## 8879 **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

Submission Identification Number (SID) Social security number Taxpayer's name 686-69-3371 VENU KUMAR CHAVVA Spouse's social security number Spouse's name Tax Return Information — Tax Year Ending December 31, 2021 (Enter year you are authorizing.) Part I 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. 91,350. Adjusted gross income . . . . . 1 13,024. 2 2 3 7,256. Federal income tax withheld from Form(s) W-2 and Form(s) 1099 . 3 4 4,232 Amount you want refunded to you 5 Amount you owe Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II Under penalties of perjury, 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 accounts the taxes to receive confidential information accounts. 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 as my X lauthorize GLOBAL TAXES LLC to enter or generate my PIN Enter five digits, but **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 ▶ Spouse's PIN: check one box only to enter or generate my PIN as my I authorize **ERO firm name** Enter five digits, but 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. Date > Spouse's signature ▶ Practitioner PIN Method Returns Only—continue below Certification and Authentication — Practitioner PIN Method Only Part III 8 8 ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros 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. Date ▶ ERO's signature ▶ ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So Form 8879 (Rev. 01-2021) REV 01/17/22 PRO For Paperwork Reduction Act Notice, see your tax return instructions.

person is a child but not your dependent ►  Your first name and middle initial  Last name  CHAVVA  CHAVVA  686-69-3371  If joint name, spouse's first name and middle initial  Last name  CHAVVA  686-69-3371  Spouse's social security number  680-1 N MACARTHUR BLVD  City, town, or post office. If you have a P.O. box, see instructions.  RIVING  Foreign country name  Foreign province/state/county  Foreign province/state/county  Foreign postal code  Your spouse as a dependent  Same uning 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?  Yes No  Standard  Deduction  Someone can claim: You as a dependent Your spouse as a dependent  Spouse itemizes on a separate return or you were a dual-status alien  Dependents (see instructions): (2) Social security in unber to you Child tax credit (veil firm ore than four dependents, see instructions):  If more  If more  If more  If a distributions  At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No  Standard  Dependents (see instructions): (2) Social security to you Child tax credit (redit to credit for other dependent than four dependent shan four dependents, see instructions): (2) Social security in unber to you were a dual-status alien  Attach  Attach  2a	£1040		artment of the Treasury—Internal Revenue Sei S. Individual Income Ta		(99) <b>turn</b>	202	1	OMB No. 1545	-0074	IRS Use Only-	-Do not w	rite or staple	in this space.
If joint return, spouse's first name and middle initial   Last name   Spouse's social security number   Sp	Filing Status Check only one box.	If yo	ou checked the MFS box, enter the	name o	_								
Home address furniber and street), if you have a P.O. box, see instructions.   Apt. no. 2087   208	Your first name	and m	iddle initlal	Last r	name						Your so	clal securit	y number
Home address (number and street). If you have a P.O. box, see instructions.  8021 N MACARTHUR BLVD  2087 City, town, or post office. If you have a foreign address, also complete spaces below.  IRVING Foreign province/state/county Foreign goostal code  Foreign province/state/county Foreign postal code	VENU KU	MAR		CHA	AVVA						686-	69-337	1
City, town, or post office. If you have a foreign address, also complete spaces below.   State   ZIP code   TX   75 06 3   TX   75 06 3   TX   TX   TX   TX   TX   TX   TX	If joint return, s	pouse's	s first name and middle initial	Last r	name						Spouse'	s social sec	curity number
City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  City, town, or post office. If you have a foreign address, also complete spaces below.  TX 75063  TX 75069  TX	Home address	(numbe	er and street). If you have a P.O. box, se	e Instruc	tions.	E		n nina		ENGLANCE BY			THE RESERVE OF THE PARTY OF THE
TRVING Foreign country name    Foreign province/state/county  Foreign postal code   TX   75063   TX   75063   TX   75063   TX   T5063   TX   TX   TX   T5063   TX   TX   TX   TX   T5063   TX   TX   TX   TX   TX   TX   TX   T	8021 N	MACA	RTHUR BLVD										
Foreign province/state/county  Foreign province/state/stouched as a dependent  Pyou bedentate  Foreign province/state/stouched  Foreign province/stouched  Foreign province/state/stouched  Foreign province/stouched  Foreign province/stouched  Foreign province/	AND THE RESERVE OF THE PROPERTY OF THE PROPERT	oost offi	ce. If you have a foreign address, also	complete	spaces be	elow.	370.77	0.00	N-383/ 5	0.60	to go to	this fund.	Checking a
