(Rev. January 2021)

# IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

OMB No. 1545-0074

	rtment of the Treasury al Revenue Service ► Go to www.irs.gov/l	Form8879 for the latest in	formation.				
Subm	mission Identification Number (SID)						
Taxpay	ayer's name		s	ocial security	number	ı	
ВНА	ARATHI DEVI MALEMPATI			492-91-3	1693		
Spouse	se's name		s	pouse's socia	l securi	y number	r
Par	rt I Tax Return Information — Tax Year Endir	ng December 31,	2021 (Enter ye	ear you are	e auth	orizing.	.)
	r whole dollars only on lines 1 through 5.						
Note:	e: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3,			1			
1	Adjusted gross income				1		,587.
2	Total tax			_	2		,648.
3	Federal income tax withheld from Form(s) W-2 and For				3		,173.
4	,			<b>⊢</b>	4	3	,525.
5	Amount you owe				5		\
Part	Taxpayer Declaration and Signature Author penalties of perjury, I declare that I have examined a copy of t						
to sen for any Agent payme author payme busine taxes persor Electro	In (original or amended) I am now authorizing. I consent to allow and my return to the IRS and to receive from the IRS (a) an acking delay in processing the return or refund, and (c) the date of a set to initiate an ACH electronic funds withdrawal (direct debit) erhent of my federal taxes owed on this return and/or a payment of prization is to remain in full force and effect until I notify the Lenent, I must contact the U.S. Treasury Financial Agent at 1-6 ness days prior to the payment (settlement) date. I also authorize to receive confidential information necessary to answer inquental identification number (PIN) below is my signature for the intronic Funds Withdrawal Consent.	nowledgement of receipt of any refund. If applicable, I applicable, I applicable, I applicable and the financial applicable and the financial Age 388-353-4537. Payment care the financial institutions uiries and resolve issues r	r reason for rejecti authorize the U.S. on account indicat nancial institution t ent to terminate th ancellation reques involved in the pre- elated to the payi	on of the train Treasury and ted in the tax to debit the end authorizations must be occassing of the ment. I furth	nsmissi d its des prepar entry to ion. To receive he elec er ackr	on, <b>(b)</b> the signated ration softhis according revoke (do no late tronic parowledge	ne reason Financial ftware for bunt. This cancel) a er than 2 syment of that the
Тахра	payer's PIN: check one box only				1 6		
>	X lauthorize GLOBAL TAXES LLC	to ente	r or generate my	PIN 1	1 6	9 3	as my
	ERO firm name				r five dig t enter a	gits, but II zeros	-
	signature on the income tax return (original or amen-	,	•				
	I will enter my PIN as my signature on the income to if you are entering your own PIN and your return is below.  Docusigned by:						
Your	r signature 🕨 🥒 M Bharathi Devi		Date ►	4/1	3/202	2	
0	E59BB7ADAC1946D						
Spou	use's PIN: check one box only			<b>DIV.</b>			
L	I authorizeERO firm name	to ente	r or generate my				as my
	signature on the income tax return (original or amen	ded) I am now authorizir	na		r five diq t enter a		
_	I will enter my PIN as my signature on the income tage.	,	0	, authorizin	a Cho	ok thic h	ooy <b>only</b>
L	if you are entering your own PIN and your return is below.						
Spou	use's signature ▶		Date ►				
	Practitioner PIN Meth	od Returns Only—cor	tinue below				
Part	t III Certification and Authentication — Practi	tioner PIN Method C	nly				
ERO'	P's EFIN/PIN. Enter your six-digit EFIN followed by your f	five-digit self-selected P	IN. 5 8 7	2 7 8	6 1	9 8 s	9
author	tify that the above numeric entry is my PIN, which is my signat orized to file for tax year indicated above for the taxpayer(s) in rements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbo	ndicated above. I confirm	that I am submitti	ng this returi	n in acc	cordance	
ERO's	o's signature ▶		Date <b>▶</b>				
	ERO Must Retain 7 Don't Submit This Form to	This Form — See Ins the IRS Unless Req		So			

