# 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

IIILEITIAIT	leveriue dei vice								
Submi	ssion Identification Number (SID)								
Taxpaye	r's name	Social secur	ity num	 oer					
MANO	OJ KUMAR PEDDARAPU	725-29-7180							
Spouse's	s name	Spouse's so	cial sec	urity nu	mber				
Part	, , , , , , , , , , , , , , , , , , , ,	year you	are au	thoriz	ing.)				
	whole dollars only on lines 1 through 5.								
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		La	ı	76	706			
1	Adjusted gross income		2			$\frac{786.}{812.}$			
2 3	Total tax		3						
4	Amount you want refunded to you		4			<u>061.</u>			
5	Amount you owe		5			249.			
Part		eep a co		our r	eturr	n)			
Under pmy kno return (ato send for any Agent to paymer busines taxes to persona Electror	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) will be a mount of the income tax return (original or amended) 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, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and a consensual return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indication is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised as a payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the particle and identification number (PIN) below is my signature for the income tax return (original or amended) I and Funds Withdrawal Consent.  **Yeer's PIN: check one box only**	I am now au e are the an tter, or electrotion of the S. Treasury cated in the authorizests must be processing ayment. I fun now authorizests must be processed as a function of the	thorizing and its of the electron and its of the elect	g, and from th turn ori ssion, ( designa oaration to this Fo revo ved no ectroni cknowle nd, if a	to the ne inco- iginato (b) the ated Fin softwaccou bke (cab later ic payredge t applicated)  but ros	best of ome tax or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the ble, my as my			
Spous	e's PIN: check one box only	DINI		$\Box$					
	I authorize to enter or generate   ERO firm name		nter five	digite		as my			
	signature on the income tax return (original or amended) I am now authorizing.		on't ente	•					
	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 <b>and</b> your return is filed using the Practitioner PIN meth below.		_			_			
Spous	e's signature ▶ Date ▶								
	Practitioner PIN Method Returns Only—continue below								
Part I	Certification and Authentication — Practitioner PIN Method Only								
FRO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7	8 6	1 9	8 8	9			
3	2 Littor your on argic Li its followed by your involugit self-selected i its.	Don't en							
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taked to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of Ir	itting this re	urn in a	accorda	anće v				
ERO's	signature ▶ Date ▶								
	ERO Must Retain This Form — See Instructions								
	Don't Submit This Form to the IRS Unless Requested To D	o So							

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

Filing Status Check only one box.	If yo	Single Married filing jointly unchecked the MFS box, enter the note is a child but not your dependent	ame of	ed filing separately ( your spouse. If you		_		, ,	_	, ,	` , ` ,	
Your first name	and mi	ddle initial	Last na	ame					Your so	cial securi	ty number	
MANOJ KI	JMAR		PEDI	DARAPU					725-	29-718	0	
If joint return, s	pouse's	first name and middle initial	Last na	ame					Spouse's social security number			
Home address	,	er and street). If you have a P.O. box, see	instructi	ions.			,	Apt. no.		ntial Election	on Campaign	
		ce. If you have a foreign address, also co	mnlete s	snaces helow	Sta	nte	ZIP c	nde	spouse	if filing join	ntly, want \$3	
PEORIA		50 you have a foreign address, also so		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A		853				Checking a	
Foreign country	/ name			Foreign province/state			<del>                                     </del>			ow will not cor refund.	•	
At any time du	ring 20	021, did you receive, sell, exchange,	or othe	erwise dispose of ar	y fina	ancial interest i	in any	virtual curre	ncy?	Yes	⊠ No	
Standard Deduction		eone can claim:	'			•						
Age/Blindness	You:	☐ Were born before January 2, 1	957 [	Are blind Sp	ouse	: Was bo	rn bef	ore January 2	2, 1957	☐ Is bl	ind	
Dependents	s (see	instructions):		(2) Social securit	у	(3) Relationsh	nip	(4) 🗸 if q	ualifies fo	r (see instru	ctions):	
If more	<b>(1)</b> Fi	irst name Last name	number		to you		Child tax cr		redit	Credit for ot	her dependents	
than four												
dependents, see instruction	s ——											
and check												
here ▶										[		
	_1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1		83,447.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t .		. 2b	,		
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> (	Ordinary divide	nds .		. 3b	)		
	4a	IRA distributions	4a		<b>b</b> T	axable amoun	nt		. 4b	)		
	5a	Pensions and annuities	5a		<b>b</b> T	axable amoun	nt		. 5b	)		
Standard	6a	Social security benefits	ба		<b>b</b> T	axable amoun	nt		. 6b	)		
Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D i	f required. If not req	uired	l, check here		▶ [	7		1,029.	
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8		-7,690.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. 7	This is your <b>total inc</b>	ome				▶ 9		76,786.	
Married filing	10	Adjustments to income from Schee	dule 1,	line 26					. 10	1		
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross inco	me				▶ 11		76,786.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Schedule	e A)	12	а	12,55	0.			
Head of	b	Charitable contributions if you take	the star	ndard deduction (see	insti	ructions) 12l	b	30	0.			
household, \$18,800	С	Add lines 12a and 12b							. 120		12,850.	
If you checked	13	Qualified business income deducti	on fron	n Form 8995 or Forr	n 899	95-A			. 13			
any box under Standard	14	Add lines 12c and 13							. 14		12,850.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or less	ente	er -0			. 15		63,936.	

