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)

Taxpaye	er's name	Social	securit	y numbe	er
ANI	RUDH REDDY KANDIMALLA	09	9-19-	-9418	
Spouse	's name	Spous	e's soc	ial secur	rity number
_					
Part	Tax Return Information – Tax Year Ending December 31, 2021 (Enter	year	you a	re auth	norizing.)
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	87,958.
2	Total tax			2	12,276.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3	11,600.
4	Amount you want refunded to you			4	
5	Amount you owe			5	676.
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and I	ceep a	a cop	y of yo	our return)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov			0	·

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		9 9 4 1 8
X I authoriz	e GLOBAL TAXES LLC	to enter or generate my PIN	as my
signature	ERO firm name on the income tax return (original or amende	ed) I am now authorizing.	Enter five digits, but don't enter all zeros
if you are	er my PIN as my signature on the income tax e entering your own PIN and your return is fil		
below. Your signature ►	Anendy K	Date ►3/31	1/2022
Spouse's PIN: ch	eck one box only		
I authoriz	e	to enter or generate my PIN	as my
signature	ERO firm name on the income tax return (original or amende	ed) I am now authorizing.	Enter five digits, but don't enter all zeros
I will ente	er my PIN as my signature on the income tax e entering your own PIN and your return is fil	return (original or amended) I am now author	0

Date											
Practitioner PIN Method Returns Only—continue below											
5	8	7						9	8	9	
1	ie bel		ie below	5 8 7 2	5 8 7 2 7	5 8 7 2 7 8	5 8 7 2 7 8 6	ie below	5 8 7 2 7 8 6 1 9	5 8 7 2 7 8 6 1 9 8	5 8 7 2 7 8 6 1 9 8 9

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 Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So						
For Denominary Reduction Act Nation and your tax set	un instructions		Form 9970 (Dov. 01 2021)			

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

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

Form 1040-V 2021

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service

ANIRUDH REDDY

18727 PENN FARM DR

CYPRESS TX 77433



Form 1040-V Payment Voucher

Use this voucher when making a payment with Form 1040.
 Do not atople this voucher or your payment to Form 1040.

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

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

(99)

KANDIMALLA

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

Enter the amount of your payment

676.

