Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpayer's name	Social security number							
TEJA MARAM	125-99-1243							
Spouse's name	Spouse's social security number							
Part I. Tay Poturn Information - Tay Year Ending December 31 2001 (Enter	vear you are authorizing)							
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 97,172.							
2 Total tax	. 2 11,800.							
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 17,715.							
4 Amount you want refunded to you	4 5,915.							
5 Amount you owe	5							
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)								

Under penalties of periury. 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

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

9	1	2	4	3	as mv
Ent don	er fiv n't er	/e di iter a	gits, all ze	but ros	asiny

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.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

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

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 sign	ature 🕨 🛛 Da	ate 🕨					 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III C	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		6 all ze	 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 🕨	
	O Must Retain This Form — Semit This Form to the IRS Unless		
For Denemicarly Deduction Act Nation	ur tov veture instructions		Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/05/22 PRO

E1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn	202	21	OMB No. 154	45-0074	IRS U	se Only	–Do not v	vrite or staple	in this space.
Filing Statu Check only one box.	lf yo	Single Married filing jointly ou checked the MFS box, enter the n son is a child but not your dependen	ame of	-	separately use. If you					,		, 0	low(er) (QW) he qualifying
Your first name	e and m	iddle initial	Last na	me							Your so	ocial securi	ty number
TEJA			MARA	M							125-	99-124	3
lf joint return, s	spouse's	s first name and middle initial	Last na	me							Spouse	's social se	curity number
8101 SA	NFEL	er and street). If you have a P.O. box, see IPE BLVD				01-1	4-		Apt. no. 123		Check	here if you,	on Campaign , or your htly, want \$3
	DOST OTTI	ce. If you have a foreign address, also co	omplete s	paces bei	OW.	Sta		ZIP o			to go to	o this fund.	Checking a
AUSTIN					e viz e e /etet				729	aada	1	low will not x or refund	0
Foreign countr	y name			-oreign pr	ovince/stat	e/couri	ty	Forei	gn postal	code	your ta		
At any time du	uring 20	021, did you receive, sell, exchange,	, or othe	rwise dis	spose of a	ny fina	ancial interes	t in any	virtual	curre	ncy?	Yes	X No
Standard Deduction		eone can claim:	•		•		a dependen [:]	t					
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	957	Are bl	ind S	pouse	: 🗌 Was b	orn bef	ore Jan	uary 2	2, 1957	🗌 ls b	lind
Dependent	s (see	instructions):		(2) S	Social secur	ity	(3) Relation	ship				or (see instru	
If more	(1) F	irst name Last name	number to you Child tax cre		redit	Credit for ot	ther dependents						
than four dependents,													<u> </u>
see instruction	IS ——												<u> </u>
and check here ►													
	1	Wages, salaries, tips, etc. Attach F	Form(c) \	N 2							. 1		└┘ 11,172.
Attach	2a	U	2a	vv-z .	· · ·		axable intere	· · ·	• •	•	. 1 2k		11,1/2.
Sch. B if	3a	· · –	3a				Ordinary divid		• •	•	. <u></u> 3k		
required.	4a		4a				axable amou		• •	·	. 4k		
	5a		5a				axable amou				. 5k		
Standard	6a	Social security benefits	6a			bТ	axable amou	unt.			. 6k)	
Deduction for -	7	Capital gain or (loss). Attach Sche	dule D if	required	d. If not re	quired	, check here			▶ [7		-3,000.
 Single or Married filing 	8	Other income from Schedule 1, lin									. 8	-	11,000.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is yo	ur total in	come					▶ 9		97,172.
 Married filing 	10	Adjustments to income from Sche	dule 1, l	ine 26							. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted	gross inc	ome	· · · .				▶ 11		97,172.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	i ons (fro	m Schedu	le A)	1	2a	12	,55	0.		
 Head of 	b	Charitable contributions if you take	the star	ndard deo	duction (se	e instr	ructions) 1	2b		30	0.		
household, \$18,800	с	Add lines 12a and 12b									. 12	c	12,850.
 If you checked 	13	Qualified business income deduct	ion from	Form 8	995 or For	m 899	5-A				. 13		
any box under Standard	14												12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. lf z	ero or less	s, ente	er-0				. 15	5	84,322.

