(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

Submi	ssion Identification Number (SID)							
Taxpaye	er's name	Social securit	Social security number					
KUNI	DAN KESHIDI	680-83-0724						
Spouse'	s name	Spouse's soc						
Part	Tax Return Information — Tax Year Ending December 31, 2021 (En	ter year you a	re auth	norizing.)			
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		,235.			
2	Total tax		2	6	,831.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	9	,014.			
4	Amount you want refunded to you		4	3	<u>,583.</u>			
5	Amount you owe		5					
Part	Taxpayer Declaration and Signature Authorization (Be sure you get an penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend							
return (to send for any Agent t paymer authoriz paymer busines taxes to persona	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I all original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfund 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 the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account not 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 terming the transfer of the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resolves prior to the payment (settlement) date. I also authorize the financial institutions involved in or oreceive confidential information necessary to answer inquiries and resolve issues related to the didentification number (PIN) below is my signature for the income tax return (original or amended) nic Funds Withdrawal Consent.	smitter, or electrorejection of the tree U.S. Treasury and indicated in the treation to debit the nate the authorizate quests must be the processing of e payment. I furt	ansmissed its deax preparently to attend to at	urn origina sion, (b) the esignated aration sof this accorrevoke (correvoke (correvoke) ed no late actronic pa	tor (ERO) ne reason Financial tware for punt. This cancel) a er than 2 yment of that the			
	yer's PIN: check one box only							
X		ite mv PIN	0 7	2 4	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent		igits, but all zeros	a.c,			
	I will enter my PIN as my signature on the income tax return (original or amended) I an if you are entering your own PIN and your return is filed using the Practitioner PIN me below.							
Your s	ignature ▶ Date ▶	·						
Snous	se's PIN: check one box only							
Ороцо	I authorize to enter or genera	ite my PIN			as my			
	ERO firm name	_	er five d	iaits. but	as my			
	signature on the income tax return (original or amended) I am now authorizing.	doı	n't enter	all zeros				
	I will enter my PIN as my signature on the income tax return (original or amended) I and if you are entering your own PIN and your return is filed using the Practitioner PIN me below.							
Spous	e's signature ▶ Date ▶	•						
	Practitioner PIN Method Returns Only—continue belo	ow						
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 7 2 7 Don't ente	8 6 er all zer	1 9 8	9			
authoriz	with the above numeric entry is my PIN, which is my signature for the electronic individual incom- zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am su ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	ibmitting this retu	ırn in ad	ccordance				
FRO'°	signature ▶ Date ▶	•						
<u> </u>	ERO Must Retain This Form — See Instructions							

£1040

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

2021

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [bu checked the MFS box, enter the reson is a child but not your depender	— name of	ied filing separately your spouse. If you	` ′	_		` ,	_	, ,	` , ` ,
Your first name	and m	iddle initial	Last n	ame					Your so	cial securi	ity number
KUNDAN			KES	HIDI					680-8	33-072	4
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's	s social se	curity number
	•	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.		ntial Electi	ion Campaigr
12514 E					10.		1 710				ntly, want \$3
		ce. If you have a foreign address, also co	omplete	spaces below.	Sta T1			code 8002	to go to	this fund.	Checking a
ARLINGT				Faraian pravince/atat			_			ow will not or refund	
Foreign countr	y name			Foreign province/state	e/coun	ty	Fore	eign postal code	your tax	You	. Spouse
At any time du	ıring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	ny fina	ancial interes	t in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		neone can claim: You as a de Spouse itemizes on a separate retu	•				t				
Age/Blindness	s You	: Were born before January 2, 1	1957	Are blind S	pouse	: Was b	orn be	fore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secur	ity	(3) Relation	ship	(4) ✓ if q	ualifies for	(see instru	uctions):
If more	(1) F	irst name Last name		number		to you	to you Child tax		redit	Credit for of	ther dependents
than four											
dependents, see instruction	s ——										
and check	·										
here ▶											
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		69,391.
Attach	2a	Tax-exempt interest	2a		b T	axable intere	est		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		b Ordinary dividends		dends		. 3b		
	4a	IRA distributions	4a		b Taxable amount .				. 4b		
	5a	Pensions and annuities	5a		b T	axable amou	unt .		. 5b		
Standard	6a	Social security benefits	6a		b T	axable amou	unt .		. 6b		
Deduction for— Single or	7	Capital gain or (loss). Attach Sche	edule D	if required. If not re	quired	, check here		▶ [7		94.
Married filing	8	Other income from Schedule 1, lir	ne 10						. 8		-6,250.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come				▶ 9		63,235.
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	djusted gross inc	ome				▶ 11		63,235.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Schedu	le A)	1	2a	12,55	0.		
Head of	b	Charitable contributions if you take	the sta	ndard deduction (se	e insti	ructions) 1	2b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 120	;	12,850.
If you checked	13	Qualified business income deduct	tion fror	n Form 8995 or For	m 899	95-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 less	s, ente	er -0			. 15		50,385.

