(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

Submission Identification Number (SID)		-		
Taxpayer's name	Social security	y numbe	r	
SRIKANTH NADELLA	184-02-	4267		
Spouse's name	Spouse's soci		ty number	
MADHURI JONNALAGADDA	708-88-			
Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter	r year you ar	re auth	orizing.)
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.		ایدا	107	766
1 Adjusted gross income		2		<u>,766.</u> ,952.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,932. ,979.
4 Amount you want refunded to you		4		,979. ,027.
5 Amount you owe		5		,027.
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and		-	ur retu	rn)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmotosend my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejetor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account ind 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 requipments business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I a Electronic Funds Withdrawal Consent.	we are the amounter, or electron of the trans. Treasury are icated in the table to debit the entered the authorization of processing of payment. I furtle	ounts from the control of the contro	om the income of	come tax tor (ERO) he reason Financial tware for bunt. This cancel) a er than 2 yment of that the
Taxpayer's PIN: check one box only				
X I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	Ent	4 2 er five di i't enter a		as my
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 methology. Your signature ▶ Date ▶				
Chausala DIN ahaak aha hay ahk				
Spouse's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate ERO firm name signature on 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 authorizing.	Ent	7 4 er five di 't enter	all zeros	as my
if you are entering your own PIN and your return is filed using the Practitioner PIN meth 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	3 er all zero	os	
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income to authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of In	nitting this retu	rn in ac	cordance	
ERO's signature ▶ Date ▶				
ERO Must Retain This Form — See Instructions				

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

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

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

Filing Status Check only one box.	If yo	Single X Married filing jointly uchecked the MFS box, enter the nation is a child but not your dependent	- ame of	ied filing separately your spouse. If yo		_			_		
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securi	ty number
SRIKANTH	I		NAD	ELLA					184-	02-426	7
If joint return, sp	pouse's	first name and middle initial	Last n	ame					Spouse'	's social se	curity number
MADHURI			JON.	NALAGADDA					708-	88-745	2
Home address	(numbe	r and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Election	on Campaign
4114 MEI	DICAI	L DR						10207	Check h	nere if you,	or your
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ite	ZIP	code			ntly, want \$3 Checking a
SAN ANTO	ONIO				T	X	78	229	0	ow will not	0
Foreign country name				Foreign province/sta	te/coun	ty	Fore	eign postal code		or refund.	•
At any time du	ring 20	21, did you receive, sell, exchange,	or oth	erwise dispose of a	any fina	ancial interest i	n an	y virtual currer	ncy?	Yes	⊠ No
Standard Deduction		eone can claim:									
Age/Blindness	You:	☐ Were born before January 2, 19	957	Are blind	Spouse	: Was bor	rn be	fore January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	nip	(4) ✓ if qu	ualifies fo	r (see instru	ictions):
-	Peduction	edit	Credit for ot	her dependents							
Dependent If more than four dependents, see instructior and check here ▶ □											
	· —										
here ▶ □											
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	1	37,690.
Attach	2a	Tax-exempt interest	2a		b T	axable interes	t		2b	,	
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds		. 3b	,	
required.	4a	IRA distributions	4a		b T	axable amoun	t.		. 4b	,	
	5a	Pensions and annuities	5а		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	equired	, check here		▶ [7		-924.
Single or Married filing	8	Other income from Schedule 1, line	e 10						. 8		-9,000.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8.	This is your total i i	ncome			1	▶ 9	1:	27,766.
Married filing	10	Adjustments to income from Scheo	dule 1,	line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your a	adjusted gross inc	come			1	▶ 11	1:	27,766.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	tions (from Sched	ule A)	12	a	25,100	o. 📉		
Head of	b	Charitable contributions if you take	the sta	andard deduction (s	ee instr	ructions) 12l	b	600).		
household, \$18,800	С	Add lines 12a and 12b							. 120		25,700.
If you checked	13	Qualified business income deducti	on fror	m Form 8995 or Fo	rm 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14	. :	25,700.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	ss, ente	er -0			. 15	10	02,066.