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

_											
Filing Status Check only one box.	If yo	Single Married filing jointly but checked the MFS box, enter the notion is a child but not your dependent	ame o		chec	ked the HC		, ,	_	, ,	` , ` ,
Your first name			Last r		בעחח	1			Your so	cial securit	ty number
BHARATH:				LEMPATI						91-169	-
-		s first name and middle initial	Last r						_		ು curity number
ii joint return, s	ouse s	instriante and middle initial	Lasti	iairie						20-149	•
Home address	(numbe	er and street). If you have a P.O. box, see	inetruc	tions				Apt. no.			⊥ on Campaign
308 VIN	•		, ii ioti uc	otions.				, pt. no.	1	here if you,	
		ce. If you have a foreign address, also co	mnlete	snaces helow	Sta	nte.	7IP	code ·	1		itly, want \$3
IRVING	OSt OIII	se. If you have a foreign address, also ee	mpicto	spaces below.	T			5039			Checking a
Foreign country	/ name			Foreign province/state				reign postal code		low will not x or refund.	
r oreign country	rianic			Torcigit province/state	Couri	ıty	101	eigii postai code	) our tu	You	Spouse
At any time du	ring 20	021, did you receive, sell, exchange,	, or oth	nerwise dispose of ai	ıy tına	ancial inter	est in ar	ny virtual curre	ncy'?	Yes	⊠ No
Standard	Som	<b>leone can claim:</b> 🗌 You as a de	pende	ent 🗌 Your spou	se as	a depende	ent				
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a dual-status	alier	ı					
Age/Blindness	You:	: Were born before January 2, 1	957	Are blind Sp	ouse	e: Was	born b	efore January 2	2, 1957	☐ Is bl	ind
Dependents	s (see	instructions):		(2) Social securi	v	(3) Relati	onship	(4) <b>✓</b> if a	ualifies fo	r (see instru	ctions):
If more	Number to you Child toy		Child tax c		1 `	her dependents					
than four											
dependents,											
see instruction	3										
here ▶ □										Γ	
	1	Wages, salaries, tips, etc. Attach F	orm(s	) W-2					. 1		88,910.
Attach	2a	Tax-exempt interest	2a		b T	axable inte	erest		. 2b	,	
Sch. B if required.	3a	Qualified dividends	3a		<b>b</b> (	Ordinary div	/idends		. 3b	,	
required.	4a	IRA distributions	4a		b T	axable am	ount .		. 4b	,	
	5a	Pensions and annuities	5a		b T	axable am	ount .		. 5b	,	
Standard	6a	Social security benefits	6a		<b>b</b> T	axable am	ount .		. 6b	)	
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D	if required. If not red	uired	l, check he	re .	▶[	□		-143.
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, lin	e 10						. 8		-8,180.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome				▶ 9		80,587.
Married filing	10	Adjustments to income from Sche	dule 1	, line 26					. 10	)	
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	s your	adjusted gross inco	me				<b>▶</b> 11	. {	80,587.
widow(er), \$25,100	12a	Standard deduction or itemized	deduc	ctions (from Schedul	e A)		12a	12,55	0.		
Head of	b	Charitable contributions if you take	the sta	andard deduction (se	e insti	ructions)	12b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 12	c	12,850.
If you checked	13	Qualified business income deduct	ion fro	m Form 8995 or For	n 899	95-A			. 13	}	
any box under Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from I	ine 11. If zero or less	, ente	er -0			. 15	i   6	67,737.
)											

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

Form **1040** (2021)