See instructions. Keep a copy for your records. Paid	Pho	ouse's signature. If a joint return, bone no. (214)985-261 parer's name PRIYA RAM SAGAR GUPTA TALLAM	0 Preparer's signat	Email address	KUNDANREDD'	Y.K@GMA	F	Identi (see i	ity Prote nst.) ▶	Chec	k if:	ter it here
See instructions. Keep a copy for your records.	————Pho	one no. (214)985-261	0	Email address		Y.K@GMA		Identi (see i	ity Prote	ection		ter it here
See instructions. Keep a copy for							ATT COM	Identi (see i	ity Prote		PľN, er	ter it here
See instructions. Keep a copy for	Spo	ouse's signature. If a joint return, t	oth must sign.	Date	Spouse's occupat	lion		Identi	ity Prote		PIN, er	ter it here
	Spo	ouse's signature. If a ioint return. t	Join must sian.	Date Spouse's occupation				I II tile	he IRS sent your spouse an entity Protection PIN, enter it			
Joint return? See instructions			ath much sign	n. Date Spouse's occupation		DEVELOTER.		,		nt vour	spous	e an
loint return?					SOFTWARE I	DEVELO	PER		ction Pl nst.) ▶	iv, ent	er it ne	
11010	You	ur signature		Date	Your occupation				IRS ser	,		,
Here	bel	ief, they are true, correct, and com	plete. Declaration of			ased on all i	information				•	•
Sign	Und	der penalties of perjury, I declare t					statements	s, and to	the bes			
		lesignee's Phone Personal identif ame ► no. ► number (PIN) ►										
Designee		tructions				. 🟲 📙	Yes. Con			X	ИО	
Third Party		you want to allow another	•				Van Ore	ا جامامه	مام	.	N.	
You Owe	38	Estimated tax penalty (see in				38						
Amount	37	Amount you owe. Subtract				1 1	ctions	. ▶	37			
	36	Amount of line 34 you want a				36						
See instructions.	►d	Account number 9 3 0 8 9 8 5 2 8										
Direct deposit?	►b	Routing number 1 1 1] Checking		avings				
Retund	35a	Amount of line 34 you want				-	=	▶ □	35a			583.
Refund	34	If line 33 is more than line 24							34			583.
	33	Add lines 25d, 26, and 32. T							33			414.
	32	Add lines 27a and 28 throug					ble credit	s Þ	32		1.	400.
	31	Amount from Schedule 3, lin				31	/	100.	-			
	30	Recovery rebate credit. See				30	1.	400.	-			
	20 29	American opportunity credit				28			-			
	c 28	Prior year (2019) earned inco Refundable child tax credit or			Schodulo 9912	20						
	b	Nontaxable combat pay elec										
		taxpayers who are at least a	ge 18, to claim t	he EIC. See in								
)		January 2, 2004, and you	satisfy all the	e other requi	rements for							
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC) Check here if you were b				2/a						
If you have a	26	2021 estimated tax payment			NΩ	 27a			26			
	d	Add lines 25a through 25c							25d		9,	014.
	С	Other forms (see instructions	,			25c					•	014
	b	Form(s) 1099				25b						
	а	Form(s) W-2				25a	9,	014.				
	25	Federal income tax withheld	from:									
	24	Add lines 22 and 23. This is	your total tax					. ▶	24		6,	831.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21				23			0.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22		6,	831.
	21	Add lines 19 and 20							21			
	20	Amount from Schedule 3, lin		•					20			
	19	Nonrefundable child tax cred							19		٠,	031.
	18	Add lines 16 and 17							18		6	831.
	17	Amount from Schedule 2, lin	•	• • —					17		0,	631.
	16	Tax (see instructions). Check	if any from Form	(s)· 1 881	4 2 4972	3 🗆			16		6.	831.