Form 1040 (2021)								Page 2
	16	Tax (see instructions). Check	•	• ,	_			16	13,952.
	17	Amount from Schedule 2, lin						17	
	18	Add lines 16 and 17						18	13,952.
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedule	e 8812		19	
	20	Amount from Schedule 3, lin						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	13,952.
	23	Other taxes, including self-e			•			23	0.
	24	Add lines 22 and 23. This is	your total tax				. ▶	24	13,952.
	25	Federal income tax withheld				1 1			ı
	а	Form(s) W-2				25a 18	,979.	_	ı
	b	Form(s) 1099				25b			l
	С	Other forms (see instructions	,			25c			I
	d	Add lines 25a through 25c						25d	18,979.
If you have a	26	2021 estimated tax payment	s and amount a	pplied from 20	20 return			26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a			ı
attacti Sch. Elo.		Check here if you were by January 2, 2004, and you taxpayers who are at least a	u satisfy all the ge 18, to claim t	e other requi	rements for				
	b	Nontaxable combat pay elec							ı
	С	Prior year (2019) earned inco				28			ı
	28	Refundable child tax credit or	-	ı					
	29	American opportunity credit	-	l					
	30	Recovery rebate credit. See	-	l					
	31	Amount from Schedule 3, lin		l					
	32	Add lines 27a and 28 throug	32	10.050					
	33	Add lines 25d, 26, and 32. T					. ▶	33	18,979.
Refund	34	If line 33 is more than line 24				•		34	5,027.
5	35a	Amount of line 34 you want i			·	_	► ∐ Savings	35a	5,027.
Direct deposit? See instructions.	▶b	Routing number 1 1 1		ı					
	► d	Account number 5 8 6							l
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Amount you owe. Subtract				1 1	. ▶	37	
Third Party		Estimated tax penalty (see in you want to allow another							_
Designee		tructions			omplete b		× No		
		signee's		Phone no. ▶		Personum	onal identit oer (PIN) 🕨	ication	
Sign	Un	me ► der penalties of perjury, I declare t ief, they are true, correct, and com		ed this return and		nedules and stateme	nts, and to	the bes	
Here	You	ur signature		Date Your occupation					nt you an Identity IN, enter it here
Joint return?					SOFTWARE 1	ENGINEER		inst.) 🕨	
See instructions.	Spe	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	tion			nt your spouse an
Keep a copy for your records.	,							tity Prote inst.) ▶	ection PIN, enter it here
,		(010) =00 444	•		SOFTWARE		,	iist.)	
		one no. (210)799-444		Email address	SRIKANTHNADI	HELLA@GMAIL.CO			01 1 15
Paid		eparer's name	Preparer's signat		G11DE3 ======	Date	PTIN	0000	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	[02/20/2022]	P02082		Self-employed
Use Only		m's name ► GLOBAL TAX			G3 20045				678)965-9522
		m's address ▶ 2530 Pebbi		n Cummın			Firm	's EIN ▶	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/16/22 PRO			Form 1040 (2021

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

SRIKANTH NADELLA & MADHURI JONNALAGADDA

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

Attachment Sequence No. 01 Your social security number 184-02-4267

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	
2 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, tro		5	-9,000.
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		
ı	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	<u> </u>	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10			
	1040-NR. line 8		10	_0 000

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	24 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	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 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.

