Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2022**

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....▶

1,942.

REV 04/01/22 PRO

1555

L44-29-L523

SUDHIR APPASAHEB NIMBALKAR

RASHMI SIDDANNA BIRADAR

3323 DENALI DR

IRVING TX 750L3

Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/15/2022**

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order......

REV 04/01/22 PRO 1555

1,942.

L44-29-L523

SUDHIR APPASAHEB NIMBALKAR

RASHMI SIDDANNA BIRADAR

3323 DENALI DR

IRVING TX 750L3

Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/15/2022**

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

1,942.

REV 04/01/22 PRO

1555

L44-29-L523 48L-93-7384
SUDHIR APPASAHEB NIMBALKAR
RASHMI SIDDANNA BIRADAR
3323 DENALI DR
IRVING TX 750L3

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/17/2023**

2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

L44-29-L523

SUDHIR APPASAHEB NIMBALKAR

RASHMI SIDDANNA BIRADAR

3323 DENALI DR

IRVING TX 750L3

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

Submission Identification Number (SID)		•				
Taxpayer's name	ty number					
SUDHIR APPASAHEB NIMBALKAR	PPASAHEB NIMBALKAR 644-29-6523					
Spouse's name	Spouse's soci	al security n	umber			
RASHMI SIDDANNA BIRADAR	486-93-	7384				
Part I Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year you ar	e authoriz	zing.)			
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	194,991.			
2 Total tax	[2	28,741.			
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[3	23,850.			
4 Amount you want refunded to you	[4				
5 Amount you owe		5	4,932.			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	еер а сору	of your	return)			
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reje for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requirements and supplied to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payersonal identification number (PIN) below is my signature for the income tax return (original or amended) I an Electronic Funds Withdrawal Consent.	tter, or electro ction of the tra S. Treasury an cated in the ta n to debit the the authoriza ests must be processing of ayment. I furth	nic return or ansmission, dis design x preparation entry to this tion. To revieceived in the electroner acknow	riginator (ERO) (b) the reason nated Financial on software for account. This ooke (cancel) o later than 2 nic payment of ledge that the			
Taxpayer's PIN: check one box only		5 5 0				
X I authorize GLOBAL TAXES LLC to enter or generate r	ny PIN	6 5 2	as my			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ente	er five digits, 't enter all ze	but			
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.						
Your signature ► Date ►						
Spouse's PIN: check one box only						
I authorize GLOBAL TAXES LLC to enter or generate resignature 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 if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	Ente don ow authorizin		eros this box only			
Spouse's signature ▶ Date ▶						
Practitioner PIN Method Returns Only—continue below						
Part III Certification and Authentication — Practitioner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 8 Don't ente		9 8 9			
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income ta authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submirequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of In	tting this retui	n in accord	dance with the			
ERO's signature ▶ Date ▶						
ERO's signature ► Date ► ERO Must Retain This Form — See Instructions						

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

Form 1040-V 2021 Page **2**

IF you live in	THEN use this address to send in your payment				
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214				
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000				
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501				
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303				

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2021

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

(99)

Form 1040-V Payment Voucher

► Use this voucher when making a payment with Form 1040.

Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment \ 4 \quad 932 \cdot \ REV 04/01/22 PRO 1555

SUDHIR APPASAHEB NIMBALKAR RASHMI SIDDANNA BIRADAR 3323 DENALI DR IRVING TX 75063

£1040

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

2021

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly use the checked the MFS box, enter the newson is a child but not your dependent	ame of	ried filing separately (f your spouse. If you	,	_		, ,	_	, ,	` , ` ,	
Your first name and middle initial Last name Y					Your social security number							
SUDHIR APPASAHEB NIMBALKAR			644-29-6523									
If joint return, s	pouse's	s first name and middle initial	Last n	ame					Spouse	Spouse's social security number		
RASHMI :	SIDD	ANNA	BIR	ADAR					486-93-7384			
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Preside	ntial Electi	on Campaign	
3323 DEI	NALI	DR							Check	here if you,	or your	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete	spaces below.	Sta	ate	ZIP	code		0,	ntly, want \$3	
IRVING			TX			75	75063		to go to this fund. Checking a box below will not change			
Foreign country	y name					Fore	Foreign postal code your tax or re					
At any time du	ıring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of ar	y fina	ancial interest	in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim:										
Age/Blindness	s You:	Were born before January 2, 1	957	Are blind Sp	ouse	: Was bo	rn be	fore January 2	2, 1957	☐ Is b	lind	
Dependents	s (see	instructions):		(2) Social securit	V	(3) Relationsh	nip	(4) ✓ if q	ualifies fo	r (see instru	uctions):	
If more	•	irst name Last name	number to you Child tax cr		redit	Credit for ot	her dependents					
than four												
dependents,	_											
see instruction and check	s —											
here ▶												
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2					. 1	2	14,100.	
Attach	2a	Tax-exempt interest	2a		b T	axable interes	st		. 2b		157.	
Sch. B if	3a	Qualified dividends	3a			Ordinary divide			. 3b)		
required.	4a	IRA distributions	4a			axable amoun			. 4b)		
	5a	Pensions and annuities	5a		b T	axable amoun	nt .		. 5b)		
Standard	6a	Social security benefits	6a		b T	axable amoun	nt .		. 6b)		
Deduction for—	7	Capital gain or (loss). Attach Scheo	dule D	if required. If not req	uired	l, check here		▶ [7		-3,000.	
Single or Married filing	8	Other income from Schedule 1, lin	e 10						. 8		16,266.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	nes 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						▶ 9	1	94,991.	
\$12,550 Married filing	10	Adjustments to income from Schedule 1, line 26						. 10				
jointly or Qualifying	11						▶ 11	1	94,991.			
widow(er),	12a	Standard deduction or itemized				12	a	25,10	o. 🗔			
\$25,100 • Head of	b	Charitable contributions if you take		•	,			60				
household, \$18,800	С								. 12	С	25,700.	
If you checked	13	Qualified business income deducti			า 899	95-A			. 13			
any box under Standard	14	Add lines 12c and 13							. 14	_	25,700.	
Deduction,	15	Taxable income. Subtract line 14	from li	ne 11. If zero or less	ente	er -0			. 15	5 1	69,291.	