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

Form **1040** (2021)

Go to www.irs.g	ov/Form	1040 for instructions and the late	st information.		BAA	REV 02/05/22 PRO			Form 1	040 (2021)
	Firr	m's address ► 2530 Pebb	le Creek L	n Cummin	g GA 30041		Firm	's EIN ▶	30-10	17196
Use Only		n's name 🕨 GLOBAL TAX					Phor	ne no. (678)965	-9522
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAN	1 02/17/2022	P0208		Self-er	
Paid			Preparer's signat						_	moloved
		one no. (469)569-0393 parer's name		Email address	Teja.maran	n57@gmail.co	m PTIN		Check if:	
Keep a copy for your records.							lden (see		ection PIN, e	
Joint return? See instructions.	Sp	ouse's signature. If a joint return, t	oth must sign	Date	SOFTWARE Spouse's occupa			inst.) ►	nt your spou	se an
Here	You	ur signature		Date	Your occupation		Prote	ection PI	nt you an Ide N, enter it h	
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com								
		signee's ne ►		Phone no.			onal identi per (PIN)			
Third Party Designee	ins		person to disc			. 🕨 🗌 Yes. Co	•		X No	
You Owe	38	Estimated tax penalty (see in				38				
Amount	37	Amount you owe. Subtract					. 🕨	37		
	36	Amount of line 34 you want a				36				
See instructions.	►d	Account number 7 9 3								
Direct deposit?	►b	Routing number 0 4 4	0 0 0 0	3 7			Savings			
Relutio	35a	Amount of line 34 you want						35a		,915.
Refund	34	If line 33 is more than line 24						34		,915.
	33	Add lines 25d, 26, and 32. T						33	17	,715.
	32	Add lines 27a and 28 throug				-	lits 🕨	32		
	31	Amount from Schedule 3, lin				31				
	29 30	Recovery rebate credit. See				30				
	28 29	Refundable child tax credit or American opportunity credit				28 29				
	C 20	Prior year (2019) earned inco			Sabadula 0010	20				
	b	Nontaxable combat pay elec				-				
		January 2, 2004, and you taxpayers who are at least a	ge 18, to claim t	he EIC. See in	_					
attach Sch. EIC.		Check here if you were b	oorn after Janu	ary 1, 1998,	and before					
If you have a ^l qualifying child,	27a	Earned income credit (EIC)		• •	37	27a				
	26	2021 estimated tax payment						26		
	d	Add lines 25a through 25c						25d	17	,715.
	c	Other forms (see instructions				25c		-		
	b	Form(s) 1099				25b	<u>,,,,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		
	25 a	Form(s) W-2				25a 17	,715.			
	24 25	Federal income tax withheld	5				. 🕨	24	11	,800.
	23	Other taxes, including self-e Add lines 22 and 23. This is						23	11	<u>0.</u> ,800.
	22	Subtract line 21 from line 18	-					22	11	,800.
	21	Add lines 19 and 20						21		,500.
	20	Amount from Schedule 3, lin						20		<u>,500.</u>
	19	Nonrefundable child tax cred						19		
	18	Add lines 16 and 17						18	14	,300.
	17	Amount from Schedule 2, lin	e3					17		
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	14	,300.
Form 1040 (202	,							i		Page 2

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number 125-99-1243

TEJA MARAM

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

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	8	1	
2 a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	<u> </u>		
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, transcribed and Schedule E		5	-11,000.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such			
	property	8k	-	
•	instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
ο	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
z	Other income. List type and amount	-		
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8		10	-11,000.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		Schedul	e 1 (Form 1040) 2021

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basic officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	3	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) \blacktriangleright			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81 24c			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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			
j	Housing deduction from Form 2555			
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 to in here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

REV 02/05/22 PRO

Additional Credits and Payments

OMB No. 1545-0074 20

1

► Attach to Form 1040, 1040-SR, or 1040-NR.