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99) ▶ 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

_SR:	IKANTH NADELLA & MADHURI JONNALAGADDA			184	-02-	4267
-	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•			
Pai					e ins	tructions)
lines This	nstructions 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	s 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	5,466.	7,187.	-	797.	-924.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	3,400.	7,107.		171.	721.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
	Short-term gain from Form 6252 and short-term gain or (I Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	_		6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis				7	-924.
Par	t II Long-Term Capital Gains and Losses—Ge	nerally Assets F	leld More Than	One Year	(see	instructions)
lines	nstructions 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,	s from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.	(23.32 21.23)	(6. 6	line 2, colum		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.					
	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
	1 0				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	a through 14 in co	lumn (h). Then, go	to Part III	45	

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** -924. 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. Are lines 15 and 16 both gains? 17 ☐ **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. 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 924.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

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

Attachment

OMB No. 1545-0074

Sequence No. 12A

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Name(s) shown on return

Social security number or taxpayer identification number

SRIKANTH NADELLA & MADHURI JONNALAGADDA

184-02-4267

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.

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

☐ (B) Short-term transactions☐ (C) Short-term transactions		٠,	•	sis wasn't report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds (sales price)	(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. XÝZ Ćo.)	(Mo., day, yr.)			and see Column (e) in the separate instructions	(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	01/15/21	02/12/21	4,626.	6,298.	W	797.	-875.
ROBINHOOD SECURITIES LLC	01/06/21	02/16/21	840.	889.			-49.
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 (5,466.	7,187.		797.	-924.		

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

2021

Attachment
Sequence No. 13

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

Your social security number

		MADHURI JUNNALAGADDA							34-02-		
Part	Schedule C. See	s From Rental Real Estate and Roginstructions. If you are an individual, rep	ort far	m rental	income	or loss f	rom Form 4	835 or	n page 2,	line 40	•
		nts in 2021 that would require you to									
B If '		ou file required Form(s) 1099?								□ Ye	es 🗌 No
1a	-	each property (street, city, state, ZIF									
Α	2-11-69/1,GAND	OI NAGAR, NANDULA PETA, TE	INAL	I GUN'	TUR,	ANDHRA	PRADES	H IN	5222	01	
В											
С											
1b	Type of Property	2 For each rental real estate prop	perty l	listed		_	Rental	Per	sonal U	Ise	QJV
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	QJV k	oox only		<u> </u>	Days		Days		
_ <u>A</u>	3	if you meet the requirements to qualified joint venture. See inst	file a	as a	A		365		0		
B C		quaimed joint venture. See mist	iuctic	// IS.	В						
	of Duamanton				С						
	of Property:	2 Vacation/Chart Torra Dantal	E la	nd		7 Colf	Dontol				
	gle Family Residence	3 Vacation/Short-Term Rental				7 Self-		`			
ncon	•	4 Commercial Properties:	U NO	oyalties	Α.	8 Otne	er (describe E	•	Т		С
3		•	3	+	Α	620.		_			
4			4	+		020.					
4 Exper			4	+							
zpei 5			5			80.					
6	_	nstructions)	6			260.					
7	-	nance	7			600.					
8			8			000.					
9			9								
10		essional fees	10								
11	_		11			980.					
12	_	d to banks, etc. (see instructions)	12			200.					
13			13								
14			14		3	,560.					
15			15			,680.					
16			16								
17			17		1	,460.					
18		e or depletion	18			-					
19	Other (list) ▶	·	19								
20		lines 5 through 19	20		9	,620.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
		instructions to find out if you must									
	file Form 6198		21		-9	,000.					
22		l estate loss after limitation, if any,									
	-	structions)	22	(9,	000.)	()(
23a		eported on line 3 for all rental prope				23a		6	20.		
b		eported on line 4 for all royalty prop	erties			23b					
С		eported on line 12 for all properties				23c					
d		eported on line 18 for all properties				23d					
е		eported on line 20 for all properties				23e		9,6			
24	•	e amounts shown on line 21. Do no		-					24		
25		sses from line 21 and rental real estate							25 (9,000.
26		ate and royalty income or (loss).									
		V, and line 40 on page 2 do not		-							0 000
	Schedule 1 (Form 10)	 line 5. Otherwise, include this ar 	noun'	t in the t	no letor	n line 41	on page 2		26		-9.000.