Form <b>8879</b>
(Rev. January 2021)
Department of the Treasury

Internal Revenue Service

# **IRS e-file Signature Authorization**

OMB No. 1545-0074

Social accurity number

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

Submission Identification Number (SID)

Taxpayor'a pama

талрау		Social Security	/ numb						
VIN	USHA REDDY KATIKI REDDY	776-21-	4059	9					
Spouse	's name	Spouse's socia	al secu	irity number					
Par	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	92,750.					
2	Total tax	[	2	13,332.					
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	[	3	15,342.					
4	Amount you want refunded to you	[	4	2,010.					
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	
				ERO firm name		5

1	4	0	5	9	
Ent dor	er fiv n't er	ve di Iter a	gits, all ze	but ros	as my

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 >	RO's signature ► Date ►							
	) Must Retain This Form — See it This Form to the IRS Unless							
For Denominant's Deduction Act Nation and you	tov vetum instructions		Earm 8879 (Bay, 01 2021)					

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 04/01/22 PRO

E <b>104(</b>		artment of the Treasury-Internal Revenue Serv S. Individual Income Ta		(99) <b>urn</b>	20	21	OMB No. 154	45-0074	IRS U	se Only	r−Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly u checked the MFS box, enter the r on is a child but not your dependen	name of	-		. ,	)  Head c ked the HOH			,			
Your first name	and m	ddle initial	Last na	ime							Your so	cial securi	ty number
VINUSHA	RED	אַס	KATI	IKI RI	TODY							21-405	-
		first name and middle initial	Last na								-		curity number
Home address		er and street). If you have a P.O. box, see ANE	e instructi	ons.					Apt. no.		Check	here if you,	
City, town, or p	oost offi	ce. If you have a foreign address, also co	omplete s	paces be	low.	Sta	ite	ZIP	code				ntly, want \$3 Checking a
WHEELIN	G					II	L	60	090			low will not	0
Foreign countr	y name			Foreign p	rovince/sta	te/coun	ty	Fore	ign postal	code	your ta	x or refund	
												You	Spouse
At any time du	uring 20	021, did you receive, sell, exchange			spose of a	any fina	ancial interes	t in an	y virtual	curre	ncy?	Ves	X No
Standard Deduction		eone can claim: U You as a de Spouse itemizes on a separate retur	rn or you		•		a dependent	t					
Age/Blindnes	s You:	Were born before January 2, 1	957	_ Are b	lind S	pouse	: 🗌 Was b	orn be	fore Jan	uary 2	2, 1957	ls b	lind
Dependent		instructions): irst name Last name		(2)	Social secu number	rity	(3) Relation to you	ship		✔ if q I tax c		or (see instru Credit for ot	uctions): her dependents
than four													
dependents,										$\overline{\neg}$			
see instruction	s —									$\overline{\Box}$			
and check here ►										$\overline{\Box}$			
	1	Wages, salaries, tips, etc. Attach	Eorm(c)	W/ 2							. 1	1	
Attach	2a	Tax-exempt interest	<b>2a</b>	vv-z .	· · ·	 ь т	•••••			·	. 1 2t		01,200.
Sch. B if	2a 3a	Qualified dividends	2a 3a				axable intere			•	· 21		
required.			3a 4a				Ordinary divid			·	. 30		
	/ 4a	IRA distributions	4a 5a				axable amou			•	. 4L		
<u> </u>	5a	Pensions and annuities	6a				axable amou axable amou			•	. 51. . 61.		
Standard Deduction for —	6a 7	Capital gain or (loss). Attach Sche		fraguira	d If pot re					· ·	. <u>01</u>		
Single or	8	Other income from Schedule 1. lir									. 8		0 4 5 0
Married filing separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,								•	. <u>0</u> ▶ 9		<u>-8,450.</u> 92,750.
\$12,550 Married filing	10			-						•	. 10		52,750.
<ul> <li>Married filing jointly or</li> </ul>		Adjustments to income from Sche Subtract line 10 from line 9. This is								·			92,750.
Qualifying widow(er),	11	Standard deduction or itemized						2a	 10	,55			92,750.
\$25,100	12a			``		,			12				
Head of household, c Add lines 12a and 12b								10 050					
\$18,800	C			 	 005 or Fo			• •		•	. 12		12,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct								•	. 13		12,850.
Standard Deduction,	14 15	Add lines 12c and 13 <b>Taxable income.</b> Subtract line 14					 ar_0_			·	. 14		12,850. 79,900.
see instructions.						o, ente	u-0			·	. 15	·	,9,900.

