Page 1

2021 Virginia Nonresident Income Tax Return Due May 1, 2022

Enclose a complete copy of your federal tax return and all other required Virginia enclosures.

First Name	7		MI	Last Name	т	Suffi	х	Your Soc			-	mber			1 1 1	heck eceas	
SURYANARAYANA RAJU				NADUMPALL	ıΤ	325-33-0440 Suffix Spouse's Social Secu											
Spouse's First	Name (Filing Status 2 C	nly)	MI	Last Name		Suffi	x	Spouse's	s Soc	iai Se	ecurit	y Num	ber			check eceas	
	Address (Number and S		oute)					Birth Date	- 1	1 1	_	2 2	2 -	1 9 9	6		
		APT 305		T _	T		(11111)	-dd-yyyy)	,								
City, Town or Po	ost Office			State	ZIP Code	Spc		Birth Date -dd-yyyy)	- 1		-		-				
DALLAS State of Reside	ince	Important -	Name	TX of Virginia City or	75252	rincin				emnlo	ovme	ent ori	ncom	e source	Locality	, Coo	
	ince	is located.		,	County in winding	лпсір	ai piao	e or busin	1033, 1	empio	_			_	,	, 000	10
TX		VIRGIN	IA	BEACH								City C	R ∟	County 8	310		
	Amended Return Reason Code Check Applicable Boxes Amended Return Reason Code Name(s) or Address Different than Shown on 2020 VA Return Flo Cl							/ersea	as on	Due Date	•						
БОХ	De	pendent on An	othe	r's Return [Qualifying Fa			erman, d	or	E	IC C	laime	d on	federal re			
					- Moronant oc					\$_					.00		
Filing S	tatus Enter Filing St	atus Code in b	ox b	elow.			Exemp						2. En	iter the su	m on L	ine	12.
•	1 = Single. Federal						You	Spot Filing 2 c	Status or 3	Dep	pende	ents			Total S	Section	on 1
1	2 = Married, Filing 3 = Married, Spous						1	+] .	+		= [1	X \$930 =	=	930	0
_ (4 = Married, Filing			Tominally Council			You 6	J ∟ 5 Spouse er orove		∟ You Blind	Spc Bli	L ouse ind			Total	Secti	on 2
If Filing S	Status 3 or 4, enter sp	ouse's SSN in th	ne Sp	ouse's Social Se	curity Number			1+	Ĭ ₊ [. F			X \$800 =	_		\neg
box at to	p of form and enter Sp	ouse's Name_]]		' L			Α φουυ -			
1 Adjuste	d Gross Income from	ı federal return	ı - No	ot federal taxable	e income								1		561	93	00
2 Addition	s from Schedule 76	3 ADJ, Line 3.										2	2				00
3 Add Lir	nes 1 and 2											3	В		561	93	00
	duction (See instruct				heet)						You	48	a				00
on Line	rth Dates above. En 4a and Your Spouse	ter Your Age D 's Age Deduct	eauc ion o	n Line 4b						. Spo	use	41					00
5 Social S	Security Act and equi	valent Tier 1 R	ailro	ad Retirement A	ct benefits repo	ted o	n you	r federal	retu	rn		Ę	5				00
6 State in	come tax refund or c	verpayment cı	edit	reported as inco	me on your fede	eral re	eturn.					6	6				00
7 Subtrac	tions from Schedule	763 ADJ, Line	7									7	7				00
8 Add Lir	nes 4a, 4b, 5, 6, and	7										8	3				00
9 Virginia	Adjusted Gross In	come (VAGI).	Sub	tract Line 8 fro	m Line 3							(9		561	93	00
10 Itemized	d Deductions from Vi	rginia Schedul	еA,	if applicable. Se	e instructions							10					00
11 If you do	o not claim itemized	deductions on	Line	10, enter standa	ard deduction. S	See ir	nstruct	ions				1′	1		45	00	00
12 Exempt	ion amount. Enter th	e total amount	from	the Exemption	Sections 1 and	2 abo	ve					12	2		9	30	00
13 Deducti	ons from Schedule 7	63 ADJ, Line 9	9									13	3				00
14 Add Lir	nes 10, 11, 12 and 1	3										14	1		54	30	00
15 Virginia	Taxable Income con	nputed as a res	siden	t. Subtract Line	14 from Line 9.							15	5		507	63	00
16 Percent	age from Nonresider	nt Allocation Se	ectio	n on Page 2 (En	ter to one decim	al pla	ace on	ly)				16	6		56	5.3	%
17 Nonresi	dent Taxable Income	e. (Multiply Line	e 15	by percentage o	n Line 16)							17	7		285	80	00
18 Income	Tax from Tax Table of	or Tax Rate Sc	hedu	le								18	3		13	86	00
Va. Dept. of Ta 2601044 Rev	xation For Local U	se LTD		\$										XXX	XX		



