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

| - Internal n | levellue del vice | | | | | | | | |
|---|--|---|--|--|--|---|--|--|--|
| Submis | ssion Identification Number (SID) | | | | | | | | |
| Taxpayer | r's name | | Social se | curity nur | nber | | | | |
| KUSH | WANTH GONDI | | 299-95-1221 | | | | | | |
| Spouse's | s name | | Spouse's social security number | | | | | | |
| Part | Tax Return Information — Tax Year Ending December 31, 202 | 1 (Enter | vear vo | u are a | uthor | izina) | | | |
| | whole dollars only on lines 1 through 5. | ı (Lintoi | year ye | u aic a | atrior | Zii ig.) | | | |
| | Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. | | | | | | | | |
| | Adjusted gross income | | | . 1 | | 2, | 908. | | |
| | Total tax | | | | | | 0. | | |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | | . 3 | | | 4. | | |
| 4 | Amount you want refunded to you | | | . 4 | | | 4. | | |
| 5 | Amount you owe | | | . 5 | | | | | |
| Part I | Taxpayer Declaration and Signature Authorization (Be sure you g | et and k | ceep a c | opy of | your | retur | n) | | |
| to send for any of Agent to payment authorize payment business taxes to persona | original or amended) I am now authorizing. I consent to allow my intermediate service provided my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reast delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorous initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution act of my federal taxes owed on this return and/or a payment of estimated tax, and the financial action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the transport of the payment (settlement) date. I also authorize the financial institutions involved the confidential information necessary to answer inquiries and resolve issues related all identification number (PIN) below is my signature for the income tax return (original or amenic Funds Withdrawal Consent. | son for rejective the Unicount indicated institution terminated attorning the Unicount in the | ection of the S. Treasu cated in the cated in the cate of the authors of the cate of the c | ne transh ry and its he tax pr the entrorization. It be rec g of the further | nission s desig eparati y to thi To re eived relectro acknow | , (b) the nated F on soft s accou voke (c no later nic pay vledge | e reason Financial ware for unt. This ancel) a r than 2 rment of that the | | |
| | yer's PIN: check one box only | | | | | | | | |
| X | l authorize GLOBAL TAXES LLC to enter or c | generate i | my PIN | 5 1 | 2 2 | | as my | | |
| | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | | , | Enter fiv don't en | | | · | | |
| | I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below. | | | | | | | | |
| Your si | gnature ▶ | Date ► _ | | | | | | | |
| Spouse | e's PIN: check one box only | | | | | | | | |
| | I authorize to enter or o | nenerate i | mv PIN | | | | as my | | |
| | ERO firm name | , 5. 15. 6. 6. | , | Enter fiv | e digits | , but | a.c, | | |
| | signature on the income tax return (original or amended) I am now authorizing. | | | don't en | ter all z | eros | | | |
| | I will enter my PIN as my signature on the income tax return (original or amende if you are entering your own PIN and your return is filed using the Practitioner F below. | | | | | | | | |
| Spouse | e's signature ► [| Date ► | | | | | | | |
| | Practitioner PIN Method Returns Only—continu | e below | | | | | | | |
| Part II | 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 | 5 1 | 9 8 | 9 | | |
| | | | Don't | enter all | zeros | | | | |
| authoriz | that the above numeric entry is my PIN, which is my signature for the electronic individual red to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provents | am subm | itting this | return ir | accor | dance | | | |
| ERO's | signature ► [| Date ► | | | | | | | |
| | ERO Must Retain This Form — See Instruc | tions | | | | | | | |
| | Don't Submit This Form to the IRS Unless Request | | o So | | | | | | |

Department of the Treasury-Internal Revenue Service (99)
U.S. Nonresident Alien Income Tax Return

Department of the Treasury-Internal Revenue Service (99)

