#### 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.

Submission Identification Number (SID)

Taxpay	er's name	Social securi	ty numb	ber
NIS	HANTH MEDISHETTY	754-50	-9882	2
Spouse	's name	Spouse's soo	cial secu	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2021 (Enter	l r year you a	ire aut	thorizing.)
Enter	whole dollars only on lines 1 through 5.			<u>_</u>
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	99,678.
2	Total tax		2	14,859.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	16,991.
4	Amount you want refunded to you		4	2,132.
5	Amount you owe		5	
Daut	II Townsway Declayation and Cignature Authorization (Decure you not and			

#### 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 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

<u> </u>	l autnorize	GLUBAL	TAXES	ERO firm name	to enter or generate my PIN	Er
	l authorize		mavec	TTC	to optox or gonerate my DIN	10

			gits, all ze		as my
0	9	8	8	2	

signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

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 🕨

Date 🕨

#### Spouse's PIN: check one box only

I authorize

to enter	or	generate	my	PIN

Enter five digits, but

as mv

don't enter all zeros

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.

Spouse's signature >	D	ate 🖡							
Practitioner PIN Method Returns Only—co	ntinue	bel	ow						
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 F	YN.	5	8		 	6 all zer	 9	89	

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.

ERO's signature >					
	ERO Must Retain This Form — See Instructions on't Submit This Form to the IRS Unless Requested To Do So				
For Paperwork Reduction Act Notice, see your tax return inst	tructions. BAA	REV 02/05/22 PRO	Form 8879 (Rev. 01-2021)		

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		<sup>(99)</sup> 202	21	OMB No. 1545	-0074	IRS Use	Only-	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly unchecked the MFS box, enter the nation is a child but not your dependent	ame of y	ed filing separately your spouse. If you								
Your first name	and mi	ddle initial	Last nar	me						Your so	ocial securi	ty number
NISHANTI	H		MEDI	SHETTY						754-	50-988	2
lf joint return, s	pouse's	first name and middle initial	Last nar	me						Spouse	's social se	curity number
Home address		er and street). If you have a P.O. box, see AVE	instructio	ons.			A	ot. no.		Check	here if you,	
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ite	ZIP cod	de		•		ntly, want \$3
PISCATA	WAY				N	J	088	54			low will not	Checking a t change
Foreign country	y name		F	Foreign province/state	e/coun	ty	Foreigr	n postal c	ode	your ta	x or refund	
At any time du	iring 20	021, did you receive, sell, exchange,	or othe	rwise dispose of a	ny fina	ancial interest i	in any v	rirtual cu	urrer	ncy?	Yes	X No
Standard Deduction	_	eone can claim:				a dependent						
Age/Blindness	s You:	Were born before January 2, 1	957	Are blind <b>S</b>	pouse	: 🗌 Was bor	rn befoi	re Janua	ary 2	, 1957	🔄 ls b	lind
Dependent				(2) Social secur number	ity	(3) Relationsh to you	nip	• •	•		or (see instru	2
If more	(1) F	rst name Last name		number	number to you Child tax o		ax cr	edit	Credit for ot	ther dependents		
than four dependents,								ا ۱	-			
see instruction	s ——							ا ا	-			
and check here ►								[	-			
	1	Wages, salaries, tips, etc. Attach F	orm(s) \	N-2						. 1	1	08,193.
Attach	2a	- · · · ·	2a		h T	axable interes	+			21		
Sch. B if	3a		3a	3.		Ordinary divide			• •	31	<b>)</b>	3.
required.	4a	IRA distributions	4a			axable amoun				41	)	
	5a	Pensions and annuities	5a		bТ	axable amoun	t			. 5t	<b>)</b>	
Standard	6a	Social security benefits	6a		bΤ	axable amoun	t			. 6k	<b>)</b>	
Deduction for -	7	Capital gain or (loss). Attach Schee	dule D if	required. If not re	quired	l, check here				7		362.
<ul> <li>Single or Married filing</li> </ul>	8	Other income from Schedule 1, line	e10.							. 8		-8,880.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. T	his is your <b>total in</b>	come				. 1	▶ 9		99,678.
Married filing	10	Adjustments to income from Schee	dule 1, li	ine 26						. 10	)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your ac	djusted gross inc	ome		· ·		. 1	► <u>1</u> 1		99,678.
widow(er), \$25,100	12a	Standard deduction or itemized	deducti	ons (from Schedu	le A)	12	a	12,	550	).		
<ul> <li>Head of</li> </ul>	b	Charitable contributions if you take	the stan	dard deduction (se	e inst	ructions) 12	b		300	).		
household, \$18,800	С									12	c	12,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti	on from	Form 8995 or For	m 899	95-A				. 13		
Standard	14									. 14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from line	e 11. If zero or less	s, ente	er-0	• •	• •		15	5	86,828.