REV 03/26/22 PRO 1555

INTERNAL REVENUE SERVICE

P.O. BOX 1214 CHARLOTTE, NC 28201-1214

04474479 Z1 KAND 30 0 505775 P70

E1040		Intment of the Treasury-Internal Revenue Servi		(99) urn	202	1	OMB No. 1545	-0074	IRS Use	e Only	—Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single D Married filing jointly u checked the MFS box, enter the n on is a child but not your dependent	ame of y	-			Head of ed the HOH o						
Your first name	and mi	ddle initial	Last na	me							Your so	cial securit	y number
ANIRUDH	REDI	YC	KANE	IMALL	A						099-	19-941	8
lf joint return, s	oouse's	first name and middle initial	Last na	me							Spouse	's social see	curity number
Home address 18727 PI	•	r and street). If you have a P.O. box, see FARM DR	instructio	ons.				ŀ	Apt. no.		Check	here if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces belo	w.	Stat	е	ZIP co	ode		•		tly, want \$3
CYPRESS						TX	C	774	133			ow will not	Checking a change
Foreign country	r name		F	Foreign pro	vince/state/	count	у	Foreiç	gn postal o	code		k or refund.	0
At any time du	ring 20	21, did you receive, sell, exchange,	or othe	rwise dis	cose of any	/ fina	ncial interest i	n any	virtual c	urrer	ncy?	Yes	X No
Standard Deduction		eone can claim: Vou as a de Spouse itemizes on a separate retur	n or you		ual-status			ra hofe			1057	Is bl	
		Were born before January 2, 1	907										
Dependent	•	rst name Last name			ocial security number		(3) Relationsh to you	np	(4) ♥ Child	•		r (see instru	ctions): her dependents
lf more than four	(1) 1	Last hame					-)		Offild		eun		
dependents,													
see instruction	s ——									$\overline{\square}$			
here										$\overline{\square}$		[=
	1	Wages, salaries, tips, etc. Attach F	Form(s)	N-2 .							. 1	· · · ·	
Attach	2a		2a			b Ta	axable interes	t.			2t		
Sch. B if	3a	· · ·	3a				rdinary divide				. 3b)	
required.	4a	IRA distributions	4a				axable amoun				. 4b)	
	5a	Pensions and annuities	5a			b Ta	axable amoun	t			. 5b)	
Standard	6a	Social security benefits	6a			b Ta	axable amoun	t			. 6b		
 Deduction for – Single or 	7	Capital gain or (loss). Attach Sche	dule D if	required	. If not requ	ired,	check here			►[7		3,954.
Married filing	8	Other income from Schedule 1, lin	e 10								. 8	-	-9,250.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is you	r total inco	ome				.	▶ 9	8	87 , 958.
 Married filing jointly or 	10	Adjustments to income from Sche	dule 1, l	ine 26						•	. 10)	
Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted g	ross incor	ne		· ·		.	► <u>1</u> 1	5	87 , 958.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	i ons (from	n Schedule	A)	12	a	12,	55().		
Head of household	b	Charitable contributions if you take	the star	idard ded	uction (see	instru	uctions) 12	b		300).		
household, \$18,800	С							• •		•	. 12	c	12,850.
 If you checked any box under 	13	Qualified business income deduct	ion from	Form 89	95 or Form	8995	5-A				. 13	_	
Standard Deduction,	14	Add lines 12c and 13								•	. 14	_	12,850.
see instructions.	15	Taxable income. Subtract line 14	trom lin	e 11. lt ze	ero or less,	enter	r-U			•	. 15		75,108.

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

Form **1040** (2021)

Form 1040 (2021	1)				Page 2
	16	Tax (see instructions). Check if any from Form(s): 1 2 8814 2 4972 3	· · ·	. 16	12,276.
	17	Amount from Schedule 2, line 3		. 17	
	18	Add lines 16 and 17		. 18	12,276.
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 88	312	. 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	12,276.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		. 23	0.
	24	Add lines 22 and 23. This is your total tax		▶ 24	12,276.
	25	Federal income tax withheld from:			
	а	Form(s) W-2	25a 11,6	00.	
	b	Form(s) 1099	25b		
	с	Other forms (see instructions)	25c		
	d	Add lines 25a through 25c		. 250	11,600.
If you have a	26	2021 estimated tax payments and amount applied from 2020 return		. 26	
qualifying child,	27a	Earned income credit (EIC)	27a		
attach Sch. EIC.		Check here if you were born after January 1, 1998, and before			
		January 2, 2004, and you satisfy all the other requirements for			
	h	taxpayers who are at least age 18, to claim the EIC. See instructions ► □ Nontaxable combat pay election 27b			
	b				
	C	Prior year (2019) earned income 27c	00		
	28		28		
	29 00		29		
	30		30		
	31		31		
	32	Add lines 27a and 28 through 31. These are your total other payments and re			
	33	Add lines 25d, 26, and 32. These are your total payments			
Refund	34 25 -	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount y	-	. 34	
Direct depecit?	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check I Routing number $ X X X X X X X X X X$. 35 a	1
Direct deposit? See instructions.	►b	Routing number X		ings	
	► d				
A	36		36	b 07	676.
Amount You Owe	37 38	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see Estimated tax penalty (see instructions)	1	▶ 37	070.
			38		
Third Party Designee		you want to allow another person to discuss this return with the IRS? Se	Yes. Comp	lete below	. 🗙 No
Designee		signee's Phone		identification	
		me no.	number (
Sign	Un	der penalties of perjury, I declare that I have examined this return and accompanying schedu	les and statements,	and to the b	est of my knowledge and
Here	bel	lief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based	d on all information of	which prepa	arer has any knowledge.
nere	Yo	ur signature Date Your occupation			ent you an Identity
	N.	frond dy, k 3/31/2022 DETVATE EMD	OVEE	(see inst.)	PIN, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign. Date Spouse's occupation		. ,	ent your spouse an
Keep a copy for	Sp	ouse's signature. It a joint return, both must sign. Date Spouse's occupation			ptection PIN, enter it here
your records.				(see inst.)	
	Ph	one no. (832) 952-6366 Email address ANIRUDHREDDYKANDI	MALLA@GMAIL.COM		
Doid	Pre		Date PT	IN	Check if:
Paid	SYAM	1 PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM C	3/30/2022 PO	2082703	Self-employed
Preparer	Firi	m's name ► GLOBAL TAXES LLC	ł	Phone no.	(678)965-9522
				1	
Use Only	Firi	m's address ▶ 2530 Pebble Creek Ln Cumming GA 30041		Firm's EIN	▶ 30-1017196

