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)

Taxpayer's name

l axpayer's name	Social security number
NISHANTH MEDISHETTY	754-50-9882
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2021	(Enter year you are authorizing.)
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 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
Part II Taxpayer Declaration and Signature Authorization (Be sure you get	t and keep a copy of your return)

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

I authorize <u>GLOBAL TAXES LLC</u> to enter or generate my PIN Er

	as my				
0	9	8	8	2	
			Enter five di	Enter five digits,	0 9 8 8 2 Enter five digits, but don't enter all zeros

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

Mnishanth

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature 🕨

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN	

Date > 02/16/2022

Enter five digits, but don't enter all zeros as mv

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

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

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					6 all zer		9	89	J

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		Date 🕨	
	ERO Must Retain This F Don't Submit This Form to the	 	
For Donomusel' Deduction A	at Matian and your tay wature instructions		Farm 9970 (Days 01 0001)

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		⁽⁹⁹⁾ 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
If joint return, spouse's first name and middle initial				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 S	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				Child tax cre			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)	3.
required.	4a	IRA distributions	4a			axable amoun				41)	
	5a	Pensions and annuities	5a		bТ	axable amoun	t			. 5t)	
Standard	6a	Social security benefits	6a		bΤ	axable amoun	t			. 6k)	
Deduction for -	7	Capital gain or (loss). Attach Schee	dule D if	required. If not re	quired	l, check here				7		362.
 Single or Married filing 	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 total in	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).		
 Head of 	b	Charitable contributions if you take	the stan	dard deduction (se	e inst	ructions) 12	b		300).		
household, \$18,800	С	Add lines 12a and 12b								12	c	12,850.
 If you checked any box under 	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 Cr SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/17/2022 P02082703 Cr Firm's name ▶ GLOBAL TAXES LLC Phone no. Phone no. GTOBAL TAXES LLC Phone no. Phone no. GTOBAL TAXES LLC Firm's address ▶ 2530 Pebble Creek Ln Cumming GA 30041 Firm's EIN ▶ Firm's EIN ▶ 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): 1 🗌 881</th> <th>4 2 🗌 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): 1 🗌 881	4 2 🗌 4972	3		16	14,	859.
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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				
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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				
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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 10)40 (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	Go to www.irs.gov/Form1040 for instructions and the latest information	•	Sequence No. 01				
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number				
NISHANTH MEDI	SHETTY	754-50	-9882				
Part I Addition	onal Income						

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	Alimony received		2 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 adjustments 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	, 10	40-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.	(d) Proceeds (sales price)	(e) 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 Box A checked	6,992.	7,031.	4	01.	362.
2	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					
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 any, from line 8 of your Capital Loss Carryover Worksheet in the instructions						()
7	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.		(d) Proceeds	(e) Cost	(g) 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.	(sales price)	(sales price) (or other basis) Fo		Part II, n (g)	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 Box D checked					
9	9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	10 Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824						
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, from line 13 of your Capital Loss Carryover Worksheet in the instructions						()
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 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 line 22.			
	• 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?			
	No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 			
	□ 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:			
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	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

1 (a) Description of property	(b) (c) Date sold of dispersed of		(d) Proceeds	(e) Cost or other basis. See the Note below	enter a code in column (f).		If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(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	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

	ment of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041.						Attachr	nent		
	evenue Service (99)	► Go to www.irs.gov/ScheduleE fo	or inst	ructions	and the	e latest in	formation.			ice No. 13
()	Name(s) shown on return Your social									
NISH.								754-5		
Part	Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use									
		e instructions. If you are an individual, rep						1.0		
	A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions									
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		
	(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	ructio	ns.	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	e instructions)	6			250.				
7	Cleaning and maintenance					600.				
8	Commissions		8							
9										
10	Legal and other professional fees									
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.