2021 FORM 763 Page 2

	FORM 763 Page 2									
Your N	lame YANARAYANA RAJU NADUMPALLI	Your SSN 325-33-0440								
19a	Your Virginia income tax withheld. Enclose Fo		VK-1		. 19a		1491	00		
19b	Spouse's Virginia income tax withheld. Enclose	se Forms W-2, W-2G, 1099,	, and VK-1.		. 19b			00		
20	2021 Estimated Tax Payments				. 20			00		
21	2020 overpayment credited to 2021 estimated	d tax			. 21			00		
22										
23	Credit for Low-Income Individuals or Virginia							00		
24	Total credits from Schedule OSC							00		
25	Credits from Schedule CR, Section 5, Line 14							00		
26	Total payments and credits. Add Lines 19						1491	+		
	• •	•					1491	00		
27	If Line 18 is larger than Line 26, enter the diffe							+		
28	If Line 26 is larger than Line 18, enter the diffe						105			
29	Amount of overpayment on Line 28 to be CRED							00		
30	Virginia529 and ABLE Contributions from Sch							00		
31	Other Voluntary Contributions from Schedule	VAC, Section II, Line 14			. 31			00		
32	Addition to Tax, Penalty, and Interest from en				. 32			00		
33	Sales and Use Tax is due on Internet, mail ord See instructions				33			00		
34	Add Lines 29 through 33				. 34			00		
35	If you owe tax on Line 27, add Lines 27 and 3 Line 34 is larger than Line 28, enter the difference www.tax.virginia.govCheck here if pay	ence. AMOUNT YOU OWE	. Enclose	payment or pay at	35			00		
36	If Line 28 is larger than Line 34, subtract Line 3				_ 36		105	00		
	Direct Deposit section below is not completed,						103	, , , ,		
DIREC	T BANK DEPOSIT Your Bank Routing T	ransit Number	Your Bank	Account Number Ch	ecking	X S	Savings			
	ernational Deposits 1 1 1 0 0	0 6 1 4 5	9 3	1 8 8 7 8 9	9					
Non	resident Allocation Percentage			A - All Sources		B - Virg	inia Sources	<u> </u>		
1.	Wages, salaries, tips, etc		1 [62193	3 00		31610	00		
2.	Interest income		2		00			00		
3.	Dividends		3		00			00		
4.	Alimony received.		4		00			00		
5.	Business income or loss		5		00			00		
6.	Capital gain or loss/capital gain distributions		6		00			00		
7.	Other gains or losses		-		00			00		
8.	Taxable pensions, annuities and IRA distribution		F		00					
	Rents, royalties, partnerships, estates, trusts,		-	-6000			0	00		
	Farm income or loss				00			00		
11.	Other income.		-		00			00		
	Interest on obligations of other states from Sch	•	-		00			00		
	Lump-sum and accumulation distributions inclu	•	H		00			00		
	TOTAL - Add Lines 1 through 13 and enter each Nonresident allocation percentage - Divide Lin		-	56193	3 00		31610	00		
	percentage to one decimal place (e.g., 5.4%).						56.3%	6		
	We) authorize the Dept. of Taxation to discuss this	• • • • •		I agree to obtain my Form						
	Ve), the undersigned, declare under penalty provided by language.	aw that I (we) have examined this	Your Phone		ge, it is a tr	ue, correct, a	nd complete retu	urn.		
Tour S	gnature			739-8160	Date					
Spouse	o's Signature (If a joint return, both must sign)			none Number	Preparer P020	s PTIN 82703	Vendor Code			
	· ·	r Yours if Self-Employed)		hone Number	Filing Ele	ection Code	ID Theft PIN			
SYAM	PRIYA RAM SAGAR GUPTA TALLAM GLOBAL	TAXES LLC	(678)	965-9522	7					