At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?    Yes   No		y name			Foreign p	province/state	count	У	Fore			or refund.	CONTRACTOR OF THE PARTY OF THE
Standard Deduction  Someone can claim: You as a dependent Your spouse as a dependent Deduction  Spouse itemizes on a separate return or you were a dual-status alien  Age/Bilindness You: Were born before January 2, 1957	At any time du	ırina 20	021. did vou receive, sell, exchang	e. or oth	nerwise d	ispose of an	v fina	ncial interest i	n anv	virtual curren	cv?		
Dependents (see instructions):  If more than four dependents, see instructions and check here	Standard Deduction Age/Blindness		Spouse itemizes on a separate reti	um or yo	ou were a	dual-status	alien		n bef	ore January 2.	1957	☐ Is bli	ind
If more than four dependents, see instructions and check here ▶     1		18			<u> </u>		$\neg$					(see instru	ctions):
Image   Imag	200	25000			(2)		<b>'</b>		"P	7.6 PRODUCE 9:156 0:30	1	ALL REPORTS AND ADDRESS OF THE PROPERTY OF THE	AND THE RESERVE TO STATE OF THE PERSON NAMED IN
dependents, see instructions and check here ▶ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	than four										1	7	
See instructions and check here	dependents,				-			n 1	$\neg$	<u> </u>			
Attach Sch. Bif required.  1 Wages, salaries, tips, etc. Attach Form(s) W-2		s							$\neg$				
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Attach Sch. Bif required.  2a		1	Wages, salaries, tips, etc. Attach	Form(s	) W-2 .				Se Eta		1	1 10	00,500.
Sch. B if required.  3a Qualified dividends 3a b Ordinary dividends		2a	E		,		b Ta	axable interest		A I			
RA distributions   4a   b   Taxable amount   .			The same of the sa							Same and the			
Standard beduction for—Single or Married filing separately, \$12,550	requirea.	4a	IRA distributions	4a							4b		
Standard beduction for—Single or Married filing separately, \$12,550  Married filing jointly or Qualifying widow(er), \$25,100 Head of household, \$18,800 If you checked any box under Standard Deduction, and so the standard deduction from Box or Form Box	15	5a	Pensions and annuities	5a									
Capital gain or (loss). Attach Schedule D if required. If not required, check here  7 Capital gain or (loss). Attach Schedule D if required. If not required, check here  8 Other income from Schedule 1, line 10  9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  9 91, 350.  Married filing lointly or Qualifying widow(ef). \$25,100  Head of household, \$128,800  If you checked any box under Standard and Decluction, local files 12c and 13  Qualified business income deduction from Form 8995 or Form 8995-A  10 Julified business income deduction from Form 8995 or Form 8995-A  11 Jif zero or less enter -0-  12 Tayable income. Subtract line 14 from line 11. If zero or less enter -0-	Standard	6a	Social security benefits	6a	, a	1 0 0	b Ta	axable amount		Alagan E	11		
Single or Married filing separately, \$12,550  Married filing lointly or Qualifying Widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$120 and \$120 and \$130 and \$120 and \$130 and \$120 and \$130 and \$13	Deduction for—	7	and the second and th									15-3	
separately, \$12,550  Married fling Jointly or Qualifying Widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$25 and ard Subtract line 10 from line 9. This is your adjusted gross income		8								8	7-	-9.150.	
Married filing Jointly or Qualifying Widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, Joint Poduction, Joint Po	separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income							9			
Subtract line 10 from line 9. This is your adjusted gross income   11   91,350.	Married filing	10	Adjustments to income from Schedule 1, line 26							10		1000	
widow(er), \$25,100  Head of household, \$18,800  If you checked any box under Standard Deduction, \$20,000  Add lines 12c and 13  Add lines 12c and 13  Add lines 12c and 13  Taxable income. Subtract line 14 from line 11. If zero or less enter -0-		11	Subtract line 10 from line 9. This is your adjusted gross income							100		91,350.	
Head of household, \$18,800 tf you checked any box under Standard  Add lines 12a and 12b	widow(er), 12a Standard deduction or itemized deducti												
household, \$18,800 c Add lines 12a and 12b	\$23,100							and the same of th			CERTAIN		
tryou checked any box under Standard  Add lines 12c and 13	household,	19.7	Add lines 10s and 10b								1	12.850	
any box under Standard 14 Add lines 12c and 13	If you checked	1996									_		
Deduction, 15 Tayable income. Subtract line 14 from line 11. If zero or less enter -0-		A Company	Add lines 12c and 13									12,850.	
See HISHUGUOIS.	Deduction,	20075-085-0		4 from I	ine 11. If:			r-0					
	see mistructions.	100				10 14 - 1, 5					100		A September 4