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

Form **1040** (2021)

Designee's name ▶       Phone no. ▶       Personal identification number (PIN) ▶         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h Your signature         Joint return?       See instructions. Keep a copy for your records.       Date       Your occupation       If the IRS sent yur Protection PIN, (see inst.) ▶         Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       Criterian Completer (see inst.) ▶         State Only       State Preparer's name       Preparer's signature       Date       PTIN       Criterian PIN, (see inst.) ▶         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (677         Firm's address ▶ 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ▶	Form 1040 (2021	1)									Page 2
18       Add lines 16 and 17       18         19       Nonrefundable child tax credit or credit to other dependents 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         23       Other taxs, including self-employment tax, from Schedule 2, line 21       23         24       Add lines 22 and 23. This is your total tax       24         25       Federal income tax withheld from:       256         a       Form(s) 1099       256         271       Check here if you were born after January 1, 1998, and before January 2, 2041, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions →       27         28       Refundable child tax credit or additional child tax credit from Schedule 812       28         29       Amount from Schedule 3, line 15       30         31       Amount from Schedule 3, line 15       30         32       Add lines 27a, d2, d2, d3, and 32. These are your total by prements       33         34       Hine 31 is more than line 24, subtract line 24. In fom line 33. This is the amount you overpaid       34         35       Amount from Schedule 3, line 15       12 l       10 l </th <th></th> <th>16</th> <th>Tax (see instructions). Check</th> <th>if any from Form(s</th> <th>s): <b>1</b> 🗌 881</th> <th>4 <b>2</b> 🗌 4972</th> <th>3</th> <th></th> <th>16</th> <th>14,</th> <th>859.</th>		16	Tax (see instructions). Check	if any from Form(s	s): <b>1</b> 🗌 881	4 <b>2</b> 🗌 4972	3		16	14,	859.
19       Nonrefundable child tax credit or credit for other dependents from Schedule 8812       19         20       Amount from Schedule 3, line 8       21         21       Add lines 19 and 20       21         22       Subtract line 21 from line 18, li zero or less, enter -0.       22         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         25       Federal income tax withheld from:       a         a       Form(s) W-2       25a         c       Other forms (see instructions)       25b         27a       Earned income credit (EIC)       No         27a       Earned income credit (EIC).       27b         27a		17	Amount from Schedule 2, lin	ie3					17		
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         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         25       Federal income tax withheld from:       25a         a Form(s) W-2       25a       25a         26       Other forms (see instructions)       25a         27a       Check here if you wately alth other requirements for taxayyers who are at least age 18, to claim the EIC. See instructions 1       27a         27a       Check here if you wately alth other requirements for taxayyers who are at least age 18, to claim the EIC. See instructions 1       27a         28       Refund blic combat pay election       27b       27a         30       Refund blic scredit. See instructions       30       31         32       Add lines 27a, and 28 through 31. These are your total payments and refundable circedits       32         34       Amount forms Schedule 3, line 13. The stare your with pay and 24 from line 33. This is the amount you overpaid       34         35a       Add lines 27a, and 28 through 31. These are your total payments and refundable circedits       32         34		18	Add lines 16 and 17						18	14,	859.
21       Add lines 19 and 20       21         22       Subtract line 21 from line 18. If zero or less, enter -0		19	Nonrefundable child tax cree	dit or credit for ot	her depender	nts from Schedule	e8812		19		
22       Subtract line 21 from line 18. If zero or less, enter -0		20	Amount from Schedule 3, lin	e8					20		
23       Other taxes, including self-employment tax, from Schedule 2, line 21       23         24       Add lines 22 and 23. This is your total tax       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		21							21		
24       Add lines 22 and 23. This is your total tax       ▶       24         25       Federal income tax withheld from:       a       Form(§) 1099       25b         26       Colther forms (see instructions)       25b       25c       25d         26       2021 estimated tax payments and amount applied from 2020 return.       25c       25d         27a       Earned income credit (EIC)		22	Subtract line 21 from line 18	. If zero or less, e	nter -0				22	14,	859.
25       Federal income tax withheld from:       25       16,991.         a       Form(s) W-2       25b       25c         c       Other forms (see instructions)       25c       25d         d       Add lines 25a through 25c       25c       25d         2021 estimated tax payments and amount applied from 200 return.       27a       27a         Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy althe other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions ▶       27a         b       Nontaxable combat pay election       27b       27a         28       Refundable child tax credit or additional child tax credit from Schedule 8812       28         29       American opportunity credit from Form 8863, line 8       30         31       Add lines 25d, 26, and 32. These are your total other payments and refundable credits       33         34       filine 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8886 is attached, check here       >       33         35a       Amount of line 34 you want appiled to your 2022 estimated tax       >       36         36       Amount of line 34 you want appiled to your 2022 estimated tax       >       38 <tr< th=""><th></th><th>23</th><th>Other taxes, including self-e</th><th>mployment tax, fr</th><th>rom Schedule</th><th>e 2, line 21 .</th><th></th><th></th><th>23</th><th></th><th>0.</th></tr<>		23	Other taxes, including self-e	mployment tax, fr	rom Schedule	e 2, line 21 .			23		0.