OMB No. 1545-0074

OMB No. 1545-0074

OMB No. 1545-0074

| IUTU | | U.S. Nonresident | Allen | Income Tax | Return | | ■ I OM | B No. 15 | 45-0074 | or sta | aple in this | space. |
|----------------------------------|------------|---|------------|-----------------------------|---------------|----------------|----------------------|----------|-----------------|---------|---------------------|----------|
| Filing Status | | Single Married filing | • | , , , | Qualifyin | g widow(er) | (QW) | | • | | | |
| Check only one box. | | ou checked the QW box, enter the alifying person is a child but not y | | | | | | | | | | |
| Your first name | and m | niddle initial | La | st name | | | | | Your ide | | | nber |
| KUSHWANTH | [| | GC | ONDI | | | | | 299- | 95- | 1221 | |
| Home address (| numb | er and street or rural route). If yo | u have a | a P.O. box, see inst | ructions. | | Apt. ı | 10. | Check if | : X | Individ | ual |
| 1701 E 12 | | | | | | | W141 | Η | | | Estate | or Trust |
| City, town, or pos | st offic | ce. If you have a foreign address, al | so comp | olete spaces below. | State | ZIF | code | | | | | |
| CLEVELAND | | | | | OH | | 114 | | | | | |
| Foreign country | name |) | Foreig | n province/state/co | ounty | Foi | reign posta | al code | | | | |
| At any time duri | ng 20 | 21, did you receive, sell, exchance | je, or otl | herwise dispose of | any financ | ial interest i | in any virtu | al curre | ncy? | | Yes | X No |
| | | , , | , , , , , | | | | | | | | | |
| | | | | | | | | | | | | |
| Dependents | 1 | | | (2) Depen | dent's | (3) Dene | endent's | , , | 🗸 if qual | ١, | , | , |
| (see instructions): | | (1) First name Last na | | | | | ationship to you Chi | | nild tax credit | | Credit fo depend | |
| | | | | | | | | | | | |] |
| f more than four dependents, see | | | | | | | | | | | |] |
| nstructions and | | | | | | | | | | | |] |
| check here ► | | | | | | | | | | | |] |
| Income | 1a | Wages, salaries, tips, etc. Attack | n Form(s | s) W-2 | | | | | . 1a | | 2, | 599. |
| Effectively | b | Scholarship and fellowship gran | ts. Attac | ch Form(s) 1042-S | or required | statement. | See instru | ctions | . 1b | | | |
| Connected | С | Total income exempt by a treat | y from S | Schedule OI (Form | 1040-NR), | , Item | | | | | | |
| With U.S. | | L, line 1(e) | | | | . 10 | ; | | | | | |
| Trade or | 2 a | Tax-exempt interest | 2a | | b Taxa | able interest | t | | . 2b | | | |
| Business | 3a | Qualified dividends | 3a | | b Ordi | inary divide | nds | | . 3b | | | |
| | 4a | IRA distributions | 4a | | b Taxa | able amoun | t | | . 4b | | | |
| | 5a | Pensions and annuities | 5a | | b Taxa | able amoun | t | | . 5b | | | |
| | 6 | Reserved for future use | | | | | | | . 6 | | | |
| | 7 | Capital gain or (loss). Attach Sch | | | | | | | | | | 309. |
| | 8 | Other income from Schedule 1 (| | , . | | | | | | | | |
| | 9 | Add lines 1a, 1b, 2b, 3b, 4b, 5b, | 7, and 8 | 8. This is your tota | I effectivel | y connecte | ed income | ! | 9 | | 2, | 908. |
| • | 10 | Adjustments to income: | | | | | | | | | | |
| | a | From Schedule 1 (Form 1040), li | | | | . 10 | | | _ | | | |
| | b | Reserved for future use | | | | | | | | | | |
| | С. | Scholarship and fellowship gran | | | | | | | | | | |
| | d | Add lines 10a and 10c. These ar | | | | | | ! | 10d | | | 000 |
| | 11 | Subtract line 10d from line 9. Th | , | | | | | ' | 11 | | | 908. |
| • | 12a | Itemized deductions (from Scresidents of India, standard ded | uction. S | See instructions Sto | Dedn US/India | Treaty 12 | | 12,55 | 0. | | | |
| | b | Charitable contributions for certa | ain resid | lents of India. See i | nstructions | . 121 | b | | | | | |
| | С | | | | | | | | . 12c | \perp | <u>12,</u> | 550. |
| • | 13a | Qualified business income dedu | | | | | | | | | | |
| | b | Exemptions for estates and trus | • | | | . 131 | b | | | | | |
| | С | Add lines 13a and 13b | | | | | | | . 13c | 1 | | |

Add lines 12c and 13c

Taxable income. Subtract line 14 from line 11. If zero or less, enter -0- .