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

Form 1040 (2021

Form 1040 (202	1)			D 2	
	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	Page <b>2</b>	
	17	Amount from Schedule 2, line 3	17	13,024.	
	18	Add lines 16 and 17	18	13,024.	
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	13,024.	
	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	13,024.	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23		
	24	Add lines 22 and 23. This is your total tax	24	13,024.	
	25	Federal income tax withheld from:	24000	13,024.	
	а	Form(s) W-2			
	b	Form(s) 1099			
	C	Other forms (see instructions)			
	d	Add lines 25a through 25a	05.4	17 056	
	26	2021 estimated tax payments and amount applied from 2020 return	25d	17,256.	
If you have a qualifying child,	27a	Formed income and its (FLO)	26		
attach Sch. EIC.	,	Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ▶ □			
	b	Nontaxable combat pay election 27b			
	C	Prior year (2019) earned income 27c	NAME OF THE PARTY		
	28	Refundable child tax credit or additional child tax credit from Schedule 8812 28	<b>国内</b>		
	29	American opportunity credit from Form 8863, line 8			
	30	Recovery rebate credit. See instructions			
	31	Amount from Schedule 3, line 15			
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32		
	33	Add lines 25d, 26, and 32. These are your total payments	33	17,256.	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	4,232.	
. ioiuna	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	35a	4,232.	
Direct deposit?	►b	Routing number 1 2 1 0 0 0 3 5 8	33a	4,232.	
See instructions.	▶d	Account number 3 2 5 0 4 7 5 8 2 5 5 4			
	36	Amount of line 34 you want applied to your 2022 estimated tax ▶ 36	The sales		
Amount	37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions			
You Owe	38	Estimated tax penalty (see instructions)	37	A BLOCK ON THE PARTY OF	
Third Party Designee	Do ins Des	you want to allow another person to discuss this return with the IRS? See tructions	tification r	⊠ No	
Sign	Und	er penalties of periury. I declare that I have examined this return and accompanying schedules and statements, and	to the hea	t of my knowledge	
Here	Dell	r signature    Date   Your occupation   If the property of the part of the property of the part of the	hich preparer has any knowledge.  I the IRS sent you an Identity Protection PIN, enter it here see inst.) ▶		
oint return?		SOFTWARE DEVELOPER (se			
See Instructions. Seep a copy for our records.	Spo	lde lde	If the IRS sent your spouse an Identity Protection PIN, enter it he (see Inst.) ▶		
	Pho	ne no. (510) 501-4417 Email address CHAVVAVENU@GMAIL.COM			
		parer's name Preparer's signature Date PTIN		Check if:	
Paid		July 1111	00700		
	DIMI		82703	Self-employed	
reparer	-				
		's name ► GLOBAL TAXES LLC Ph 's address ► 2530 Pebble Creek Ln Cumming GA 30041 Fir	one no.	(678) 965-9522	