Form 1040 (2021) Page 2 16 Tax (see instructions). Check if any from Form(s): 1 8814 **2** 4972 3 16 10,648 17 Amount from Schedule 2, line 3 . . . . . . 17 Add lines 16 and 17 . . . . . . . . . . . 18 18 10,648. 19 Nonrefundable child tax credit or credit for other dependents from Schedule 8812 19 Amount from Schedule 3, line 8 . . . . . . . . . . . . . . . 20 20 21 Add lines 19 and 20 . . . . . . . . . . . . . 21 10,648. 22 Subtract line 21 from line 18. If zero or less, enter -0-22 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 0 Add lines 22 and 23. This is your total tax . . . . 24 24 10,648. 25 Federal income tax withheld from: Form(s) W-2 . . . . . . 25a 14,173. а Form(s) 1099 . . . . . . . . 25b h Other forms (see instructions) . . . . . 25c С Add lines 25a through 25c . 25d 14,173. d 26 2021 estimated tax payments and amount applied from 2020 return. 26 If you have a qualifying child, attach Sch. EIC. 27a 27a 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 Prior year (2019) earned income . . . . С 28 Refundable child tax credit or additional child tax credit 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 other payments and refundable credits 32 33 14,173. Add lines 25d, 26, and 32. These are your total payments 33 3,525. 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund 35a Amount of line 34 you want **refunded to you.** If Form 8888 is attached, check here . . . 35a 3,525. Routing number 0 5 1 0 0 0 0 1 7 Direct deposit? ▶b **c** Type: X Checking Savings See instructions. Account number 4 3 5 0 3 4 2 2 1 8 8 6 **▶** d 36 Amount of line 34 you want applied to your 2022 estimated tax . . . 37 Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions 37 Amount You Owe Estimated tax penalty (see instructions) Third Party Do you want to allow another person to discuss this return with the IRS? See instructions X No Yes. Complete below. Designee Designee's Personal identification Phone name > no. ▶ number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) ▶ SOFTWARE DEVELOPER Joint return? See instructions If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) ▶ Phone no. (848)213-5207 Email address BHARATHI.MALEMPATI@GMAIL.COM Preparer's name Preparer's signature Date Check if: **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/11/2022 P02082703 **Preparer** GLOBAL TAXES LLC Phone no. (678)965-9522 Use Only

Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041

Firm's EIN ▶

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

BHARATHI DEVI MALEMPATI

# SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment

Department of the Treasury Internal Revenue Service

Attachment Sequence No. 01 Your social security number

492-91-1693

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	s	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	<b>-</b>		
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, tr Schedule E	•	5	-8,180.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	<b>8a</b> (	)	
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	Property	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 1			
	1040-NR. line 8	, ,	10	_0 100

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

Par	t II Adjustments to Income		
11	Educator expenses	 11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	 13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	 14	
15	Deductible part of self-employment tax. Attach Schedule SE	 15	
16	Self-employed SEP, SIMPLE, and qualified plans	 16	
17	Self-employed health insurance deduction	 17	
18	Penalty on early withdrawal of savings	 18	
19a	Alimony paid	 19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
20	IRA deduction	 20	
21	Student loan interest deduction	 21	
22	Reserved for future use	 22	
23	Archer MSA deduction	 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
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		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations		
j	Housing deduction from Form 2555 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
Z	Other adjustments. List type and amount ▶		
25	Total other adjustments. Add lines 24a through 24z	 25	
26	Add lines 11 through 23 and 25. These are your adjustments to income		
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 26	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

## **Capital Gains and Losses**

► 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.

OMB No. 1545-0074

2021

Attachment Sequence No. **12** 

	(s) snown on return  ARATHI DEVI MALEMPATI					1693
Did y	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional			× No		1075
Ра					e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or loss Form(s) 8949, line 2, colum	justments Subtract column from column (d) a 0 8949, Part I, combine the res	
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 <b>Box A</b> checked	305.	448.			-143.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4 5	Short-term gain from Form 6252 and short-term gain or (loss) Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions			Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-143.
Pai						
See lines	instructions for how to figure the amounts to enter on the below.	(d)	(e)	<b>(g)</b> Adjustmer	nts	(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to le dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, line 2, colum	Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
12 13	Net long-term gain or (loss) from partnerships, S corporation Capital gain distributions. See the instructions	ions, estates, and	trusts from Sched	dule(s) K-1	12 13	
14	Long-term capital loss carryover. Enter the amount, if any	, from line 13 of y		Carryover	14	(
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•	. ,	to Part III	15	