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

Form **1040** (2021)

Form 1040 (2021	)								Page 2
	16	Tax (see instructions). Check if	any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	13,332.
	17	Amount from Schedule 2, line	3					17	
	18	Add lines 16 and 17						18	13,332.
	19	Nonrefundable child tax credit	or credit for o	ther depender	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, line	8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. It	f zero or less, o	enter -0				22	13,332.
	23	Other taxes, including self-em	ployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is yo	our <b>total tax</b>				. 🕨	24	13,332.
	25	Federal income tax withheld fr	om:			1 1			
	а	Form(s) W-2				<b>25a</b> 15	,342.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	15,342.
If you have a	26	2021 estimated tax payments			37			26	
qualifying child,	27a	Earned income credit (EIC) .				27a			
attach Sch. EIC.		Check here if you were bo							
		January 2, 2004, and you taxpayers who are at least age	,		_				
	b	Nontaxable combat pay election							
	c	Prior year (2019) earned incom				-			
	28	Refundable child tax credit or a			Schedule 8812	28			
	29	American opportunity credit fro				29			
	30	Recovery rebate credit. See in				30			
	31	Amount from Schedule 3, line				31			
	32	Add lines 27a and 28 through				-	its 🕨	32	
	33	Add lines 25d, 26, and 32. The						33	15,342.
	34	If line 33 is more than line 24, s						34	2,010.
Refund	35a	Amount of line 34 you want re				•		35a	2,010.
Direct deposit?	►b	Routing number 1 2 1 0					Savings		
See instructions.	►d	Account number 3 2 5 0					arnige.		
	36	Amount of line 34 you want ap				36			
Amount	37	Amount you owe. Subtract lir					. ►	37	
You Owe	38	Estimated tax penalty (see inst				38			
Third Party	Do	you want to allow another p							
Designee		tructions				. 🕨 🗌 Yes. Co	mplete b	elow.	X No
-		signee's		Phone			nal identif		
	nar	ne 🕨		no. 🕨		numb	er (PIN) 🕨		
Sign		der penalties of perjury, I declare tha ief, they are true, correct, and comple							
Here			ete. Declaration t				1		, ,
	YO	ur signature		Date	Your occupation				t you an Identity N, enter it here
Joint return?					APPLICATI	ON DEVELOPE	R (see	inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, <b>bo</b>	<b>th</b> must sign.	Date	Spouse's occupation	tion	If the	IRS sen	t your spouse an
Keep a copy for your records.	<b>*</b>								ction PIN, enter it here
your rooordo.							(see	inst.) 🕨	
		one no. (916)936-9626		Email address		Data	DTIN		Oha ala ita
Paid			Preparer's signat			Date	PTIN		Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM S		RAM SAGAR	GUPTA TALLAM	04/10/2022	P02082		Self-employed
Use Only		n's name ► GLOBAL TAXE							678)965-9522
		n's address ► 2530 Pebble		n Cumming			Firm'	s EIN 🕨	
Go to www.irs.go	ov/Forn	1040 for instructions and the latest	information.		BAA	REV 04/01/22 PRO			Form <b>1040</b> (2021)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

