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.

Submission Identification Number (SID)

Taxpay	ver's name	Soci	Social security number					
SAI	PAVAN NARASARAJ	1:	25-35-	-9615	5			
Spouse's name Spouse's social secu			rity number					
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Ent	er yea	r you a	re aut	horizing.)			
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	147,780.			
2	Total tax			2	26,397.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	31,089.			
4	Amount you want refunded to you			4	4,692.			
5	Amount you owe			5				
Par	Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)							

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

5	9	6	1	5	
Ent don	as my				

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. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

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. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature >	Da	ite 🕨	•					 		
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				 6 all zer	 9	8	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature >	Date 🕨	
ERO Mus Don't Submit Thi	Do So	
For Denergy Reduction Act Nation and your toy re		Earm 8879 (Bay, 01 2021)

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	20	21	OMB No. 15	45-0074	IRS Us	se Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the n son is a child but not your dependent	ame of	-	eparately use. If you	. ,	_			,		, 0	ow(er) (QW) ne qualifying
Your first name	and mi	iddle initial	Last na	me							Your so	cial securi	ty number
SAIPAVA	N		NARA	SARAJ							125-	35-961	5
lf joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse	's social se	curity number
Home address		er and street). If you have a P.O. box, see PL	instructio	ons.					Apt. no. 109			ential Electi here if you,	on Campaign or your
		ce. If you have a foreign address, also co	mplete s	paces belo	ow.	Sta	te	ZIP					ntly, want \$3
Bellevu		,	•	•		WZ	Ą		005		0	o this fund. low will not	Checking a
Foreign country	y name		F	Foreign pro	ovince/stat	e/count	ty	Fore	ign postal	code		x or refund	•
At any time du	iring 20	021, did you receive, sell, exchange,	, or othe	rwise dis	pose of a	ny fina	ancial interes	t in any	/ virtual	currei	ncy?	Yes	X No
Standard Deduction		eone can claim: You as a de Spouse itemizes on a separate retur	n or you	i were a c	dual-statu	s alien							
		Were born before January 2, 1	957	_ Are bli	nd S	pouse	: 📋 Was b	orn be	fore Jan		,	ls b	
Dependent				(2) S	ocial secur	ity	(3) Relation	ship				r (see instru	
If more	(1) Fi	irst name Last name			number		to you		Child	tax cr	redit	Credit for ot	her dependents
than four dependents,													
see instruction	s ——									\square			
and check here ►													
	4	Wages solaries tips ato Attach									. 1	1	<u> </u>
Attach	<u>1</u> 2a	Wages, salaries, tips, etc. Attach F Tax-exempt interest	2a	vv-z .	· · ·	 ь т	••••	· ·		·	. 1 2b		57,549.
Sch. B if	2a 3a	· ·	2a 3a		3.		axable intere Ordinary divid			·	. <u>2</u> . 3b		3.
required.	4a		4a		5.		axable amou			·	. 4b		J.
	5a		5a				axable amou			•	. 5b		
Standard	6a		6a				axable amou				. 6b		
Deduction for –	7	Capital gain or (loss). Attach Sche	dule D if	f required	I. If not re	quired	, check here				7		358.
 Single or Married filing 	8	Other income from Schedule 1, lin		•							. 8	-	10,130.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is you	ur total in	come				.	▶ 9	1	47,780.
 Married filing 	10	Adjustments to income from Sche									. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted g	gross inc	ome	· · ·			.	▶ 11	1	47,780.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (fror	n Schedu	le A)	1	2a	12	,550	0.		
 Head of 	b	Charitable contributions if you take	the star	ndard dec	luction (se	e instr	ructions) 1	2b		300	0.		
household, \$18,800	с	Add lines 12a and 12b									. 12	c	12,850.
 If you checked 	13	Qualified business income deduct	ion from	Form 89	95 or For	m 899	5-A				. 13	3	
any box under Standard	14												12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. lf z	ero or less	s, ente	er-0			•	. 15	5 1	34,930.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Form 1040 (202	1)									Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	26	,397.
	17	Amount from Schedule 2, lin	e3					17		
	18	Add lines 16 and 17						18	26	,397.
	19	Nonrefundable child tax cred	dit or credit for c	other depender	nts from Schedul	e8812		19		
	20	Amount from Schedule 3, lin	ie8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	26	,397.
	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 total tax				. 🕨	24	26	,397.
	25	Federal income tax withheld	from:						1	
	а	Form(s) W-2					,089.	_	1	
	b	Form(s) 1099				25b		_	1	
	С	Other forms (see instructions	,			25c		_	1	
	d	Add lines 25a through 25c						25d	31	,089.
If you have a	26	2021 estimated tax payment			37			26		
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a		-	1	
		Check here if you were k January 2, 2004, and you							1	
		taxpayers who are at least a							1	
	b	Nontaxable combat pay elec	-	1 1	_				1	
	с	Prior year (2019) earned inco	ome	. 27c					1	
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	28			1	
	29	American opportunity credit	from Form 8863	3, line 8		29		1	1	
	30	Recovery rebate credit. See	instructions .			30		1	1	
	31	Amount from Schedule 3, lin	ie 15			31			1	
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments and	d refundable crea	dits 🕨	32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			. 🕨	33	31	,089.
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amou	int you overpaid		34	4	,692.
Horana	35a	Amount of line 34 you want			is attached, che	ck here		35a	4	,692.
Direct deposit?	►b	Routing number 0 5 3				Checking	Savings		1	
See instructions.	►d	Account number 2 3 7	0 3 1 1	6 4 3 4	4 8				1	
	36	Amount of line 34 you want a				36				
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay,	see instructions	. 🕨	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38				
Third Party		you want to allow another							—	
Designee		tructions					•		X No	
		signee's ne ►		Phone no.			onal identi ber (PIN) 🖡			
Sign		der penalties of perjury, I declare t	hat I have examine		accompanying sch		. ,		t of my knov	vledge and
Sign		ief, they are true, correct, and com								
Here	Yo	ur signature		Date	Your occupation				nt you an Idei	
	κ								N, enter it he	ere
Joint return? See instructions.				Dete	FRONT END	-	`	inst.) ►		
Keep a copy for	Sp	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupat	tion			nt your spous ection PIN, er	
your records.								inst.) 🕨		
	Ph	one no. (704)794-448	5	Email address	SAIPAVAN.NAR	ASARAJ@GMAIL.CO	DM MC			
Deid	Pre	parer's name	Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/24/2022	P0208	2703	Self-en	nployed
Preparer		n's name 🕨 GLOBAL TAX							678)965	-9522
Use Only	Fin	n's address ► 2530 Pebb		n Cummin	g GA 30041			's EIN ▶		17196
Go to www.irs.g	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 03/19/22 PRO				040 (2021)
•					-					