2021 Schedule INC/CG

325330440

Report all W-2s, 1099s & VK-1s with VA Withholding

SURYANARAYAN

NADUMPALLI



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
325330440	W	1358.	410404230	30410404230F001	28947.
325330440	W	133.	410404230	30410404230F001	2663.

Total VA Withholding

You

325330440

Spouse

Total # of W-2s,1099s & VK-1s

02

VA-8879
Virginia Department of Taxation

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2021

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virginia Submission Identification Number (SID)		
Your Name	B Your Social Sec	urity Number
SURYANARAYANA RAJU NADUMPALLI	325-33-04	
Spouse's Name	A Spouse's Socia	Security Number
Part I Tax Return Information	A Spouse	B Yourself
1. Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		56193.
2. Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		56193.
3. Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		28580.
4. Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		1386.
5. Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		1491.
6. Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)		
7. Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		105.
Part II Declaration of Taxpayer and Signature Authorization		
Under penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying s December 31, 2021, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding line filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full an liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber signature pen, or computer software program.	e information I provided number or individual tax es of my electronic incor d timely payment of my ce Provider to transmit r and, if applicable, the di directly involve a finance	to my Electronic and total dentification me tax return. If I am tax liability, I remain my complete return to irect deposit of my cial institution outside
Taxpayer's e-File PIN: check one box only		
I authorize the ERO named below to enter my e-File PIN 3 0 4 4 0 as my signature on my 2021 e-file Do not enter all zeros	ed Virginia individual inc	ome tax return.
GLOBAL TAXES LLC		
ERO Firm Name		
I will enter my e-File PIN as my signature on my 2021 e-filed Virginia individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN
Your Signature Date		
Spouse's e-File PIN: check one box only		
I authorize the ERO named below to enter my e-File PIN as my signature on my 2021 e-file Do not enter all zeros	ed Virginia individual inc	ome tax return.
ERO Firm Name		
I will enter my e-File PIN as my signature on my 2021 e-filed Virginia individual income tax return. Check this box and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-File PIN
Spouse's Signature Date		
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 6	1 9 8 9	
Do not enter all I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2021 Virginia individual income above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Electronic Filers of Individual Income Tax Returns (Tax Year 2021). EROs may sign the form using a rubber stamp, mechapen, or computer software program.	tax return for the taxpay Virginia's publication Ha nanical device, such as	ndbook for
ERO's Signature Date03-3	T-77	