# 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.

2021 Attachment Sequence No. 01

OMB No. 1545-0074

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
VINUSHA REDDY KATIKI REDDY	776-21-4059
Part I Additional Income	

1	Taxable refunds, credits, or offsets of state and local income taxes	8	1	
2a	Alimony received		2a	
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, tru Schedule E		5	-8,450.
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			
		8k	-	
1	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m	_	
n	Section 951A(a) inclusion (see instructions)	8n	_	
0	Section 461(I) excess business loss adjustment	80	_	
р	Taxable distributions from an ABLE account (see instructions) .	8p		
z	Other income. List type and amount ►	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8		10	-8,450.
	newwork Deduction Act Nation, and your toy return instructions			

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

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 <b>24b</b>			
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81 <b>24c</b>			
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 <b>24g</b>			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) <b>24h</b>			
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) <b>24k</b>			
z	Other adjustments. List type and amount ► 24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to in</b> here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

REV 04/01/22 PRO

SCHEDULE E	
(Form 1040)	(From rental real estate, I
	► At

# Supplemental Income and Loss

OMB No. 1545-0074

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

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

Department of the Treasury
Internal Revenue Service (99)

ry	
(99)	Go to www.irs.gov/ScheduleE for instructions and the latest inform

ts, REMICs, etc.)	2021
mation.	Attachment Sequence No. <b>13</b>

VINUSHA REDY         VINUSHA REDY         Total - 4059           Part         Income or Loss From Mental Real Estate and Royalties         Note: If you are in the business of renting personal property, used           A Idy our anka any payments in 2021 that would require you to file Form(s) 10997 See instructions.         Image: Second terms of the second term of the second term of the second terms of the second term of the second term of the second terms of the second term of the second terms of term	Name(s)	shown on return							Your socia		-	er		
Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4836 on page 2, line 40.           A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions.         Image: Colspan="2">Image: Colspan="2"         Image: Colspan="2"         Image: Colspan="2"         Image: Colspan="2"         Image: Colspan="2"         Image: Colspan="2" <th <="" colspan="2" th=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th>	<td></td>													
A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions       □ Yes ⊠ No         B if "Yes," did you or will you file required Form(s) 1099?       · · · · · · · · · · · · · · · · · · ·	Part			-		-			• •	•		, use		
B H*Yes," did you or will you flie required Form(s) 10997         Yes         No           1a         Physical address of each property (street, city, state, ZP code)         A         KUKATPALLY HTDERABAD INDIA IN 500048         C           C         C         Type of Property         2         For each rental real estate property listed dows, report the number of fair rental and personal use days, Check the OW how only A 365         Days         QuV           A         1         above, report the number of fair rental and personal use days, Check the OW how only A 365         B         C         C           C		Schedule C. See instructions. If you ar	e an individual, rep	ort farr	n rental i	ncome	or loss f	rom Form 48	<b>35</b> on page	2, line 4	0.			
Image: state of a construction of the implex of the im											res 🛛	< No		
Image: state of a construction of the implex of the im	<b>B</b> If "	Yes," did you or will you file required For	m(s) 1099?							. 🗆 Y	ſes [	No		
B       C       Fair Rental       Personal Use Days       CJV         1b       Type of Property (from list below)       2       For each rental real estate property listed above, report the number of fair rental and public fair rental and public for the number of fair rental and qualified pint venture. See instructions.       A       3.55       0       □         7       B														
C       Type of Property (from list below)       2       For each rental real estate property listed above, report the number of fair initial and plant intermited in an initermited ininitial and plant intermited in an initial an initial	Α	KUKATPALLY HYDERABAD INDIA	IN 500048											
Type of Property (from list below)       2       For each entral real estate property listed above, report the number of fair rental and property contents to file as a qualified joint venture. See instructions.       Fair Rental Days       Personal Use Days       QUV         Type of Property:       1       3       365       0	В													
Image: the second s	С													