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

KUNDAN KESHIDI

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.

Sequence No. 01
Your social security number
680-83-0724

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	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, transchedule E		5	-6,250.
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 ▶			
_	Tabal atherina and Addilling Co. III and Co.	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 10 1040-NR line 8	040, 1040-5H, Or	10	6 250

Schedule 1 (Form 1040) 2021 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	 11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov 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)		
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		
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 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
Z	Other adjustments. List type and amount ▶		
25	Total other adjustments. Add lines 24a through 24z	 25	
26	Add lines 11 through 23 and 25. These are your adjustments to income		
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury

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

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

Your social security number

KU	NDAN KESHIDI			680-	-83-	0724
	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional	•	•	_		
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	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) Adjustmer 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	1,193.	1,100.			93.
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					
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	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if ar Worksheet in the instructions	ny, 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. Otherwis			e any long-	7	93.
Par	t II Long-Term Capital Gains and Losses—Ge	nerally Assets F	Held 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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or loss Form(s) 8949,	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.			line 2, colum	n (g)	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	4.	3.			1.
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 corporat				12	
	Capital gain distributions. See the instructions				13	
14	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	a through 14 in co	lumn (h). Then, go	to Part III		

15

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 94. 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? X 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? X 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. 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 gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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.

Form **8949**

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.

OMB No. 1545-0074

2021

Attachment
Sequence No. 12A

Name(s) shown on return
KUNDAN KESHIDI

Department of the Treasury

Social security number or taxpayer identification number

680-83-0724

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)

(C) Short-term transactions	•	٠,,	_	sis wasn t report	ea to the ir	10	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if 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.)		(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)
APEX CLEARING	01/27/21	01/28/21	449.	407.			42.
Robinhood Securities LLC	01/27/21	05/11/21	744.	693.			51.
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 A)	al here and inc is checked), lir	lude on your ne 2 (if Box B	1 193	1 100			93

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.

Form 8949 (2021) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

KUNDAN KESHIDI

680-83-0724

Before you check Box D. E. or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ (D) Long-term transactions☐ (E) Long-term transactions	reported on	Form(s) 1099	-B showing bas))
(F) Long-term transactions	not reported	to you on Fo	rm 1099-B				
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)			(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
APEX CLEARING	12/21/20	02/11/21	4.	3.			1.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	4.	3.			1.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. 13

Name(s) shown on return Your social security number KUNDAN KESHIDI 680-83-0724 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 FLATNO: 203, DOOR: 11-15-14/1 DOCTORS COLONY HYDERABAD, TELANGANA IN 500035 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 365 0 Α 3 Α 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 . 3 450. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,000. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 1,200. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 1,200. 15 1,500. 15 Supplies . Taxes 16 16 17 17 1,800. 18 Depreciation expense or depletion . . 18 Other (list)
----19 19 Total expenses. Add lines 5 through 19 20 20 6,700. 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 -6,250. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 6,250.) 450. 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 6,700. 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 6,250. 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

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-6,250.