£1040

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

2021

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly [bu checked the MFS box, enter the reson is a child but not your depender	— name of	ed filing separately your spouse. If you	` ,	_		,	_	, ,	` , ` ,	
Your first name	and m	iddle initial	Last na	ame					Your so	cial securi	ity number	
SURYANA	RAYA	NA RAJU	NAD	UMPALLI					325-33-0440			
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	e instruct	ions.				Apt. no.	1		ion Campaigr	
19251 P					1.			305		ere if you if filing ioi	, or your ntly, want \$3	
City, town, or p DALLAS	ost offi	ce. If you have a foreign address, also co	omplete :	spaces below.	Sta T2			code 5252	to go to	0,	Checking a	
Foreign countr	y name			Foreign province/sta	te/coun	ty	Fore	eign postal code	your tax	your tax or refund. You Spouse		
At any time du	ring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	any fina	ancial intere	st in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction		neone can claim:				'	nt					
Age/Blindnes	You	: Were born before January 2, 1	1957	Are blind S	pouse	: Was l	oorn be	efore January 2	2, 1957	☐ Is b	lind	
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relation	nship	(4) ✓ if q	ualifies for	(see instru	uctions):	
If more	(1) F	irst name Last name		number		to you	ı	Child tax c	redit	Credit for o	ther dependents	
than four												
dependents, see instruction	s ——											
and check												
	. 1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		62,193.	
Attach		Tax-exempt interest	2a		 h Т	axable inter	eet		2b		02,100.	
Sch. B if	3a	Qualified dividends	3a		b Taxable interestb Ordinary dividendb Taxable amount .				3b			
required.	4a	IRA distributions	4a						. 4b			
	5a	Pensions and annuities	5a			axable amo			. 5b			
Standard	6a	Social security benefits	6a		b T	axable amo	unt .		. 6b			
Deduction for —	7	Capital gain or (loss). Attach Sche	edule D	if required. If not re	auired	. check here	e .	▶ [7			
and check here ▶ ☐ Attach Sch. B if required. Standard Deduction for — Single or Married filing separately, \$12,550 Married filing	8	Other income from Schedule 1, lir				,			. 8		-6,000.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		This is vour total ir	ncome				▶ 9		56,193.	
	10	Adjustments to income from Sche		•					. 10			
jointly or Qualifying	11	Subtract line 10 from line 9. This i			ome				▶ 11		56,193.	
widow(er),	12a	Standard deduction or itemized	•	-		-	12a	12,55	0.			
\$25,100 • Head of	b	Charitable contributions if you take		,			12b	30	0.			
household, \$18,800	С	Add lines 12a and 12b							. 120	:	12,850.	
∮18,800 If you checked	13	Qualified business income deduct		n Form 8995 or Fo	rm 899	05-A			. 13			
any box under Standard	14	Add lines 12c and 13							. 14		12,850.	
Deduction,	15	Taxable income. Subtract line 14	l from lii	ne 11. If zero or les	s, ente	er -0			. 15		43,343.	

	16	Tax (see instructions). Check if any from Form(s): 1	8814 2 4972	3 🗌	[16	5,280.
	17	Amount from Schedule 2, line 3			[17	
	18	Add lines 16 and 17				18	5,280.
	19	Nonrefundable child tax credit or credit for other dep	endents from Schedul	e 8812	[19	
	20	Amount from Schedule 3, line 8			[20	
	21	Add lines 19 and 20			[21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-			[22	5,280.
	23	Other taxes, including self-employment tax, from Sch	nedule 2, line 21 .		[23	0.
	24	Add lines 22 and 23. This is your total tax			. ▶	24	5,280.
	25	Federal income tax withheld from:					
	а	Form(s) W-2		25a 9,	973.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c			[25d	9,973.
If you have a	26	2021 estimated tax payments and amount applied from		.,	[26	
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)	No	27a			
attach Sch. Elc.		Check here if you were born after January 1, 1 January 2, 2004, and you satisfy all the other					
		taxpayers who are at least age 18, to claim the EIC.					
	b	Nontaxable combat pay election	7b				
	С	Prior year (2019) earned income	?7c				
	28	Refundable child tax credit or additional child tax credi	t from Schedule 8812	28			
	29	American opportunity credit from Form 8863, line 8 .		29			
	30	Recovery rebate credit. See instructions		30			
	31	Amount from Schedule 3, line 15		31			
	32	Add lines 27a and 28 through 31. These are your total	al other payments and	d refundable credit	s ▶	32	
	33	Add lines 25d, 26, and 32. These are your total payn	nents		. ▶	33	9,973.
Refund	34	If line 33 is more than line 24, subtract line 24 from line $\frac{1}{2}$	ne 33. This is the amou	ınt you overpaid	[34	4,693.
	35a	Amount of line 34 you want refunded to you. If Form		eck here	▶ □ [35a	4,693.
Direct deposit?	►b	Routing number 1 1 1 0 0 0 6 1 4	▶ c Type: 🔀	Checking Sa	vings		
See instructions.	►d	Account number 5 9 3 1 8 8 7 8 9					
	36	Amount of line 34 you want applied to your 2022 est	timated tax >	36			
Amount	37	Amount you owe. Subtract line 33 from line 24. For	details on how to pay,	see instructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions)		38			
Third Party Designee		you want to allow another person to discuss this ructions	return with the IRS?	. —	nplete be	elow.	X No
	De	ignee's	Phone		al identific		
	nar	ne ►	no. ►	numbe	r (PIN)		
Sign		er penalties of perjury, I declare that I have examined this retuef, they are true, correct, and complete. Declaration of prepare					
Here	Yo	r signature Date	Your occupation		If the I	RS sen	t you an Identity
	k				- 1	_	N, enter it here
Joint return? See instructions.				L ENGINEER	(see in	_ · _ L	
Keep a copy for	Sp	use's signature. If a joint return, both must sign.	Spouse's occupation	tion			t your spouse an ction PIN, enter it here
your records.					(see in	_	
	Ph	ne no. (979)739-8160 Email ad	Idress SIJRYA RAJ	U@TAMU.EDU			
		parer's name Preparer's signature	231111_1410		PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SA	GAR GUPTA TALLAM	I 03/31/2022 P	02082	703	Self-employed
Preparer		n's name ► GLOBAL TAXES LLC		1	Phone		678)965-9522
Use Only	Firm's address > 2530 Pebble Creek Ln Cumming GA 30041 Firm's E						30-1017196
Go to www ire a		1040 for instructions and the latest information.	BAA	REV 03/26/22 PRO	1 /		Form 1040 (2021)
20 to 11 11 11 11 3.91	C V / 1 O 1 1 1	. 5 . 5	DAA	NL V 03/20/22 FRU			10 10 10 (2021)

Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

SURYANARAYANA

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

RAJU

NADUMPALLI

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

Your social security number 325-33-0440

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, truschedule E		5	-6,000.
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		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR line 8	040, 1040-SR, or	10	6,000

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 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

RAJII NADIIMPALLI

Your social security number

	ANARAYANA RAJU		111		16				<u> 25-33-</u>		
Part	Schedule C. See	s From Rental Real Estate and Roy instructions. If you are an individual, repo	ort farı	m rental i	ncome	or loss f	rom Form 48	35 or	n page 2,	line 40).
		ents in 2021 that would require you to									es 🗵 No
B If "		ou file required Form(s) 1099?								□ Y	es 🗌 No
1a		each property (street, city, state, ZIP									
A											
В											
C											
1b	Type of Property	2 For each rental real estate prop	erty I	isted		_	Rental	Per	rsonal U	Ise	QJV
	(from list below)	above, report the number of fair personal use days. Check the	ir rent ດ.IV h	al and			Days		Days		
A	3	if you meet the requirements to) file a	is a	Α_		365		0	1	
В		qualified joint venture. See inst	ructio	ns.	В						
C					С						
	of Property:										
	gle Family Residence	3 Vacation/Short-Term Rental	5 La	nd		7 Self-	Rental				
	ti-Family Residence		6 Ro	yalties		8 Othe	r (describe)			
Incom		Properties:			Α		E	3			С
3			3			450.					
4	Royalties received .		4								
Exper											
5			5								
6		nstructions)	6								
7		nance	7		1	,150.					
8	Commissions		8								
9			9								
10		essional fees	10								
11			11			800.					
12		id to banks, etc. (see instructions)	12								
13			13								
14	Repairs		14			,500.					
15			15		1	,200.					
16			16								
17			17		1	,800.					
18		e or depletion	18								
19	Other (list)		19								
20	•	lines 5 through 19	20		6	,450.					
21	Subtract line 20 from	line 3 (rents) and/or 4 (royalties). If									
	• • •	instructions to find out if you must									
	file Form 6198		21		-6	,000.					
22		I estate loss after limitation, if any,		,			,				
	•	structions)	22	[(6,	000.)	()(
23a		eported on line 3 for all rental proper				23a		4	50.		
b		eported on line 4 for all royalty prope	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		6,4			
24	•	e amounts shown on line 21. Do no		-					24		
25	Losses. Add royalty lo	esses from line 21 and rental real estate	losse	s from lir	ne 22. I	enter tota	al losses her	е.	25 (6,000.
26		ate and royalty income or (loss).									
		V, and line 40 on page 2 do not		-							C 000
	Schedule 1 (Form 10)	40) line 5. Otherwise include this ar	nauni	t in the t	otal or	1 line 41	on page 2		26		-6.000.