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 I	Revenue Service	► Go to www.irs.gov/Form1040 for instructions and the late	est information.	,	S	Sequence No. 01
	()	orm 1040, 1040-SR, or 1040-NR				ecurity number
		KANDIMALLA		099-1	9-94	±18
Par	Additi	onal Income				
1	Taxable ref	unds, credits, or offsets of state and local income taxes	8	• •	1	
2 a	,	ceived			2a	
b	Date of orig	inal divorce or separation agreement (see instructions) \blacktriangleright	•			
3	Business in	come or (loss). Attach Schedule C			3	
4	Other gains	or (losses). Attach Form 4797			4	
5		l estate, royalties, partnerships, S corporations, tru			5	-9,250.
6		ne or (loss). Attach Schedule F			6	
7		nent compensation			7	
8	Other incor	· · ·				
а		ng loss	8a ()		
b	•	ncome	8b	,		
С	-	n of debt	8c			
d		ned income exclusion from Form 2555	8d ()		
е	Ū.	alth Savings Account distribution	8e	,		
f		nanent Fund dividends	8f			
g		ay	8g			
h		awards	8h			
i		engaged in for profit income	8i			
i	•	ns	8j			
k	Income from	m the rental of personal property if you engaged in or profit but were not in the business of renting such	8k			
I		nd Paralympic medals and USOC prize money (see	81			
m	Section 951	1(a) inclusion (see instructions)	8m			
n	Section 951	1A(a) inclusion (see instructions)	8n			
ο	Section 461	l (I) excess business loss adjustment	80			
р	Taxable dis	tributions from an ABLE account (see instructions) .	8p			
Z	Other incor	ne. List type and amount ►	8z			
9	Total other	income. Add lines 8a through 8z			9	
10	Combine li 1040-NR, li	nes 1 through 7 and 9. Enter here and on Form 10			10	-9,250.
For Pa	perwork Reduct	tion Act Notice, see your tax return instructions.				ile 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 03/26/22 PRO

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

	Attach to
Department of the Treasury	Go to www.irs.gov/Schee

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.

2021 Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return

ANIRUDH REDDY KANDIMALLA

Your social security number

099-19-9418

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?	Yes	🗙 No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting	vour 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) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1 a	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	26,551.	23,098.	5(01.	3,954.
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		4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	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	3,954.

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (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, I line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) 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 Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
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 from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet 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	3,95	4.
	• 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 03/26/22 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
ANIRUDH REDDY KANDIMALLA	099-19-9418

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)

_												
	/D	Chart tarm	tranaationa	roported on	Earm(a)	1000 D	abouing	haala	woon't	roported	to the	IDC
	(D)	Short-term	transactions	reported on	FOULTS	1099-0	SHOWING	Dasis	wasnii	reported	o trie	IDO
	·-/											