Departm Internal		At	tachment equence No. 03			
	()	rm 1040, 1040-SR, or 1040-NR				ecurity number
Pa	A MARAM	fundable Credits		125-99	9-12	43
1	0	credit. Attach Form 1116 if required			1	
2	Form 2441	child and dependent care expenses from Form 2441, line			2	
3	Education c	redits from Form 8863, line 19		[3	
4	Retirement	savings contributions credit. Attach Form 8880		[4	
5	Residential	energy credits. Attach Form 5695			5	
6	Other nonre	fundable credits:				
а	General bus	siness credit. Attach Form 3800 6a				
b	Credit for p	rior year minimum tax. Attach Form 8801 6b				
С	Adoption cr	edit. Attach Form 8839............... 6c				
d	Credit for th	e elderly or disabled. Attach Schedule R 6d				
е	Alternative r	motor vehicle credit. Attach Form 8910 6e				
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936 6f	2,	500.		
g	Mortgage in	terest credit. Attach Form 8396 6g				
h	District of Co	olumbia first-time homebuyer credit. Attach Form 8859 6h				
i	Qualified ele	ectric vehicle credit. Attach Form 8834 6i				
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911 6j				
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912 6k				
- I	Amount on	Form 8978, line 14. See instructions 61				
z	Other nonref	undable credits. List type and amount ►				
7		6z			-	
7 8		nonrefundable credits. Add lines 6a through 6z		-	7	2,500.
0	line 20				8	2,500.
				(con	tinu	ed on page 2)
For Pa	perwork Reduct	ion Act Notice, see your tax return instructions. BAA REV	/ 02/05/22 PRC			e 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
z	Other payments or refundable credits. List type and amount	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-SR, or 1040-NR,	15	
	BAA REV	02/05/22 PRO	Schedu	le 3 (Form 1040) 2021

SCHEDULE D

(Form 1040)

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/ScheduleD for instructions and the latest information.
 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2021 Attachment Sequence No. 12

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

Department of the Treasury

TEJA MARAM

Your social security number

125-99-1243

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting 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) Adjustments to gain or loss f Form(s) 8949, P line 2, column	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	3,405.	6,517.			-3,112.
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 an Worksheet 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	-3,112.

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. This form may be easier to complete if you round off cents to whole 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			
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	-3,112.
	• 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	(3,000.)
	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.		
	X 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 ide	ntification number
TEJA MARAM	125-99-1243	

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) property Date acquired dispersed of		(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Crypto LLC	01/01/21	04/16/21	552.	90.			462.
Robinhood Securities LLC	01/01/21	08/20/21	2,853.	6,427.			-3,574.
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	3,405.	6,517.			-3,112.