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b       Form(s) 1099       25b         c       Other forms (see instructions)       25c         it you have a guilting olidit, and share s		25									
c       Other forms (see instructions)       25c       25d         If you have a quadrated tax payments and amount applied from 2020 return       26d       26d         221       Earned income credit (EIC)       No       27a         223       Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for       27a         228       Refundable child tax credit or additional child tax credit from Schedule 8812       28         239       American opportunity credit from Form 8863, line 8       29         341       Add lines 25d, 26, and 32. These are your total other payments and refundable credits       32         342       Add lines 25d, 26, and 32. These are your total other payments       34         35a       Anount of line 34 you want refunded to you. If Form 8886 is attached, check here       33         34d       Acount number 1 2 1 1 0 1 0 1 3 5 8       > c Type:       Checking       Savings         36       Amount of line 34 you want applied to you. If Form 8886 is attached, check here       34       35a         35a       Amount of line 34 yo		а					<b>25a</b> 16	,991.			
d       Add lines 25a through 25c       25d         typou have a quadring child, attach Sch. EC.       27a       27a         27a       Earned income credit (E(C)       No       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 ▶       27a         28       Refundable 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 25d, 26, and 32. These are your total other payments and refundable credits       32         33       Add lines 25d, 26, and 32. These are your total other payments and refundable credits       32         34       Hill ine 33 is more than line 24, subtract line 24 form line 33. This is the amount you overpaid       34         34       Add lines 25d, 26, and 32. These are your total other payments and refundable credits       32         35a       Account number 1       2       1       0       0       3       5         35a       Add lines 24 you want refunded to you. If Form 8868 is attached, check here       36       36       Amount of line 34 you want re		b	Form(s) 1099				25b				
Hyou have a qualifying child.       26       2021 estimated tax payments and amount applied from 2020 return.       No.       No.       27a         Earned income credit (EIC)       No.       No.       No.       27a         Littach Sch. EIC.       Check here if you were bom 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 ▶       28         Nontaxable combat pay election       27b       28         28       Refundable child tax credit or additional child tax credit from Schedule 8812       28         29       American opportunity credit from Form 8868 (line 8.       29         31       Amount from Schedule 3, line 15       30         32       Add lines 27a and 28 through 31. These are your total other payments and refundable credits       33         34       H line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. H Form 8868 is attached, check here       >       35a         Direct deposit?       ► Bouting number [1 2 1 0 0 0 0 3 5 5 8]       >       Checking Savings       37         36a       Amount of line 34 you want applied to your 2022 estimated tax .       >       38       37         70u Owe       38       Sta mount of line 34 y		С	Other forms (see instructions	s)			25c				
1700 marks and the and the and the analys and the analyst analyst analyst and the analyst analyst analyst and the analyst and the analyst analyst and the analyst analy		d	Add lines 25a through 25c						25d	16,	991.
qualifying ohidid, 27a       Earned income credit (EIC).	If you have a	26			•	NT			26		
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	qualifying child,	27a					27a				
taxpayers who are at least age 18, to claim the EIC. See instructions ▶       ■         b       Nontaxable combat pay election       276         c       Prior year (2019) eamed income       276         28       Refundable child tax credit or additional child tax credit from Schedule 8812       28         30       Refundable child tax credit rom Schedule 3, line 8       30         31       Amount from Schedule 3, line 15       30         32       Add lines 26d, 26, and 32. These are your total other payments and refundable credits       33         34       H line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >         36       Amount of line 34 you want applied to your 2022 estimated tax       >       36         Amount 37       Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions       37         37       Do you want to allow another person to discuss this return with the IRS? See       >       Yes. Complete below.         Besignee's       Phone       no.       Nontaxtee       Nontaxtee       Your occupation         Joint return?       S											