	16	Tax (see instructions). Check if any from Form	(s): 1 🗌 881	4 2 🗌 4972	3 🗌			16	28,741.
	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	28,741.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	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	28,741.
	23	Other taxes, including self-employment tax,						23	0.
	24	Add lines 22 and 23. This is your total tax					•	24	28,741.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	23,8	350.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	23,850.
	26	2021 estimated tax payments and amount a						26	·
If you have a Lagrangian qualifying child,	27a	Earned income credit (EIC)		No	27a				
attach Sch. EIC.		Check here if you were born after Janu							
		January 2, 2004, and you satisfy all the	e other requi	rements for					
		taxpayers who are at least age 18, to claim t	1 1	structions ►					
	b	Nontaxable combat pay election							
	С	Prior year (2019) earned income							
	28	Refundable child tax credit or additional child			28				
	29	American opportunity credit from Form 8863	-		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						32	02.050
	33	Add lines 25d, 26, and 32. These are your to						33	23,850.
Refund	34	If line 33 is more than line 24, subtract line 2			•	-	·	34	
D: 1.1 '10	35a	Amount of line 34 you want refunded to you			ck here Checki		rings	35a	
Direct deposit? See instructions.	▶b	Routing number X X X X X X X X							
	► d	Account number X X X X X X X X			i i				
A	36	Amount of line 34 you want applied to your			36		_	07	4 022
Amount You Owe	37	Amount you owe. Subtract line 33 from line			1 1	uctions .	11	37	4,932.
	38	Estimated tax penalty (see instructions) .			38		41.		
Third Party Designee		you want to allow another person to disc ructions				Yes. Com	nlete h	elow	X No
Designee		ianee's	Phone			Persona	•		
	nar	ne ►	no. 🕨			number			
Sign		er penalties of perjury, I declare that I have examine							
Here		ef, they are true, correct, and complete. Declaration of			ased on a	Il intormation o			, ,
	You	r signature	Date	Your occupation			1		nt you an Identity N, enter it here
Joint return?				SOFTWARE I	NGTN	EER		nst.) ▶	14, Chief it ficie
See instructions.	Spo	use's signature. If a joint return, both must sign.	BOI IMIMED BROITEBLE			If the	IRS ser	nt your spouse an	
Keep a copy for	,						1	,	ection PIN, enter it here
your records.				SOFTWARE I	ENGIN	EER	(see ii	nst.) ►	
		ne no. (214)449-3778	Email address	NIMBALKAR.SU					
Paid		parer's name Preparer's signat			Date		TIN	_	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/1	3/2022 PO	2082		Self-employed
Use Only		n's name ► GLOBAL TAXES LLC							678)965-9522
	Firr	n's address ▶ 2530 Pebble Creek L	n Cumming	g GA 30041			Firm's	s EIN 🕨	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 04/0	01/22 PRO			Form 1040 (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 ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

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

S NIMBALKAR & R BIRADAR

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

S NIMBALKAR & R BIRADAR

Par	t I 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, tru Schedule E		5	-16,266.
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		
	Olympic and Paralympic medals and USOC prize money (see	OK	-	
•	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		10	-16,266.

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>	_	
С	Date of original divorce or separation agreement (see instructions)	-		
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24 g		
h	,	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE D (Form 1040)

Capital Gains and Losses

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 644-29-6523 S NIMBALKAR & R BIRADAR

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 91,712. 102,740. 5,172. -5,856. 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 -5,856. 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 15

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -5,856. • 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 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. 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.) • (\$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

Part I

Department of the Treasury

Social security number or taxpayer identification number

644-29-6523

S NIMBALKAR & R BIRADAR

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.

instructions). For long-term transactions, see page 2.

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

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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) and see Column (e. from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Crypto LLC 12/31/21 12,881. 14,209. -1,328. 12/31/21 Robinhood Securities LLC 01/01/21 78,831. 88,531. 5,172 -4,528. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

91,712.

-5,856.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶

102,740.

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.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13

Name(s) shown on return Your social security number 644-29-6523 S NIMBALKAR & R BIRADAR Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α 3323 DENALI DRIVE IRVING TX 75063 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a 365 Α 3 Α 0 qualified joint venture. See instructions. В В 0 365 С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α C 3 Rents received . 3 600. 600. 4 4 Royalties received Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 1,000. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 800. 12 Mortgage interest paid to banks, etc. (see instructions) 12 8,166. 13 13 Other interest. 14 2,500. 14 Repairs. 15 2,000. 15 Supplies . Taxes 16 16 17 3,000. 17 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 8,166. 9,300. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -7,566. -8,700. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 7,566.) 8,700.) 1,200. 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties 8,166. d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 17,466. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 16,266. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

-16,266.