(trom list below)         addwite report the inductor of all reliated of the requirements to file as a distribution of the requirements of the requirement of theres of there of the requirement of theres of the requir	1b		al real estate prop	perty li	sted		Fair	Rental			C	).IV		
A       I       If you meet the requirements to life as a qualified joint venture. See instructions.       A       305       U       I         B       C       Image of Property:       Isingle Family Residence       3 Vacation/Short-Term Rental       5 Land       7 Self-Rental         C       Image of Property:       Isingle Family Residence       4 Commercial       6 Royatites       8 Other (describe)         Imcome:       Properties:       A       B       C         3       Rents received       3       550.       B       C         4       Adventising       5       A       B       C         5       Adventising       5       A       B       C         6       Adventising       5       A       B       C         7       Claning and maintenance       7       800.       B       C         10       Legal and other professional fees       11       1,500.       Image and ange interest paid to banks, etc. (see instructions)       12       Image and ange and maintenance       Image and ange and ange and ange and ange and ange ange ange ange ange ange ange ange		(from list below) above, report	the number of fa	ir renta <b>O.IV</b> b	al and		[	Days	Days	\$				
C       C       C         Type of Property:       1 Single Family Residence       3 Vacation/Short-Term Rental       6 Royalties       8 Other (describe)         Income:       Properties:       A       B       C         3 Flents received       .       .       4       B         4 Royalties received       .       .       4       B       C         5 Advertising       .       .       .       6       .       .         6 Auto and travel (see instructions)       .       6       .       .       .       .         9 Insurance       .       <	Α	↓ if you meet th	ne requirements to	o file a	sa	Α		365		0	[			
Type of Property:       1 Single Family Residence       3 Vacation/Short-Term Rental 5 Land       7 Self-Rental         2 Multi-Family Residence       4 Commercial       6 Royatties       8 Other (describe)         income:       Properties:       A       B       C         3 Rents received       3 550.       A       B       C         3 Rents received       3 550.       A       B       C         4 Royatties received       5       5       5       5         5 Advertising       5       6	В	qualified joint	venture. See inst	tructio	ns.	В					[	<u> </u>		
1 Single Family Residence       3 Vacation/Short-Term Rental       5 Land       7 Self-Rental         2 Multi-Family Residence       4 Commercial       6 Royatties       8 Other (describe)         Income:       Properties:       A       B       C         3 Rents received       .       .       3       550.       .         4 Royatties received       .       .       4       .       .         5 Advertising       .       .       4       .       .         6 Auto and travel (see instructions)       .       6       .       .       .         9 Insurance       .       .       7       800.       .       .       .         10 Legal and other professional fees       . <td>С</td> <td></td> <td></td> <td></td> <td></td> <td>С</td> <td></td> <td></td> <td></td> <td></td> <td>[</td> <td></td>	С					С					[			
2         Multi-Family Residence         4         Commercial         Properties:         A         B         C           a         Rents received         .         .         3         550.         .	Туре	of Property:												
Income:         Properties:         A         B         C           3         Rents received	1 Sing	gle Family Residence 3 Vacation/She	ort-Term Rental	5 La	nd		7 Self-	Rental						
3       Rents received				6 Ro	yalties		8 Othe	r (describe)						
4       Royalties received       4         Expenses:       5         5       Advertising         6       Auto and travel (see instructions)         7       Cleaning and maintenance         8       6         9       7         10       8         10       9         11       Management fees         12       11         13       11         14       Repairs         15       2,300.         16       11         17       2,600.         18       9         19       Other interest.         11       1,800.         15       2,300.         16       17         17       2,600.         18       9         20       9,000.         21       -8,450.         22       9,000.         23       550.         24       23         55       236         50.       50.         18       23         20       9,000.         21       -8,450.         22       24     <	Incom	le:	Properties:			Α		E	5		С			
Expenses:       5       Advertising       5         6	3			3			550.							
5       Advertising       5       5         6       7       800.       6         7       Cleaning and maintenance       7       800.       7         8       9       7       800.       7         9       9       7       800.       7         9       9       7       800.       7         9       10       10       10       10       10         10	4	Royalties received		4										
6       Auto and travel (see instructions)       6       7       800.         7       Cleaning and maintenance       7       800.       7       800.         8       9       1	Expen	ses:												