## SCHEDULE 1 (Form 1040)

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

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

VENU KUMAR CHAVVA

Your social security number

	Additional income	1 000	-03-33	/ 1
1	Taxable refunds, credits, or offsets of state and lead to	F-00		
¥4. 2	Taxable refunds, credits, or offsets of state and local income tax  Alimony received		1	
	b Date of original divorce or separation agreement		2a	
74 3	b Date of original divorce or separation agreement (see instructions)  Business income or (loss) Attach Separation	<b>-</b>		
4	Business income or (loss). Attach Schedule C		3	
5	Schedule F	trusts, etc. Attach	4	
6			5	-9,150.
7	Farm income or (loss). Attach Schedule F		6	
8	Unemployment compensation	4 - 4	7	
E	A		10.4	
b	Gambling income	8a (	2	
C	Cancellation of debt	8b		
d	Foreign earned income evaluation to the	8c		
е		8d (	2	
f	Alaska Permanent Fund dividends	8e	100	
g	Jury duty pay	8f	100	
h	Jury duty pay	8g		
1		8h		
i	Activity not engaged in for profit income	8i		
k	Income from the rental of personal property if you engaged in	8j		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	the rental for profit but were not in the business of renting such property	8k		
	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) .			
Z	Other income. List type and amount	8p	0.5	
	A second and	8z		
9	Total other income. Add lines 8a through 8z	(200 M)	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10	040, 1040-SR, or		
For Pap	erwork Reduction Act Notice, see your tax return instructions.		10	-9,150. (Form 1040) 2021

11 Educator expenses 12 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 13 Health savings account deduction. Attach Form 8889 13 Moving expenses for members of the Armed Forces. Attach Form 3903 14 Deductible part of self-employment tax. Attach Schedule SE 15 Self-employed SEP, SIMPLE, and qualified plans 16 Self-employed SeP, SIMPLE, and qualified plans 17 Self-employed health insurance deduction 17 Penalty on early withdrawal of savings 18 Jimony paid 19a Alimony paid 19a Alimony paid 19a Alimony paid 19a Hecipient's SSN 19a Cate of original divorce or separation agreement (see instructions) 19b IRA deduction 20 IRA deduction 21 Student loan interest deduction 22 Reserved for future use 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24 Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l 24b Repayment of supplemental unemployment benefits under the Trade Act of 1974 25 Contributions to section 501(c)(18)(D) pension plans 26 Contributions morriization and expenses 27 Contributions by certain chaplains to section 403(b) plans 28 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 1 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 1 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24d Jeducation Hel Ris for information you provided that helped the IRS detect tax law violations 1 Housing deduction from Form 2555 24d Lega Selection 501 Certain unlawful discrimination claims (see instructions) 24d Jeducation form Form 2555 24d Lega Selection 501 Certain unlawful discrimination claims (see instructions) 24d Jeducation form Form 2555 24d Jeducation form Form 2555 24d Jedu	Par	Adjustments to Income		
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15 Deductible part of self-employment tax. Attach Schedule SE  16 Self-employed SEP, SIMPLE, and qualified plans  17 Self-employed health insurance deduction  18 Penalty on early withdrawal of savings  18 Penalty on early withdrawal of savings  19 Alimony paid  19 Recipient's SSN  10 Date of original divorce or separation agreement (see instructions)  10 IRA deduction  11 Student loan interest deduction  12 Student loan interest deduction  12 Reserved for future use  12 Archer MSA deduction  12 Other adjustments:  13 Jury duty pay (see instructions)  14 Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit  15 C Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l  16 Reforestation amortization and expenses  18 Penalty on early withdrawal of Self-employment benefits under the Trade Act of 1974  19 Contributions to section 501(c)(18)(D) pension plans  10 Contributions to section 501(c)(18)(D) pension plans  11 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)  12 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)  11 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  11 Housing deduction from Form 2555  12 Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)  12 Other adjustments. List type and amount 24z  25 Total other adjustments. Add lines 24a through 24z  26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter	13	Health savings account deduction. Attach Form 8889	13	
16 Self-employed SEP, SIMPLE, and qualified plans	14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	The Ma
17 Self-employed health insurance deduction	15	Deductible part of self-employment tax. Attach Schedule SE	15	
17 Self-employed health insurance deduction	16	Self-employed SEP, SIMPLE, and qualified plans	16	
18 Penalty on early withdrawal of savings  Alimony paid	17		17	x 1== =000;
b Recipient's SSN c 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: a 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   c 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   e 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   24g   h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)   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   24j   j Housing deduction from Form 2555   24j   k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)   24k   20 Other adjustments. List type and amount   24z   25 Total other adjustments. Add lines 24a through 24z   24z   26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter	18		18	eta gi
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the rental of personal property engaged in for profit	а	Jury duty pay (see instructions)		
medals and USOC prize money reported on line 8l	b			
e Repayment of supplemental unemployment benefits under the Trade Act of 1974	), C			
Trade Act of 1974	d	Reforestation amortization and expenses		
g Contributions by certain chaplains to section 403(b) plans	е	Fig. 10 Complete the control of the		
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	f	Contributions to section 501(c)(18)(D) pension plans 24f		
unlawful discrimination claims (see instructions)	g	Contributions by certain chaplains to section 403(b) plans 24g		
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	h			
i Housing deduction from Form 2555	i	Attorney fees and court costs you paid in connection with an	1000	
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)				
(Form 1041)	j	Housing deduction from Form 2555 24j	1	
25 Total other adjustments. Add lines 24a through 24z	k	/F 4044)		
<ul> <li>Total other adjustments. Add lines 24a through 24z</li></ul>	Z			
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter	25		25	
The state of the s	26			