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

Internal F	Revenue Service (99)	► Go to www.irs.gov/ScheduleE f	or instru	ictions a	ind the	atest	information		,	Sequenc	ce No. 13
Name(s)	shown on return							You	ur social se	curity n	umber
TEJA	MARAM							12	25-99-2	L243	
Part	Income or Los	ss From Rental Real Estate and Ro	yalties	Note:	If you a	are in th	e business c	of renti	ing persor	al prop	perty, use
	Schedule C. See	e instructions. If you are an individual, rep	ort farm	rental in	come c	or loss fi	rom Form 48	835 or	n page 2, li	ne 40.	
A Dio	l you make any paym	ents in 2021 that would require you to	o file Fo	rm(s) 10	99? S	ee instr	uctions .			Ye	s 🛛 No
B If "	Yes," did you or will y	you file required Form(s) 1099?								Ye	s 🗌 No
1a		each property (street, city, state, ZIF									
Α	REDDY COLONY	MIRYALGUDA TELANGANA IN	5082	07							
В											
С											
1b	Type of Property	2 For each rental real estate prop	perty lis	ted		Fair	Rental	Per	sonal Us	e	QJV
	(from list below)	above, report the number of fa	air rental	and		0	Days		Days		QUI
Α	3	 personal use days. Check the if you meet the requirements to 	o file as	a	Α		365		0		
В		qualified joint venture. See inst	truction	s.	В						
С					С						
	of Property:										
1 Sing	gle Family Residence	3 Vacation/Short-Term Rental	5 Lan	d	7	7 Self-	Rental				
	ti-Family Residence	4 Commercial	6 Roy	alties	8	3 Othe	r (describe)			
Incom		Properties:			Α		E	3			С
3			3			600.					
4			4								
Exper											
5			5								
6		instructions)	6								
7		enance	7		1,	500.					
8			8								
9			9								
10		essional fees	10								
11			11		1,	000.					
12		aid to banks, etc. (see instructions)	12								
13			13								
14			14			800.					
15			15 16		Ζ,	800.					
16 17			17		2	500.					
18		e or depletion	18		з,:	500.					
19	Other (list)	•	19								
20		l lines 5 through 19	20		11 /	600.					
	•	n line 3 (rents) and/or 4 (royalties). If	20		<u>тт</u> ,						
21		e instructions to find out if you must									
			21		-11,	000.					
22		al estate loss after limitation, if any,			/						
		nstructions)	22 (11.0	00.)	()()
23a		reported on line 3 for all rental prope	· ·		,_	23a	\	б	00.		/
b		reported on line 4 for all royalty prop				23b					
С		reported on line 12 for all properties				23c					
d		reported on line 18 for all properties				23d					
е		reported on line 20 for all properties				23e	1	L1,6	00.		
24		ve amounts shown on line 21. Do no		le any lo	osses				24		
25		osses from line 21 and rental real estate		-		nter tota	al losses her	re.	25 (1	1,000.)
26		tate and royalty income or (loss).									
		IV, and line 40 on page 2 do not									

	Supple	emental	Ince	ome	and I	LOSS
Exam rantal real actate	rovaltion	nortnorohi		00000	rotiona	onto

alties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041. ► Go to www.irs.gov/ScheduleE for instructions and the latest information.

6 12 Attachment

OMB No. 1545-0074

SCHEDULE E

Department of the Treasury Internal Revenue Service (99)

(Form 1040)

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

Schedule E (Form 1040) 2021

-11,000.

26



Internal Revenue Service

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles)

OMB No. 1545-2137

► Attach to your tax return.

► Go to www.irs.gov/Form8936 for instructions and the latest information.

Attachment Sequence No. 69

Name(s) shown on return TEJA MARAM Identifying number 125-99-1243

Note:

• Use this form to claim the credit for certain plug-in electric vehicles.

Claim the credit for certain alternative motor vehicles on Form 8910.

Part				
Use a separate column for each vehicle. If you need more columns, use additional Forms 8936 and include the totals on lines 12 and 19			(a) Vehicle 1 2021	(b) Vehicle 2
			TESLA	
1	Year, make, and model of vehicle	1	TESLA MODEL Y	
2	Vehicle identification number (see instructions)	2	5YJYGDEE3MF094943	
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3	02/24/2021	
4a	If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see			
	instructions	4a	60,690.	
b	Phase-out percentage (see instructions)	4b	100.00 %	%
с	Tentative credit. Multiply line 4a by line 4b	4c	60,690.	

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

Part	II Credit for Business/Investment Use Part of	Vehi	cle	
5	Business/investment use percentage (see instructions)	5	9	%
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6		
7	Section 179 expense deduction (see instructions) .	7		
8	Subtract line 7 from line 6	8		
9	Multiply line 8 by 10% (0.10)	9		
10	Maximum credit per vehicle	10	2,50	2,500
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11		
12	Add columns (a) and (b) on line 11		12	
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)			
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Sch amount on Form 3800, Part III, line 1y	nedule	e K. All others, report this	

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

Part III Credit for Personal Use Part of Vehicle

			(a) Vehicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15	60,6	90.	
16	Multiply line 15 by 10% (0.10)	16	6,0	69.	
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17	2,5	00.	
18	For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17	18	2,5	00.	
19	Add columns (a) and (b) on line 18			19	2,500
20	Enter the amount from Form 1040, 1040-SR, or 1040-NR,	line	18	20	14,300
21	Personal credits from Form 1040, 1040-SR, or 1040-NR (see ir	structions)	21	
22	Subtract line 21 from line 20. If zero or less, enter -0- and the personal use part of the credit			22	14,300
23	Personal use part of credit. Enter the smaller of lin Schedule 3 (Form 1040), line 6f. If line 22 is smaller than li			23	2,500