b       Nontaxable combat pay election       27b         c       Prior year (2019) earned income       27c         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 25d, 26, and 32. These are your total other payments and refundable credits       33         34       Hf line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Account number       1       2       1       0       3       5       8       > c Type:       X Checking       35a         36       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       .											
c       Prior year (2019) earned income       27c         28       Refundable child tax credit from Schedule 8812       28         29       30       Recovery rebate credit from Form 8863, line 8.       29         30       Recovery rebate credit from Form 8863, line 8.       30         31       31       30         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         34       Add lines 25d, 26, and 32. These are your total payments       34         35a       Anount of line 34 you want refunded to you. If Form 8888 is attached, check here       35a         Direct deposit?       >d       Account number       32       5       0       5       8       > C Type:       X Checking       35a         36       Amount of line 34 you want applied to your 2022 estimated tax       36       36       37       37         700 We       38       Estimated tax penalty (see instructions)       .       38       56       37         71       Amount you want to allow another person to discuss this return with the IRS? See instructions       .       37       37         700 We       38       Estimated tax penalty (see instructi		b		-	1 1						
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       Add lines 25d, 26, and 32. These are your total other payments and refundable credits       33         34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         34       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >         36       Amount of line 34 you want applied to your 2022 estimated tax       >       36         36       Amount of line 34 you want applied to your 2022 estimated tax       >       36         37       Amount of allow another person to discuss this return with the IRS? See instructions       >       37         38       Estimated tax penalty (see instructions)       .       .       >       38         29       Do you want to allow another person to discuss this return with the IRS? See instructions       .       .       .       .       .       .       .       .       .							-				
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30       Recovery rebate credit. See instructions       30       31         31       Amount from Schedule 3, line 15       31       32         32       Add lines 27a and 28 through 31. These are your total payments and refundable credits       32         33       Add lines 25d, 26, and 32. These are your total payments       33         34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >         36       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >         36       Amount of line 34 you want refunded to you. 2022 estimated tax       >       36         37       Amount of line 34 you want applied to your 2022 estimated tax       >       38         37       Amount of line 34 you want applied to your 2022 estimated tax       >       38         37       Amount of line 34 you want applied to your 2022 estimated tax       >       38         38       Estimated tax penalty (see instructions)       .       .       >         38       Do you want to allow another person to discuss this return with the IRS? See instructions .       .       >       37         Sign       Dinder penalties of perjury. I declare that I have examine											
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       Add lines 25d, 26, and 32. These are your total payments       33         Refund       34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>											
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         Refund       34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		31	,								
33       Add lines 25d, 26, and 32. These are your total payments       33         Refund       34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       34         35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>								dits 🕨	32		
Refund       34       If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid       .       .       34         Jbrect deposit?       >b       Routing number       1       2       1       0       0       3       5       8       > c Type:       Checking       Savings         See instructions.       >d       Account number       3       2       5       0       5       6       9       3       0       6       3       4       1       1       36         Amount of line 34 you want applied to your 2022 estimated tax       > 36       36       Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions.       > 37       37         You Owe       38       Estimated tax penalty (see instructions)									33	16,	991.
35a       Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	Defund	34									132.
Direct deposit?       >b       Routing number       1       2       1       0       0       0       3       5       8       > c Type:       Checking       Savings         See instructions.       >d       Account number       3       2       5       0       5       6       9       3       0       6       3       4       1	Refund	35a					•		35a		132.