12,550.

0._

14

15

| Form 1040-NR (2 | 2021) | | | | | | | | | Page 2 |
|-------------------------|---|---|----------------------|------------------|-------------------|-----------------|---------------------------|----------|---------------|---------------|
| | 16 | Tax (see instructions). Check if | any from Form | (s): 1 88 | 14 2 4972 | 2 3 🗌 | | 16 | | 0. |
| | 17 | Amount from Schedule 2 (Form | n 1040), line 3 | | | | | 17 | | 0. |
| | 18 | Add lines 16 and 17 | | | | | | 18 | | 0. |
| | 19 | Nonrefundable child tax credit | or credit for o | ther depender | its from Schedule | 8812 (Form 104 | 0) | 19 | | |
| | 20 | Amount from Schedule 3 (Form | n 1040), line 8 | | | | | 20 | | |
| | 21 | Add lines 19 and 20 | | | | | | 21 | | |
| | 22 | Subtract line 21 from line 18. It | f zero or less, | enter -0 | | | | 22 | | 0. |
| | 23a | Tax on income not effectively from Schedule NEC (Form 104 | , | | | 23 a | | | | |
| | b | Other taxes, including self-em line 21 | | | · / / | 23b | | | | |
| | С | Transportation tax (see instruc | tions) | | | 23c | | | | |
| | d | Add lines 23a through 23c . | | | | | | 23d | | |
| | 24 | Add lines 22 and 23d. This is y | our total tax | | | | . ▶ | 24 | | 0. |
| | 25 | Federal income tax withheld fr | om: | | | | | | | |
| | а | Form(s) W-2 | | | | 25a | 4. | | | |
| | b | Form(s) 1099 | | | | 25b | | | | |
| | С | Other forms (see instructions) | | | | 25c | | | | |
| | d | Add lines 25a through 25c . | | | | | | 25d | | 4. |
| | е | Form(s) 8805 | | | | | | 25e | | |
| | f | Form(s) 8288-A | | | | | | 25f | | |
| | g | Form(s) 1042-S | | | | | | 25g | | |
| | 26 | 2021 estimated tax payments | and amount a | pplied from 20 | 20 return | | | 26 | | |
| | 27 | Reserved for future use | | | | 27 | | | | |
| | 28 | Refundable child tax credit o 8812 (Form 1040) | | hild tax credit | | 28 | | | | |
| | 29 | Credit for amount paid with Fo | rm 1040-C | | | 29 | | | | |
| | 30 | Reserved for future use | | | | 30 | | | | |
| | 31 | Amount from Schedule 3 (Forn | | | | 31 | | | | |
| | 32 | Add lines 28, 29, and 31. Thes | ,. | | | | . ▶ | 32 | | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 2 | | | | | | 33 | | 4. |
| Refund | 34 | If line 33 is more than line 24, | | | | | | 34 | | 4. |
| | 35a | • | | | | , . | | 35a | | 4. |
| Direct deposit? | ▶b | | | | | | | | | |
| See instructions. | ▶d | Account number 6 9 6 | | | - 1 1 T | | 3. | | | |
| | ▶ e | If you want your refund check enter it here. | mailed to an a | address outsid | | es not shown on | page 1, | | | |
| | 36 | Amount of line 34 you want ap | polied to vour | 2022 estimate | ed tax . ► | 36 | | | | |
| Amount | 37 | Amount you owe. Subtract lin | | | | | . ▶ | 37 | | |
| You Owe | 38 | Estimated tax penalty (see inst | | | | 38 | | | | |
| Third Party Designee | • | ou want to allow another structions | person to di | scuss this re | eturn with the II | RS? | Complete b | pelow. | ⊠ No | |
| Designee | Design name | | | Phone no. ▶ | | | nal identific er (PIN) | ation | | |
| Sign | name ► no. ► number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on the preparer (other t | | | | | | | | | |
| Here | Your s | signature | | Date | Your occupation | | If the | IRS ser | nt you an Id | dentity |
| | | | | Tour occupation | | | Prote | ction Pl | N, enter it I | |
|] | <u> </u> | | | | SOFTWARE E | NGINEER | (see ir | nst.) ▶ | | |
| | Phone | | | Email addres | s | , | | | | |
| Paid | Prepa | rer's name | Preparer's si | gnature | | Date | PTIN | | Check if: | |
| Preparer | SYAM P | RIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TALLAM | 04/17/2022 | P02082 | 703 | Self-en | nployed |
| Use Only | | name▶ GLOBAL TAXES | | | | | Phone no | . (67 | 8)965-9 | 9522_ |
| CSC Citiy | Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ► 30-1017196 | | | | | | | | | |

Form 1040-NR (2021)

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Your identifying number

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

► Go to www.irs.gov/Form1040NR for instructions and the latest information. ▶ Attach to Form 1040-NR.