7       800.         8	5	Advertising		5										
8       Commissions.       8       9         9       10       10         10       11       1,500.         11       1,500.       11         12       11       1,500.         13       11       1,500.         14       1,800.       12         15       2,300.       15         16       15       2,300.         17       2,600.       18         19       0       19         20       9,000.       20         18       19       10         20       9,000.       20         21       -8,450.       21         22       8,450.)(()()()(	6	Auto and travel (see instructions)		6										
9       Insurance       9	7			7			800.							
10       Legal and other professional fees       11       1,500       11       1,500         11       Management fees       11       1,500       12       11       1,500         12       Mortgage interest paid to banks, etc. (see instructions)       12       12       13       14       1,800         14       Repairs       14       1,800       15       2,300       16       <	8	Commissions		8										
11 Management fees 11 1,500.   12 0ther interest. 13   14 1,800.   15 Supplies   16 16   17 2,600.   18 19   20 9,000.   18 19   20 9,000.   21 subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions)   22 (   8,450. )(   9 Other dilation streported on line 4 for all royalty properties   22 (   8,450. )(   9 (   14 1,800.	9	Insurance		9										
12       Mortgage interest paid to banks, etc. (see instructions)         13       Other interest.         14       Repairs.         15       Supplies         16       15         17       Utilities         18       Depreciation expense or depletion         19       Other (list) ▶         20       9,000.         18       19         20       9,000.         21       -8,450.         22       (8,450.)(         23a       Total of all amounts reported on line 3 for all rental properties         24       Total of all amounts reported on line 12 for all properties         23a       Total of all amounts reported on line 20 for all properties         24       Income. Add royalty losses from line 21 for all properties         25       Losses. Addroyalty losses from line 21 and rental real estate losses from line 22. Enter total losses here.         24       25 (8,450.)         25       Losses. Add royalty losses from line 21 do nall properties         24       25 (8,450.)	10			10										
13 Other interest.   14 Repairs.   15 Supplies   16 14   17 Utilities.   18 Depreciation expense or depletion   19 11   20 9,000.   21 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   21 -8,450.   22 (8,450.)(   23a Total of all amounts reported on line 3 for all rental properties   23a Total of all amounts reported on line 12 for all properties   23a Total of all amounts reported on line 18 for all properties   23a Total of all amounts reported on line 18 for all properties   23a Total of all amounts reported on line 12 for all properties   23a Total of all amounts reported on line 18 for all properties   23a Total of all amounts reported on line 12 for all properties   23a Total of all amounts reported on line 20 for all properties   23a Total of all amounts reported on line 18 for all properties   23a Total of all amounts reported on line 12 for all properties   23a 550.   23b   23c   23d   24   25   26   7 total rental real estate and royalty income or (loss). Combine lines 24 and 2	11	Management fees		11		1,	500.							
14       1,800.         15       Supplies       15         16       15         17       Utilities         18       Depreciation expense or depletion         19       Other (list) ▶         20       9,000.         21       Subtract line 20 from line 3 (rents) and/or 4 (royatties). If result is a (loss), see instructions to find out if you must file Form 6198         19       Cotal of all amounts reported on line 3 for all rental properties         22       (8,450.)(         23a       Total of all amounts reported on line 4 for all royatly properties         c       Total of all amounts reported on line 12 for all properties         c       Total of all amounts reported on line 18 for all properties         c       Total of all amounts reported on line 12 for all properties         c       Total of all amounts reported on line 21. Do not include any losses         24       Losses. Add royatly losses from line 21 and rental areal estate losses from line 22. Enter total losses here .         25       Losses Image and royatly 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 page 2 do not apply to you, also enter this amount on page 2 do not apply to you, also enter this amount on page 2 do not apply to you, also enter this amount on page 2 do not apply to you, also enter this amount on page 2 do not apply to you	12	· · ·		12										