See instructions.       ► d       Account number       3       2       5       0       5       6       9       3       0       6       3       4       1       1       36         Amount of line 34 you want applied to your 2022 estimated tax .       ►       36       36       37         Amount You Owe       38       Estimated tax penalty (see instructions) .       ►       38       37         Third Party Designee       Do you want to allow another person to discuss this return with the IRS? See instructions .       ►       38       9         Designee       Do you want to allow another person to discuss this return and accompanying schedules and statements, and to the best of number (PIN) ►          Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer here here here here here here here	Direct deposit?	►b								`	
36       Amount of line 34 you want applied to your 2022 estimated tax ▶ 36         Amount You Owe       37       Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	See instructions.	►d	•					0			
You Owe       38       Estimated tax penalty (see instructions)       38         Third Party Designee       Do you want to allow another person to discuss this return with the IRS? See instructions       Do you want to allow another person to discuss this return with the IRS? See instructions       Personal identification number (PIN) ▶         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h Vour signature       If the IRS sent yu Protection PIN, Sopuse's signature. If a joint return, both must sign.       Date       Your occupation       If the IRS sent yu Protection PIN, (see inst.) ▶         Spouse's signature. If a joint return, both must sign.       Date       Sopuse's occupation       If the IRS sent yu Protection PIN, (see inst.) ▶         Paid Preparer's name       Phone no.       (510) 598–5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       Date       P1N       CH         SYM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       Date       P1N       02/17/2022       P02082703       E         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (67       Firm's EIN ▶       Phone no. (67		36					36				
You Owe       38       Estimated tax penalty (see instructions)       38         Third Party Designee       Do you want to allow another person to discuss this return with the IRS? See instructions       Do you want to allow another person to discuss this return with the IRS? See instructions       Phone name ▶       Personal identification number (PIN) ▶         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h Vour signature       If the IRS sent yu Protection PIN, Sopuse's signature. If a joint return, both must sign.         Joint return?       Spouse's signature. If a joint return, both must sign.       Date       Your occupation       If the IRS sent yu Protection PIN, (see inst.) ▶         Phone no.       (510) 598–5991       Email address       NISHANTH.MEDISHETTY?@GMAIL.COM         Preparer's name       Preparer's signature       Date       Paid       PTIN       CH         Preparer's name       GLOBAL TAXES       LLC       Phone no. (67       Phone no. (67         Firm's andress > 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ▶	Amount	37	Amount you owe. Subtract	line 33 from line 2	24. For details	s on how to pay,	see instructions	. 🕨	37		
Designee       instructions       Yes. Complete below.         Designee's name       Phone no.       Phone no.       Personal identification number (PIN)         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer here your signature         Joint return?       See instructions. Keep a copy for your records.       Date       Your occupation       If the IRS sent yurdentity is been your occupation         Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       Pate       PTIN         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       02/17/2022       P02082703         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (67)         Firm's address ▶ 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ▶		38	-				1 1				
Designee       instructions       ✓       Yes. Complete below.         Designee's name       Designee's name       Phone no.       Personal identification number (PIN)         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer here your signature         Joint return?       See instructions.       Your signature       Date       Your occupation       If the IRS sent your protection PIN, (see inst.) ►         Spouse's signature. If a joint return, both must sign.       Date       SopTWARE ENGINEER       If the IRS sent your declarets in the IRS sent your declarets in the IRS sent your declarets in the IRS sent your records.         Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       Pate       PTIN         SYM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       02/17/2022       P02082703       Image: Phone no. (67)         Firm's name ►       GLOBAL TAXES LLC       Phone no. (67)       Phone no. (67)       Phone no. (67)         Firm's address ► 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ►	Third Party	Do	you want to allow another	person to discu	uss this retu	n with the IRS?	See				
name       no.       number (PIN) ▶         Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h Your signature       If the IRS sent yr (see inst.)▶         Joint return?       See instructions. Keep a copy for your records.       Spouse's signature. If a joint return, both must sign.       Date       Your occupation       If the IRS sent yr (see inst.)▶         Phone no.       (510) 598-5991       Email address       NISHANTH. MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       CH         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       02/17/2022       P02082703       I         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (67)       Phone no. (67)       Firm's EIN ▶			tructions	· · · · · ·			. 🕨 🗌 Yes. C	omplete b	elow.	X No	
