown on return

Social security number or taxpayer identification number 685-37-9078

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.

VINEETH REDDY JUNNUTHULA 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (g), (h)

| (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | Cost or other basis. See the Note below | | | enter a code in column (f). See the separate instructions. | | Gain or (loss). Subtract column (e) |
|--|--|-------------------------------------|---|---|--------------------------------|--|---|--|-------------------------------------|
| (Example: 100 sh. XYZ Co.) | e: 100 sh. XYZ Co.) Date acquired 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 | 6,147. | 5,886. | | | 261. | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above | al here and inc is checked), lir | lude on your ne 2 (if Box B | C 147 | E 000 | | | 0.01 | | |
| above is checked), or line 3 (if Box 0 | above is chec | kea) - | 6,147. | 5 , 886. | | | 261. | | |

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.

OMB No. 1545-0074

2021

Attachment
Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

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

Your social security number Name(s) shown on return 685-37-9078 VINEETH REDDY JUNNUTHULA 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) H.NO.13-3-92 Q.NO: T2 386 THILAKNAGAR GODAVARI KANI KANRIMNAGAR TELANGANA IN 505209 Α 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 personal use days. Check the **QJV** box only if you meet the requirements to file as a (from list below) **Days Days** 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 . 3 620. 4 4 Royalties received Expenses: Advertising 5 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,950. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 11 2,150. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 2,350. 15 2,650. 15 Supplies . Taxes 16 16 17 17 2,950. 18 Depreciation expense or depletion . . 18 Other (list) ----19 19 Total expenses. Add lines 5 through 19 20 20 12,050. 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 -11,430.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 11,430.) 620. 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 12,050. 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 11,430. 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 -11,430.