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below			(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.) Date sold or disposed of (Mo., day, yr.) Proceeds (sales price) (see instructions) 01/01/21 12/31/21 6, 977. 2 01/01/21 12/31/21 19, 574. 3 3 3 4 3 3 5 01/01/21 12/31/21 19, 574. 5 01/01/21 12/31/21 19, 574. 5 3 3 3 6 3 3 3 7 3 3 3 6 3 3 3 7 3 3 3 6 3 3 3 7 3 3 3 7 3 3 3 7 3 3 3 3 7 3 3 3 3 8 3 3 3 3 7 3 3 3 3 8 3 <td>and see Column (e) in the separate instructions</td> <td>(f) Code(s) from instructions</td> <td>(g) Amount of adjustment</td> <td colspan="2">from column (d) and combine the result with column (g)</td>	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)		
ROBINHOOD CRYPTO LLC	01/01/21	12/31/21	6,977.	6,646.			331.
Robinhood Securities LLC	01/01/21	12/31/21	19,574.	16,452.	W	501.	3,623.
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 inc is checked), lir	lude on your ne 2 (if Box B	26,551.	23,098.		501.	3,954.

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

OMB No. 1545-0074

Attachment Sequence No. 13

20

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

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041. ctions and the latest information.

•		
	nent of the Tr Revenue Ser	

)	Go to www.irs.gov/ScheduleE for instruction

	shown on return							social securit	
	UDH REDDY KANDI							9-19-941	
Part		s From Rental Real Estate and Ro instructions. If you are an individual, rep	-					• • •	
A Dic	you make anv pavme	ents in 2021 that would require you t	o file Form(s) 1099? S	ee inst	ructions .		🗆 🗎	/es 🛛 No
		ou file required Form(s) 1099?	· · ·	,					res 🗌 No
1a	Physical address of	each property (street, city, state, Zl	P code)						
A		ALGONDA TELANGANA IN 508							
B			201						
C									
1b	Type of Property	2 For each rental real estate pro			Fair	Rental	Dore	onal Use	
10	(from list below)	2 For each rental real estate pro above, report the number of fa	air rental and			Days		Days	QJV
Α	, ,	personal use days. Check the	OJV box on	ly	-	-		-	
 	3	if you meet the requirements t qualified joint venture. See ins	to file as a	A B		365		0	
_ C				C					
	of Property:								
	le Family Residence	3 Vacation/Short-Term Rental			7 Self-				
	ti-Family Residence	4 Commercial	6 Royaltie		8 Othe	er (describe)			
Incom	-	Properties:		Α		В	}		C
3			3		550.				
4	Royalties received .		4						
Expen	ses:								
5	Advertising		5						
6	Auto and travel (see i	nstructions)	6						
7	Cleaning and mainter	nance	7		800.				
8	Commissions		8						
9			9						
10		essional fees	10						
11	•		11	1.	500.				
12		id to banks, etc. (see instructions)	12						
13			13						
14			14	2.	100.				
15	•		15		500.				
16			16						
17			17	2.	900.				
18		e or depletion	18	<i>∠1</i>	500.				
19	Other (list)		19						
20	· · · · · · · · · · · · · · · · · · ·	lines 5 through 19	20	9	800.				
		-		<i>, ,</i>	000.				
21		line 3 (rents) and/or 4 (royalties). If							
	file Form 6198	instructions to find out if you must	1 1	_0	250.				
~~			21	-9,	230.				
22		l estate loss after limitation, if any,		0 0		,			
00-		Istructions)	22 (9,2	250.)	(
23a		eported on line 3 for all rental prope		• •	23a		55	U.	
b		eported on line 4 for all royalty prop			23b				
c		eported on line 12 for all properties			23c				
d		eported on line 18 for all properties			23d			_	
е		eported on line 20 for all properties			23e		9,80		
24		e amounts shown on line 21. Do no		5				24	
25	Losses. Add royalty lo	osses from line 21 and rental real estate	e losses from	line 22. E	nter tot	al losses her	e. 🗋	25 (9,250.
26	Total rental real est	ate and royalty income or (loss).	Combine lir	nes 24 an	d 25. E	Enter the res	sult		
		V, and line 40 on page 2 do not					on		
	Schedule 1 (Form 104	40), line 5. Otherwise, include this a	mount in the	e total on	line 41	on page 2		26	-9,250.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021