BAA

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

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16	-143	•
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , 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 <b>both</b> 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 <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		_
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21 (	143.	)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.			
	➤ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

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

8949 **8949** 

### **Sales and Other Dispositions of Capital Assets**

2021

Department of the Treasury Internal Revenue Service ► 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

Name(s) shown on return

Social security number or taxpayer identification number

492-91-1693

BHARATHI DEVI MALEMPATI

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

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

**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 F	orm 1099-B				
1 (a) Description of property	(b) (c) Date sold or Date acquired dispersed of	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, if If you enter an enter a co	(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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
COINBASE	01/01/21	12/31/21	305.	448.			-143.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	305.	448.			-143.

**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.

#### **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.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

2021	
Attachment Sequence No. <b>13</b>	

Name(s)	shown on return							You	ır social securit	y number
BHAR	ATHI DEVI MALEM	1PATI						49	92-91-169	3
Part	Income or Loss	s From Rental Real Estate and	Royalties	s Note	: If you	are in th	e business c	of renti	ng personal pr	operty, use
	Schedule C. See	instructions. If you are an individual,	, report farn	n rental i	ncome	or loss f	rom Form 48	<b>335</b> on	page 2, line 4	0.
A Dic	l you make any payme	nts in 2021 that would require yo	ou to file F	orm(s) 1	099? S	ee inst	ructions .		🗆 <b>\</b>	∕es ⊠ No
B If "	Yes," did you or will yo	ou file required Form(s) 1099? .							🗆 <b>\</b>	res 🗌 No
1a	Physical address of	each property (street, city, state,	, ZIP code	e)						
Α	MVP COLONY VIS	SAKHAPATNAM ANDHRA PRA	DESH IN	1 5300	017					
В										
С										
1b	Type of Property	2 For each rental real estate	property li	sted			Rental	Per	sonal Use	QJV
	(from list below)	above, report the number of personal use days. Check	ot tair renta the <b>QJV</b> b	al and ox only:			Days		Days	
Α	3	if you meet the requiremen	its to file a	sa İ	Α		365		0	
В		qualified joint venture. See	instruction	ns.	В					
С					С					
	of Property:									
_	le Family Residence	3 Vacation/Short-Term Ren				7 Self-	Rental			
	ti-Family Residence	4 Commercial		yalties		8 Othe	r (describe)		T	
Incom		Propertie			Α		E	3		С
3		<u> </u>				650.				
4			4							
Expen			_							
5	_									
6	•	nstructions)				100				
7		nance			1,	480.				
8										
9										
10		essional fees								
11	_				Ι,	300.				
12		id to banks, etc. (see instructions	<i>'</i>							
13						110				
14	•		-			110. 940.				
15 16					۷,	940.				
17										
18		e or depletion								
19	Othor (list)	·	40							
20	` ′				8	830.				
	•	line 3 (rents) and/or 4 (royalties)			0 /	050.				
21		instructions to find out if you mi								
	`'		21		-8,	180.				
22		I estate loss after limitation, if a								
	on Form 8582 (see in			(	8,1	.80.)	(		)(	)
23a	·	eported on line 3 for all rental pr				23a	-	6.	50.	,
b		eported on line 4 for all royalty p	-			23b				
С		eported on line 12 for all propert	-			23c				
d		eported on line 18 for all propert				23d				
е	Total of all amounts re	eported on line 20 for all propert	ties			23e		8,8	30.	
24	Income. Add positive	e amounts shown on line 21. Do	not inclu	ide any	losses				24	
25	Losses. Add royalty lo	sses from line 21 and rental real es	state losses	s from li	ne 22. E	nter tot	al losses her	е.	25 (	8,180.)
26	Total rental real esta	ate and royalty income or (los	s). Comb	ine lines	s 24 an	d 25. E	nter the re	sult		
		V, and line 40 on page 2 do r								
	Schedule 1 (Form 104	40), line 5. Otherwise, include thi	is amount	in the t	otal on	line 41	on page 2	.	26	-8,180.