15       Supplies       15       2,300.         16       Taxes       17       2,600.         17       Utilities       17       2,600.         18       Depreciation expense or depletion       18         19       Other (list) ▶       19         20       Total expenses. Add lines 5 through 19       19         20       Total expenses. Add lines 5 through 19       20         21       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       19         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       21         23a       Total of all amounts reported on line 3 for all rental properties       23a         5       Total of all amounts reported on line 12 for all properties       23a         6       Total of all amounts reported on line 18 for all properties       23a         6       Total of all amounts reported on line 18 for all properties       23a         6       Total of all amounts reported on line 20 for all properties       23a         6       Total of all amounts reported on line 21 not include any losses       23a         6       Total of all amounts shown on line 21. Do thinclude any losses       24         25	13	Other interest		13										
16       Taxes       16       17       16         17       Utilities       17       2,600       17         18       Depreciation expense or depletion       17       2,600       18         19       Other (list) ▶       19       20       9,000       20         20       9,000       20       9,000       20       9,000         21       Subtract line 20 from line 3 (rents) and/or 4 (royatites). If result is a (loss), see instructions to find out if you must file Form 6198       20       9,000       21         22       0       9,000       21       -8,450       21       -8,450         23       Total of all amounts reported on line 3 for all rental properties       23a       550.       23b         23       Total of all amounts reported on line 12 for all properties       23a       9,000.       23a         24       Total of all amounts reported on line 20 for all properties       23a       9,000.       24         10       Total of all amounts reported on line 21 for all properties       23a       9,000.       24         24       Losses. Add royatly losses from line 21 and rental real estate losses from line 22. Enter total losses here .       24       25       8,450.         26       Total of all amounts reported on	14	Repairs		-										
17 Utilities.   18 Depreciation expense or depletion   19 Other (list) ▶   20 Total expenses. Add lines 5 through 19   20 Total expenses. Add lines 5 through 19   21 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   21 -8,450.   22 (8,450.)(   23a Total of all amounts reported on line 3 for all rental properties   23a Total of all amounts reported on line 4 for all royalty properties   23b	15			15		2,	300.							
18       Depreciation expense or depletion       18       19         19       Other (list) ▶       19       20         20       Total expenses. Add lines 5 through 19       20       9,000.         21       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       20       9,000.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       21       -8,450.         23a       Total of all amounts reported on line 3 for all rental properties       23a       550.         b       Total of all amounts reported on line 12 for all properties       23a       550.         c       Total of all amounts reported on line 12 for all properties       23d       23c         c       Total of all amounts reported on line 20 for all properties       23d       23c         c       Total of all amounts reported on line 21 for all properties       23d       23c         c       Total of all amounts reported on line 21 not porteries       23d       23c         d       Total of all amounts reported on line 21 not porteries       23d       23c         e       Total of all amounts reported on line 21 not porteries       23d       23c       4         10       Losses. Add royalty	16			-										
19       Other (list) ▶       19       10         20       Total expenses. Add lines 5 through 19       20       9,000.         21       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	17	Utilities		-		2,	600.							
20       Total expenses. Add lines 5 through 19       20       9,000.         21       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       21       -8,450.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       21       -8,450.         23a       Total of all amounts reported on line 3 for all rental properties       23a       550.         b       Total of all amounts reported on line 4 for all royalty properties       23c       23d         c       Total of all amounts reported on line 12 for all properties       23d       9,000.         24       Income. Add positive amounts shown on line 21. Do not include any losses       24       25 ( 8,450.)         25       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       24	18													
21       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       21       -8,450         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       22       (8,450.)(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       550.         b       Total of all amounts reported on line 12 for all properties       23a       550.         c       Total of all amounts reported on line 12 for all properties       23a       23d         c       Total of all amounts reported on line 12 for all properties       23a       23d         e       Total of all amounts reported on line 20 for all properties       23a       23d         e       Total of all amounts reported on line 20 for all properties       23a       23d         e       Total of all amounts reported on line 21. Do not include any losses       24         25       Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here       25 (8,450.)         26       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				-										