## **SCHEDULE E** (Form 1040)

**Supplemental Income and Loss** 

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

OMB No. 1545-0074

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

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

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

	shown on return						Your	social securi	ty number	
	KUMAR CHAVVA							-69-337		
Part		oyaltie	s Note	: If you a	are in th	e business of	renting	personal p	roperty, use	9
	Schedule C. See instructions. If you are an individual, re									
A Did	you make any payments in 2021 that would require you t	o file F	orm(s) 1	0997 S	ee instr	uctions .		🖂	Yes 🛭 N	lo
	Yes," did you or will you file required Form(s) 1099? .			· · ·				<u> D</u>	Yes 🗌 N	lo
<u>1a</u>	Physical address of each property (street, city, state, ZI									
A	16-11-353, VEERABHADREEYA C HYDERABAD	IN 5	00036							
<u>B</u>										
C									,	
1b	Type of Property 2 For each rental real estate pro (from list below) 2 above, report the number of from the first property of the first property of the proper	perty I	isted			Rental			QJV	
_	personal use days Check the	OIVE	N hoy only		Days		Days			
_ <u>A</u> _	3 if you meet the requirements qualified joint venture. See ins	to file a	s a	A		365		0		
B C	quamou joint venture. See ins	structio							<u></u>	
	18			С						
-	of Property:									
_	le Family Residence 3 Vacation/Short-Term Rental				7 Self-	70 200 00				
Incom	i-Family Residence 4 Commercial		yalties	100.00	8 Othe	r (describe)				
	1 Topol dos.			Α	65.0	В			С	
4	Rents received	3			650.					
Expens	Royalties received	4					- 1			
		-								
	Advertising	5								
		6		-	050					
	Cleaning and maintenance	7		⊥,	950.			-		9.01
	Commissions	9								
	Insurance	10								- Lines
	Legal and other professional fees	11			000					400
	Management fees	12		1,	920.			_		3/6-9/
	Mortgage interest paid to banks, etc. (see instructions)	13	-							
	Other interest	14	<b>-</b>	1	930.				5.4	SE 100
	Repairs	15	-		950.			_		1 5
	Taxes	16		Τ,	950.					-
	Utilities	17		2	050.					
	Depreciation expense or depletion	18			050.		7			
	Other (list)	19	1.0							
	Total expenses. Add lines 5 through 19	20		q	800.			_		
	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If			٠,	000.					
21										
	result is a (loss), see instructions to find out if you must file Form 6198	21	1	-9.	150.			1.3		
22	Deductible rental real estate loss after limitation, if any		<b></b>		100.			-		
-	on Form 8582 (see instructions)	22	1	9.1	150.)	(		)(		
23a	Total of all amounts reported on line 3 for all rental prop				23a	,	65	0.	NEW DAY	EST
ь	Total of all amounts reported on line 4 for all royalty pro				23b			4300		
	Total of all amounts reported on line 12 for all properties	5.0			23c					
ď	Total of all amounts reported on line 18 for all properties				23d					
e	Total of all amounts reported on line 20 for all properties				23e		9,80	0.		
24	Income. Add positive amounts shown on line 21. Do n		ude anv	losses			. 1	24	A STATE OF THE PARTY OF THE PAR	-
25	Losses. Add royalty losses from line 21 and rental real esta					al losses her	e : F	25 (	9,15	0 -
	Total rental real estate and royalty income or (loss).								2,13	<u> </u>
	here. If Parts II, III, IV, and line 40 on page 2 do no							-		
	Schedule 1 (Form 1040), line 5. Otherwise, include this							26	-9,1	50
	Concessor i ti citti 10-70), into ci cutto mico, include tillo		- " . "	J. W. O.		-9,15				

BAA REV 01/17/22 PRO