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

	0090
Your soc	ial sec
125-35	-9615

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

ır	social security	number
5	-35-9615	

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes .	1		
2 a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions) \blacktriangleright			
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, trust Schedule E		5	-10,130.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	a ()		
b	Gambling income	b		
с	Cancellation of debt	c		
d	Foreign earned income exclusion from Form 2555 8	d ()		
е	Taxable Health Savings Account distribution 8	е		
f	Alaska Permanent Fund dividends	f		
g	Jury duty pay	g		
h	Prizes and awards	h		
i	Activity not engaged in for profit income	i		
j	Stock options	j		
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	k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)			
m	Section 951(a) inclusion (see instructions)	n		
n	Section 951A(a) inclusion (see instructions)	n		
0	Section 461(I) excess business loss adjustment	0		
р	Taxable distributions from an ABLE account (see instructions) .	ρ		
z	Other income. List type and amount			
	8	l		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040 1040-NR, line 8		10	-10,130.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2021

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government 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 Paralympicmedals and USOC prize money reported on line 81 24c		
d	Reforestation amortization and expenses		
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 violations24i		
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 to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

REV 03/19/22 PRO

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2021 Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

SAIPAVAN NARASARAJ

Your social security number

125-35-9615

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes X No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustment		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	to gain or loss from Form(s) 8949, Part I, line 2, column (g)		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	3,306.	3,207.			99.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	1,395.	1,209.			186.
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		5			
6	Short-term capital loss carryover. Enter the amount, if ar 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	0	., .	, ,	7	285.

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(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	602.	529.			73.
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	dule(s) K-1	12			
13	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 on the back	•			15	73.

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 358.
	• 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 line 22.	
	• 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.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 ()
	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.	

REV 03/19/22 PRO

Schedule D (Form 1040) 2021

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.



Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

125-35-9615

SAIPAVAN	NARASARAJ	

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)

(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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)	Adjustment, in If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	02/01/21	02/05/21	3,306.	3,207.			99.
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 C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	3,306.	3,207.			99.

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

Form 8949 (2021)	Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxpaver identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

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

125-35-9615

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 reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

- [] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	08/06/20	01/05/21	602.	529.			73.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►			602.	529.			73.

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.

REV 03/19/22 PRO

Form **8949**

Department of the Treasury

SAIPAVAN NARASARAJ

Internal Revenue Service

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

		-	-
Na	ime(s) shown on return		

Social security number or taxpayer identification number 125-35-9615

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

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

X (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

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.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) (g) Code(s) from instructions Armount of adjustment		from column (d) and combine the result with column (g)	
ROBINHOOD CRYPTO LLC	05/03/21	11/01/21	1,395.	1,209.			186.	
2 Totals. Add the amounts in column negative amounts). Enter each to Schedule D, line 1b (if Box A abov above is checked), or line 3 (if Box	tal here and inc e is checked), li	lude on your ne 2 (if Box B	1,395.	1,209.			186.	

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

SCHEDULE	Ε
(Form 1040)	

						I Income and Loss						OMB N	OMB No. 1545-0074	
(Form 1040) (From rental real estate, royalties, partnersh							corpora	ations, e	estates,	trusts, REM	IICs, etc.)	9	@21	
Departm	ent of the Treasury				ach to Form 1040							ے Attach		
	Revenue Service (99)			Go to www.irs.	gov/ScheduleE f	or inst	ructions	and the	e latest	information		Seque	nce No. 13	
,	shown on return											al security		
	AVAN NARAS.											5-961	-	
Part					Estate and Ro	-		•			• •	-		
				•	an individual, rep									
					Ild require you to		. ,							
					n(s) 1099? t, city, state, ZIF							. L Y		
<u>1a</u>				1 1 2 1	AR BANGALOR		*) IN 560	1022						
B	NO 6, DAS.	APPA	GAR.	DEN KI NAG	AR BANGALUI	<u>رت</u> .	111 300	JU32						
1b	Type of Prop	pertv	2	For each renta	al real estate prop	oertv l	isted		Fair	Rental	Persona	IUse		
	(from list be		_	above, report	the number of fa days. Check the e requirements to	ir rent	al and			ays	Day		QJV	
Α	3			if you meet the	ays. Check the erequirements to	QJV b o file a	ox only	Α		344		0		
В				qualified joint	venture. See inst	ructio	ns.	В						
С	1							С						
Туре	of Property:						I					I		
1 Sing	gle Family Resid	dence	3	Vacation/Sho	rt-Term Rental	5 La	nd		7 Self-	Rental				
2 Mul	ti-Family Reside	ence	4	Commercial		6 Ro	yalties		8 Othe	r (describe)			
Incom					Properties:			Α		E	3		С	
3	Rents received					3			780.					
4	Royalties recei	ived .				4								
Expen						_								
5	Advertising .					5			120.					
6	Auto and trave	-				6			240.					
7	Cleaning and r					7			650.					
8 9	Commissions.					8								
9 10	Insurance Legal and othe					10								
11	Management f	-				11		1	000.					
12	Mortgage inter					12		±,	000.					
13	Other interest.	-				13								
14	Repairs					14		3.	800.					
15	Supplies					15			900.					
16	Taxes					16		,						
17						17		2,	200.					
18	Depreciation e					18								
19	Other (list) 🕨					19								
20	Total expenses	s. Add I	lines	5 through 19		20		10,	910.					
21	Subtract line 2	0 from	line 3	3 (rents) and/or	4 (royalties). If									
	result is a (loss	s), see i	instru	actions to find	out if you must									
	file Form 6198					21		-10,	130.					
22					nitation, if any,									
	on Form 8582	-		-		22	(10,1	.30.)	()	()	
23a					r all rental prope				23a		780.			
b					r all royalty prop				23b					
C d					or all properties		• •		23c					
d					or all properties				23d		0 010			
е 24					or all properties n line 21. Do no		 Ide anv		23e	_	. 24			
24 25					rental real estate		-		nter totr			(10,130.)	
												\	±0,±30.)	
26					ome or (loss). page 2 do not									
					e, include this a								-10,130.	

-10,130.