Form 8582

Department of the Treasury

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

Passive Activity Loss Limitations

► See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 20 Attachment Sequence No. 858

Identifying number

TEJA MARA	M	125-99	-1243
Part I	2021 Passive Activity Loss		
	Caution: Complete Parts IV and V before completing Part I.		
	Estate Activities With Active Participation (For the definition of active participation, see Spece or Rental Real Estate Activities in the instructions.)	cial	

1a	Activities with net income (enter the amount from Part IV, column (a)) 1a	0.		
b	Activities with net loss (enter the amount from Part IV, column (b)) 1b (11	L,000.)		
С	Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c ()		
d	Combine lines 1a, 1b, and 1c		1d	-11,000.
All Ot	ther Passive Activities			
2a	Activities with net income (enter the amount from Part V, column (a)) 2a			
b	Activities with net loss (enter the amount from Part V, column (b)) 2b ()		
С	Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c ()		
d	Combine lines 2a, 2b, and 2c		2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with you	r return;		
	all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Re	port the		
	losses on the forms and schedules normally used		3	-11,000.

If line 3 is a loss and: • Line 1d is a loss, go to Part II.

• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. ----

Pai	t II Special Allowance for Rei	ntal Real Estate	Activities With	Active Pa	rticipa	ation		
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruct	tions for an	examp	ole.		
4	Enter the smaller of the loss on line 1d or the loss on line 3						4	11,000.
5	Enter \$150,000. If married filing separ	eparately, see instructions						
6	Enter modified adjusted gross income, but not less than zero. See instructions 6 108,172.					08,172.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	150,000. If married filing separately, see instructions						
7	Subtract line 6 from line 5					41,828.		
8	8 Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions						8	20,914.
9	9 Enter the smaller of line 4 or line 8						9	11,000.
Par	t III Total Losses Allowed							
10	Add the income, if any, on lines 1a an	d 2a and enter the	total				10	0.
11	•	Total Losses Allowed a the income, if any, on lines 1a and 2a and enter the total						
Par								
		Currer	nt year	Prior ye	ars	Ove	rall ga	ain or loss
Name of activity		(a) Net income (line 1a)	(b) Net loss (line 1b)	s (c) Unallowed loss (line 1c) (d) Gi		(d) Gair	ı	(e) Loss
REDDY COLONY		0.	11,000.					11,000.

Total. Enter on Part I, lines 1a, 1b, and 1c ►	0.	11,000.							

For Paperwork Reduction Act Notice, see instructions. BAA REV 02/05/22 PRO

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Partv	Complete This Part Belo	Te Fart I, Lilles Z	a, 20,			JUONS.			
		Current year			Prior years		Overall gain or loss		
Name of activity		(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss
		(inte Za)			1033 (111	6 20)			
Total. Enter Part VI	on Part I, lines 2a, 2b, and 2c ► Use This Part if an Amou	Int Is Shown on I	Dart II	line 9 S	ee instruc	tions			
			art II,	Line 3. 0					
	Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ra	atio	(c) Special allowance		(d) Subtract column (c) from column (a).
REDDY CO	DLONY	E Ln 22	11,000.		1.0000000		11,000.		0.
Total				11,000.	1.0	0	11,00	0.	0.
Part VII	Allocation of Unallowed	Losses. See instr	uction	IS.	•		•		
	Name of activity	Form or sch and line nur to be reporte (see instruct	nber ed on	(a) I	Loss	((b) Ratio		Unallowed loss
Total							1.00		
Part VIII	Allowed Losses. See inst	ructions					1.00		
		Form or sch	odulo						
	Name of activity	and line nur to be reporte (see instruct	nber ed on	(a) l	Loss	(b) Unallowed loss		(c) Allowed loss
.									
Total			. 🕨						

REV 02/05/22 PRO

Form **8582** (2021)