Sign Here       Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer have the period of preparer (other than taxpayer) is based on all information of which preparer (other than taxpayer) is based on all information of which prepare is based on all information of which preparer (other taxpayer) is based on all information of which preparer (other taxpayer) is based on all information of which preparer (other taxpayer) is based on all inform											
Here       belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h         Here       Your signature       Date       Your occupation       If the IRS sent y, protection PIN, (see inst.) ▶         Joint return?       Spouse's signature. If a joint return, both must sign.       Date       Spouse's occupation       If the IRS sent y, protection PIN, (see inst.) ▶         Spouse's signature. If a joint return, both must sign.       Date       Spouse's occupation       If the IRS sent y, identity Protectin (see inst.) ▶         Phone no.       (510) 598-5991       Email address       NISHANTH. MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       CH         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O2/17/2022       P02082703       E         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (67)         Firm's address ▶ 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ▶			-								
Here       Your signature       Date       Your occupation       If the IRS sent yr         Joint return?       See instructions.       Spouse's signature. If a joint return, both must sign.       Date       Spouse's occupation       If the IRS sent yr         Spouse's signature. If a joint return, both must sign.       Date       Spouse's occupation       If the IRS sent yr         Identity Protection       If the IRS sent yr       Identity Protection       If the IRS sent yr         Vour records.       Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       CH         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O2/17/2022       P02082703       Imministric firm's name         Firm's name       GLOBAL TAXES       LLC       Phone no. (67         Firm's address > 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN >	Sign										
Joint return?       Software Engine       Protection PIN, (see inst.) ▶         See instructions. Keep a copy for your records.       Spouse's signature. If a joint return, both must sign.       Date       Spouse's occupation       If the IRS sent your identity Protecting (see inst.) ▶         Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       CH         Symmetry and preparer       Symmetry and sagar gupta tallar       Symmetry and sagar gupta tallar       CH         Symmetry and preparer       GLOBAL TAXES LLC       Phone no. (67)         Firm's name ▶       GLOBAL TAXES LLC       Phone no. (67)         Firm's address ▶ 2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ▶	Here								• •		0
Solid return?		, YO	ur signature		Date	Your occupation					
Keep a copy for your records.       Phone no. (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Paid Preparer       Preparer's name       Preparer's signature       Date       PTIN       CH         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O2/17/2022       P02082703       Email address         Firm's name ►       GLOBAL TAXES       LLC       Phone no. (67         Firm's address ►       2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ►	Joint return?					SOFTWARE 1	ENGINEER	(see ii	nst.) 🕨 🔽		
your records. Phone no. (510) 598-5991 Email address NISHANTH.MEDISHETTY7@GMAIL.COM Preparer's name Preparer's signature Date PTIN CH SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/17/2022 P02082703 Firm's name ► GLOBAL TAXES LLC Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ►		Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion				
Phone no.       (510) 598-5991       Email address       NISHANTH.MEDISHETTY7@GMAIL.COM         Preparer's name       Preparer's signature       Date       PTIN       CH         SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O2/17/2022       P02082703       []         Firm's name ►       GLOBAL TAXES       LLC       Phone no.       (67         Firm's address ►       2530       Pebble       Creek       Ln       Cumming       GA 30041       Firm's EIN ►									-	tion PIN, en	ter it here
Preparer's name       Preparer's signature       Date       PTIN       CH         Preparer       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       O2/17/2022       P02082703       []         Firm's name ►       GLOBAL TAXES LLC       Phone no. (67       Phone no. (67         Firm's address ►       2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ►	your rocordo.								ist.)		
Paid       SYAM PRIYA RAM SAGAR GUPTA TALLAM       SYAM PRIYA RAM SAGAR GUPTA TALLAM       02/17/2022       P02082703       □         Preparer       Use Only       Firm's name ►       GLOBAL TAXES LLC       Phone no. (67         Firm's address ►       2530       Pebble Creek Ln Cumming GA 30041       Firm's EIN ►				· · · · · ·		NISHANTH.MEDI				01	
Preparer       SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/17/2022 P02082703 L         Firm's name ►       GLOBAL TAXES LLC         Phone no. (67         Firm's address ► 2530 Pebble Creek Ln Cumming GA 30041	Paid		•							Check if:	
Use Only Firm's name ► GLOBAL TAXES LLC Phone no. (67 Firm's address ► 2530 Pebble Creek In Cumming GA 30041 Firm's EIN ►					RAM SAGAR	GUPTA TALLAM	02/17/2022			Self-em	
Firm's address ► 2530 PEDDLE Creek Ln Cumming GA 30041   Firm's EIN ►					~ '						
Go to www.irs.gov/Form1040 for instructions and the latest information. BAA REV 02/05/22 PRO					n Cummino	g GA 30041		Firm's	s EIN 🕨	30-101	
	Go to www.irs.ge	ov/Forn	1040 for instructions and the late	st information.		BAA	REV 02/05/22 PRO			Form <b>10</b>	<b>)40</b> (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