Sequence No. **7B**

| KUS. | HWAN'I'H GONDI | | | | | | | 299-95-12 | 221 |
|--|---|---|--------------|--------------------------|------------------|-------------------------|--|---|-------------|
| Enter a | amount of income und | ler the appropriate rate of tax. See instructions. | | | | | | | |
| | | Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | (d) Other | r (specify) |
| | | Nature of income | | (a) 1070 | | (b) 1370 | (c) 30 70 | % | % |
| 1 | Dividends and divide | end equivalents: | | | | | | | |
| а | Dividends paid by U | .S. corporations | | 1a | | | | | |
| b | Dividends paid by fo | preign corporations | | 1b | | | | | |
| С | Dividend equivalent p | payments received with respect to section 871(m) training | nsactions | 1c | | | | | |
| 2 | Interest: | | | | | | | | |
| а | Mortgage | | | 2a | | | | | |
| b | | orations | | 2b | | | | | |
| С | | | | 2c | | | | | |
| 3 | Industrial royalties (p | patents, trademarks, etc.) | | 3 | | | | | |
| 4 | Motion picture or TV | copyright royalties | | 4 | | | | | |
| 5 | | yrights, recording, publishing, etc.) | | 5 | | | | | |
| 6 | | e and natural resources royalties | | 6 | | | | | |
| 7 | | ties | | 7 | | | | | |
| 8 | | fits | | 8 | | | | | |
| 9 | Capital gain from line 18 below | | | 9 | | | | | |
| 10 | Gambling—Resident | ts of Canada only. Enter net income in column (c). | | | | | | | |
| а | Winnings | | | | | | | | |
| b | Losses | <u> </u> | | 10c | | | | | |
| 11 | Gambling winnings- Note: Losses not all | Residents of countries other than Canada. | | 11 | | | | | |
| 12 | | | | | | | | | |
| | | | | 12 | | | | | |
| 13 | | n 12 in columns (a) through (d) | | 13 | | | | | |
| 14 | | rate of tax at top of each column | | 14 | | | | | |
| 15 | Tax on income not e | ffectively connected with a U.S. trade or business. | | | | | | NR, line 23a ► 15 | |
| | | Capital Gains and | Losses F | From S | Sales or Excha | anges of Propert | У | | |
| within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real | | (b) Date acq mm/dd/yy | | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | (f) LOSS If (e) is more than (d), subtract (d) from (e). | (g) GAIN If (d) is more than (e), subtract (e) from (d). | |
| | | | | | | | | | |
| | | | | | | | | | |
| gains a | y interest; report these nd losses on Schedule D | | | | | | | | |
| (Form 1 | • | | | | | | | | |
| Report | property sales or ges that are effectively | | | | | | | | |
| connec | ted with a U.S. business edule D (Form 1040), | 17 Add columns (f) and (g) of line 16 | | | | | 17 | () | |
| | 797 or both | 18 Capital gain. Combine columns (f) and (g) |) of line 17 | 7 Enter | the net gain her | re and on line 9 abo | ve If a loss ente | er -0- 18 | |

SCHEDULE OI (Form 1040-NR)

Other Information

► Go to www.irs.gov/Form1040NR for instructions and the latest information.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Name shown on Form 1040-NR

► Attach to Form 1040-NR. ► Answer all questions.