Form 1040 (2021	)								Page <b>2</b>	
	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	9,812.	
	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17	18	9,812.						
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		19		
	20	Amount from Schedule 3, lin	e8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	9,812.	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.	
	24	Add lines 22 and 23. This is	your <b>total tax</b>				🕨	24	9,812.	
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				<b>25a</b> 1	1,061.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						25d	11,061.	
<b>K</b>	26	2021 estimated tax payment						26		
If you have a L qualifying child,	27a	Earned income credit (EIC)			No	27a				
attach Sch. EIC.		Check here if you were by January 2, 2004, and you taxpayers who are at least a	ı satisfy all the ge 18, to claim t	e other requi	rements for					
	b	Nontaxable combat pay elec				_				
	С	Prior year (2019) earned inco				28				
	28	Refundable child tax credit or	_							
	29	American opportunity credit	_							
	30	Recovery rebate credit. See	_							
	31	Amount from Schedule 3, lin								
	32	Add lines 27a and 28 throug	32	11 061						
	33	Add lines 25d, 26, and 32. T						33	11,061.	
Refund	34	If line 33 is more than line 24				•		34	1,249.	
5	35a	Amount of line 34 you want				ck here Checking	<b>-</b> -	35a	1,249.	
Direct deposit? See instructions.	▶b	Routing number 0 4 4								
	►d	Account number 6 7 6								
	36	Amount of line 34 you want a				36				
Amount	37	Amount you owe. Subtract				1 1	. ▶	37		
You Owe Third Party	<b>38</b> Do	Estimated tax penalty (see in you want to allow another				38 See				
Designee	ins	structions				. P Yes.	Complete	below.	<b>X</b> No	
		signee's		· · · · · · · · · · · · · · · · · · ·			sonal identification			
		me ▶		no.			mber (PIN)			
Sign Here	bel	der penalties of perjury, I declare t ief, they are true, correct, and com		of preparer (othe	r than taxpayer) is b		ation of whic	h prepar	er has any knowledge.	
	You	ur signature		Date	Your occupation		I .		nt you an Identity IN, enter it here	
Joint return?					NETWORK E	NGINEER	I .	inst.) ▶		
See instructions. Keep a copy for your records.	Spouse's signature. If a joint return, <b>both</b> must sign.		Date	Spouse's occupat		Ider	tity Prote	nt your spouse an ection PIN, enter it here		
, ca. 1000. ao.			_					inst.) ▶		
		one no. (216)352-895		Email address	MANOJKP.4	31@GMAIL.C	_		Charle if	
Paid		eparer's name	Preparer's signat		a	Date	PTIN	0000	Check if:	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/28/2022			Self-employed	
Use Only	Firm's name ► GLOBAL TAXES LLC								678)965-9522	
		m's address ▶ 2530 Pebbl		n Cummin			Firm	ı's EIN ▶		
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/19/22 PRO	)		Form <b>1040</b> (2021)	

# SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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

725-29-7180

ı aı	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
<b>2</b> a	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, trus Schedule E	•	5	-7,690.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	Ba ( )		
b	Gambling income	Bb		
С	Cancellation of debt	Вс		
d	Foreign earned income exclusion from Form 2555	Bd ( )		
е	Taxable Health Savings Account distribution	Ве		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	Bg		
h	Prizes and awards	Bh		
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	Bk		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	Bm		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	Во		
р	Taxable distributions from an ABLE account (see instructions) .	Вр		
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 104 1040-NR, line 8	•	10	-7,690.

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	<b>&gt;</b>	_	
С	Date of original divorce or separation agreement (see instructions)	<b>-</b>		
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	<b>24</b> g		
h	,	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	<b>24i</b>		
j	Housing deduction from Form 2555	<b>24</b> 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 <b>adjustments</b> there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

#### **SCHEDULE D** (Form 1040)

## **Capital Gains and Losses**

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

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

OMB No. 1545-0074

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

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. **12** Your social security number