# **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

Internal Revenue Service	•	Sequence No. <b>01</b>					
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number				
NISHANTH MEDISHETTY			754-50-9882				
Part I Addition	onal Income						

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
<b>2</b> a	Alimony received		<b>2</b> a	
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, trus Schedule E		5	-8,880.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	a (	)	
b	Gambling income	b		
С	Cancellation of debt	c		
d	Foreign earned income exclusion from Form 2555	d (	)	
е	Taxable Health Savings Account distribution	e		
f	Alaska Permanent Fund dividends	ßf		
g	Jury duty pay	g		
h	Prizes and awards	h		
i	Activity not engaged in for profit income	Bi		
j	Stock options	Bj		
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	k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	31		
m		m		
n	Section 951A(a) inclusion (see instructions)	n		
ο	Section 461(I) excess business loss adjustment	0		
р	Taxable distributions from an ABLE account (see instructions) .	р		
Z	Other income. List type and amount ►	z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 104 1040-NR, line 8		10	-8,880.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	· · · · · ·	Schedu	le 1 (Form 1040) 2021

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee- officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the $\ensuremath{Armed}$ Forces. Attach $\ensuremath{Form}$	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 81	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	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	24i		
j	Housing deduction from Form 2555	24j		
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 <b>adjustments</b> there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	

REV 02/05/22 PRO

# SCHEDULE D

(Form 1040)

# **Capital Gains and Losses**

OMB No. 1545-0074

2021

Attachment Sequence No. 12

	Attach	to	Fc	orm	1040	0, 1	040	-SR,	or '	1040-	NF	₹.
	10						-					-

► 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

Department of the Treasury

Internal Revenue Service (99)

NISHANTH MEDISHETTY

Your social security number

754-50-9882

Did you dispose of any investment(s) in a qualified of	pportunity fund during the tax ye	ar? 🔄 Yes 🖄 No
If "Yes," attach Form 8949 and see its instructions for	or additional requirements for re	porting your gain or loss.

### Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)

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.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, l line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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	6,992.	7,031.	4	01.	362.
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	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	6	( )			
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .	, ,	7	362.