Attachment Sequence No. **7C**

Your identifying number

| KUSI | HWANTH GONDI | | 299-95-1221 | | | | | | | | | |
|------|---|--|---|---|---------------------------------------|--|--|--|--|--|--|--|
| Α | Of what country or countries were you a citizen or national during the tax year? INDIA | | | | | | | | | | | |
| В | In what country did you claim residence for tax purposes during the tax year? United States | | | | | | | | | | | |
| С | Have you ever applied to be a | green card holder (lawful p | ermanent resident) | of the United States? . | Yes 🗵 No | | | | | | | |
| D | Were you ever: | ` ` . | , | | | | | | | | | |
| 1. | • | | | | 🗌 Yes 🛛 No | | | | | | | |
| 2. | A green card holder (lawful per | | | | | | | | | | | |
| | If you answer "Yes" to (1) or (2 | , | | | | | | | | | | |
| E | If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax yearF1 | | | | | | | | | | | |
| F | Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? | | | | | | | | | | | |
| | If you answered "Yes," indicate the date and nature of the change ▶ | | | | | | | | | | | |
| G | List all dates you entered and left the United States during 2021. See instructions. | | | | | | | | | | | |
| | Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, check the box for Canada or Mexico and skip to item H | | | | | | | | | | | |
| | Date entered United States mm/dd/yy | Date departed United State mm/dd/yy | es | Date entered United State mm/dd/yy | Date departed United States mm/dd/yy | | | | | | | |
| | | | | | | | | | | | | |
| | | | _ | | | | | | | | | |
| | | | _ | | | | | | | | | |
| | | | | | | | | | | | | |
| Н | Give number of days (including | | | | | | | | | | | |
| | 2019 | , 2020 | , and | 2021 365 | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| ı | Did you file a U.S. income tax | | | | | | | | | | | |
| | If "Yes," give the latest year an | | | | | | | | | | | |
| J | Are you filing a return for a trus | | | | | | | | | | | |
| | If "Yes," did the trust have a U.S. person, or receive a contr | ribution from a U.S. person | ? | | Yes No | | | | | | | |
| K | Did you receive total compens | | • | | | | | | | | | |
| | If "Yes," did you use an alterna | | | • | | | | | | | | |
| L | Income Exempt From Tax—If complete (1) through (3) below | you are claiming exemption. See Pub. 901 for more into | on from income ta formation on tax tre | ax under a U.S. income eaties. | tax treaty with a foreign country, | | | | | | | |
| 1. | Enter the name of the country, amount of exempt income in the | | orm 8833 if required | I. See instructions. | claimed the treaty benefit, and the | | | | | | | |
| | (a) Cou | ntry | (b) Tax treaty artic | cle (c) Number of month claimed in prior tax ye | , , , | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | (e) Total. Enter this amount or | n Form 1040-NR, line 1c. D | o not enter it on lin | e 1a or line 1b | > | | | | | | | |
| 2. | Were you subject to tax in a fo | | | | Yes . No | | | | | | | |
| | Are you claiming treaty benefit | | | | | | | | | | | |
| | If "Yes," attach a copy of the C | | | | | | | | | | | |
| М | Check the applicable box if: | , | | | | | | | | | | |
| | | aking an election to treat in | come from real pro | perty located in the Unite | ed States as effectively connected | | | | | | | |
| | with a U.S. trade or business u | • | | | | | | | | | | |
| 2. | | | | | eal property located in the United | | | | | | | |
| | States as effectively connected with a U.S. trade or business under section 871(d). See instructions | | | | | | | | | | | |

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99)

► 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.

Name(s) shown on return Your social security number 299-95-1221 KUSHWANTH GONDI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 1,357. 309. 1,666. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 309. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

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Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 309. • 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. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

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

2021 Attachment Sequence No. 12A

OMB No. 1545-0074

Internal Revenue Service
Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

KUSHWANTH GONDI

299-95-1221

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

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

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

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

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

| (C) Short-term transactions | • | ٠,, | _ | sis wasn t report | ea to the in | 10 | |
|--|--|--------------------------------|-------------------------------------|---|--|---|--|
| 1 (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis. See the Note below | Adjustment, if If you enter an enter a co See the sep | (h) Gain or (loss). Subtract column (e) | |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g) |
| Robinhood Crypto LLC | 01/01/21 | 05/03/21 | 536. | 426. | | | 110. |
| Robinhood Securities LLC | 01/01/21 | 10/27/21 | 1,130. | 931. | | | 199. |
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| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above is checked), or line 3 (if Box A) | al here and inc is checked), lir | lude on your ne 2 (if Box B | 1 666 | 1 357 | | | 309 |

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.