MA	NOJ KUMAR PEDDARAPU			725-	-29-	7180
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
	rt I Short-Term Capital Gains and Losses—Ge				e ins	tructions)
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  (d) Proceeds (sales price)  (e) Cost 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 <b>Box A</b> checked	1,515.	486.			1,029.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	1,313.	100.			1,029.
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4 5	Short-term gain from Form 6252 and short-term gain or (I Net short-term gain or (loss) from partnerships, Schedule(s) K-1	•			5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis				7	1,029.
Pai	t II Long-Term Capital Gains and Losses—Ge	nerally Assets F	leld More Than	One Year	(see	
	instructions for how to figure the amounts to enter on the below.	(d)	(e)	<b>(g)</b> Adjustmen	ts	(h) Gain or (loss) Subtract column (e)
This	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss from Form(s) 8949, Part I line 2, column (g)		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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	ions, estates, and	trusts from Scheo	lule(s) K-1	12 13	
	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	, from line 13 of y	our <b>Capital Loss</b>	Carryover	14	( )
15	Net long-term capital gain or (loss). Combine lines 8a on the back				15	,

Schedule D (Form 1040) 2021 Page 2

### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 1,029. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 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.

## Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Sequence No. 12A

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

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number MANOJ KUMAR PEDDARAPU 725-29-7180

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.

<ul><li>✗ (A) Short-term transactions</li><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas				<del>)</del>
1 (a)	(b) Date acquired	(c)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss). Subtract column (e)	
Description of property (Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	01/01/21	12/31/21	21.	35.			-14.
DRIVEWEALTH, LLC	01/01/21	12/31/21	446.	451.			-5.
Block, Inc	01/01/21	12/31/21	1,048.	0.			1,048.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	1,515.	486.			1,029.

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

# SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service (99)

### **Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 13

Name(s) shown on return

Your social security number

MANO	J KUMAR PEDDARAF	U						725-2	9-718	0	
Part	Income or Loss	From Rental Real Estate and Roy	yaltie	s Note	e: If you	are in th	e business of	f renting pe	ersonal pr	opert	y, use
	Schedule C. See in	structions. If you are an individual, repo	ort farı	m rental	income	or loss f	rom Form 48	<b>35</b> on page	e 2, line 4	0.	
A Dic	you make any payment	ts in 2021 that would require you to	file F	orm(s) 1	1099? S	ee insti	ructions .		. 🗆 🗅	es	X No
B If "	Yes," did you or will you	ı file required Form(s) 1099?							. 🗆 🗅	es	No
1a		ach property (street, city, state, ZIP									
Α	HUZURNAGAR NALG	ONDA TELANGANA IN 50820	4								
В											
С											
1b	Type of Property	2 For each rental real estate prop	erty I	listed			Rental	Persona Day		(	JV
	(from list below)	personal use days. Check the QJV box only									
A	3	if you meet the requirements to qualified joint venture. See inst	) file a	as a	Α		290		0		<u> </u>
В		quaimed joint venture. See mst	luctio	115.	В						<u> </u>
_ C	(5)				С						<u> </u>
	of Property:	0	<b>-</b> 1 -			7 O-16	Dantal				
	gle Family Residence ti-Family Residence	3 Vacation/Short-Term Rental		ina ovalties		7 Self-					
lncom		4 Commercial Properties:	o no	Jyanies	Α	8 Otne	r (describe)			С	
3		· · · · · · · · · · · · · · · · · · ·	3	-		650.	В				
4			4	+		050.					
Expen			-								
5			5								
6	•	structions)	6								
7	Cleaning and maintena	,	7		1,	150.					
8	Commissions		8								
9	Insurance		9								
10	Legal and other profes	sional fees	10								
11	Management fees .		11		1,	200.					
12	Mortgage interest paid	to banks, etc. (see instructions)	12								
13	Other interest		13								
14	Repairs		14			150.					
15	Supplies		15		2,	160.					
16	Taxes		16								
17	Utilities		17			680.					
18		or depletion	18								
19	Other (list)		19			0.40					
20	•	nes 5 through 19	20		8,	340.					
21		ne 3 (rents) and/or 4 (royalties). If									
	file Form 6198	structions to find out if you must	21		-7	690.					
22		estate loss after limitation, if any,				JJU.					
~~	on <b>Form 8582</b> (see inst		22	(	7.6	590.)	(	,	(		)
23a	-	ported on line 3 for all rental proper				23a	\	650.			,
b		ported on line 4 for all royalty prope				23b					
c		ported on line 12 for all properties				23c					
d		ported on line 18 for all properties				23d					
е		ported on line 20 for all properties				23e		8,340.			
24		amounts shown on line 21. <b>Do no</b> t	t inclu	ude any	losses			. 24			
25	•	ses from line 21 and rental real estate		-		nter tota	al losses here	e . <b>25</b>	(	7,	690.)
26	Total rental real estat	e and royalty income or (loss).	Comb	oine line	s 24 an	d 25. E	nter the res	sult			
		, and line 40 on page 2 do not a									
		)), line 5. Otherwise, include this an						. 26		-7	,690.