### 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 lines below.		<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	ay be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8		Form(s) 8949, I line 2, colum	Part II,	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	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	14	( )			
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•	.,		15	

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16	362	2.
	• 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?			
	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	<ul> <li>Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</li> <li>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.</li> </ul>			
	□ 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 smaller of:			
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	(	)
	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.			

REV 02/05/22 PRO

Schedule D (Form 1040) 2021

Form **8949** 

Department of the Treasury

Internal Revenue Service

# Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

► 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

Name(s) shown on return	Social security number or taxpayer identification number					
NISHANTH MEDISHETTY	754-50-9882					

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)

(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

<b>1</b> (a) Description of property	ion of property Date acquired disp		<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis. See the <b>Note</b> below	If you enter an enter a co	f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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)	
ROBINHOOD SECURITIES LLC	05/10/21	11/02/21	6,992.	7,031.	W	401.	362.	
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 C	al here and inclusion inclusion in the second se	lude on your 1e 2 (if Box B	6,992.	7,031.		401.	362.	

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

SCHEDULE	Ε
(Form 1040)	

13

14

15

16

17

18

19

20

21

22

23a

d

е 24

25

26

Repairs.

Supplies

Taxes .

Other (list) ►

### Supplemental Income and Loss

OMB No. 1545-0074 9M91

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

Department of the Treasury	
Internal Revenue Service (99)	► Go to и

Other interest.

Utilities . . . . . . . . . . .

Depreciation expense or depletion

Total expenses. Add lines 5 through 19 . . . .

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 . . . . . . . . . . . . . . .

on Form 8582 (see instructions) . . . . . . . .

**c** Total of all amounts reported on line 12 for all properties

Total of all amounts reported on line 18 for all properties

Total of all amounts reported on line 20 for all properties

Income. Add positive amounts shown on line 21. Do not include any losses

Deductible rental real estate loss after limitation, if any,

Total of all amounts reported on line 3 for all rental properties

b Total of all amounts reported on line 4 for all royalty properties

	ent of the Treasury	Attach to Form 1040							Attachr	nent
	evenue Service (99)	► Go to www.irs.gov/ScheduleE fo	or inst	ructions	and the	e latest in	formation.			ice No. <b>13</b>
( )	shown on return							Your socia		
NISH.								754-5		
Part		ss From Rental Real Estate and Ro						01		
		e instructions. If you are an individual, rep						1.0		
	• • • •	nents in 2021 that would require you to		. ,						es 🛛 No
<b>B</b> If "	Yes," did you or will	you file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical address c	f each property (street, city, state, ZIF	, code	e)						
Α	GANDHI NAGAR	HYDERABAD TELANGANA IN 50	0004	6						
В										
С										
1b	Type of Property	2 For each rental real estate prop above, report the number of fa	perty I	isted		Fair F	lental	Personal Use		QJV
	(from list below)	above, report the number of fa personal use days. Check the	ir rent	al and		Days		Days		QUI
Α	3	if you meet the requirements to qualified joint venture. See inst	o file a	is a	Α	344		0		
В		qualified joint venture. See inst	ructions.		В					
С					С					
Туре с	of Property:									
1 Sing	le Family Residence	e 3 Vacation/Short-Term Rental	5 La	nd		7 Self-R	ental			
2 Mult	i-Family Residence	4 Commercial	6 Ro	yalties		8 Other	(describe)			
Incom	e:	Properties:			Α		В			С
3	Rents received .		3			600.				
4	Royalties received		4							
Expen										
5	Advertising		5			80.				
6	Auto and travel (see instructions)					250.				
7	Cleaning and maintenance					600.				
8										
9										
10	Legal and other pro	fessional fees	10							
11	Management fees		11		1,	100.				
12	Mortgage interest p	aid to banks, etc. (see instructions)	12							

13

14

15

16 17

18

19

20

21

22

3,300.

2,350.

1,800.

9,480.

-8,880.

8,880.)

23a

23b

23c

23d

23e

. .

600

9,480.

24

25

26

-8,880.

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .

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

8,880.

-8,880.