result is a (loss), see instructions to find out if you must file Form 6198	20	Total expenses. Add lines 5 through 19		20		9,	000.							
file Form 6198       1       -8,450.         22       Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)       22       (       8,450.       )(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       550.       b         b       Total of all amounts reported on line 4 for all royalty properties       23b       23c       23c         c       Total of all amounts reported on line 12 for all properties       23d       9,000.       23d         d       Total of all amounts reported on line 20 for all properties       23c       23d       23d         e       Total of all amounts reported on line 20 for all properties       23e       9,000.         24       Income. Add positive amounts shown on line 21. Do not include any losses       24         25       Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .       25       (       8,450.         26       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       25       (       8,450.	21													
<ul> <li>22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)</li></ul>			out if you must				. – .							
on Form 8582 (see instructions)       22       (8,450.)(       )(         23a       Total of all amounts reported on line 3 for all rental properties       23a       550.         b       Total of all amounts reported on line 4 for all royalty properties       23b       23b         c       Total of all amounts reported on line 12 for all properties       23c       23d         d       Total of all amounts reported on line 18 for all properties       23d       23d         e       Total of all amounts reported on line 20 for all properties       23e       9,000.         24       Income. Add positive amounts shown on line 21. Do not include any losses       24         25       Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .       25       8,450.         26       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       25       8,450.				21		-8,	450.							
<ul> <li>23a Total of all amounts reported on line 3 for all rental properties</li></ul>	22		mitation, if any,					,		,				
<ul> <li>b Total of all amounts reported on line 4 for all royalty properties</li></ul>					(	8,4		(	)	(				
<ul> <li>c Total of all amounts reported on line 12 for all properties</li></ul>					• •				550.					
d       Total of all amounts reported on line 18 for all properties       23d         e       Total of all amounts reported on line 20 for all properties       23e       9,000.         24       Income. Add positive amounts shown on line 21. Do not include any losses       24         25       Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .       25         26       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       25				erties	• •	• •								
<ul> <li>e Total of all amounts reported on line 20 for all properties</li></ul>				• •	• •									
<ul> <li>24 Income. Add positive amounts shown on line 21. Do not include any losses</li></ul>				• •	• •									
<ul> <li>Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .</li> <li>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</li> </ul>						 	23e							
26 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		-			-			· · · ·		/	~	450		
here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on		• •								(	8,	450.		
	26													
Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 $-8,450$ .									on <b>26</b>		_ Q	,450.		

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021

Form <b>8582</b>
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# **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.

20 Attachment Sequence No. 858

Identifying number

776-21-4059

OMB No. 1545-1008

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

VINUS

Caution: Complete Parts IV and V before completing Part I.

Renta Allow			
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1a0.Activities with net loss (enter the amount from Part IV, column (b))1b(8,450.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c()Combine lines 1a, 1b, and 1c	1d	-8,450.
All Ot			
2a b c d	Activities with net income (enter the amount from Part V, column (a))       .       2a         Activities with net loss (enter the amount from Part V, column (b))       .       .         Prior years' unallowed losses (enter the amount from Part V, column (c))       .       .         Combine lines 2a, 2b, and 2c       .       .       .	2d	
3	3	-8,450.	

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.

Part II Special Allowance for Rental Real Estate Activities With Active Participation										
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.									
4	4 Enter the smaller of the loss on line 1d or the loss on line 3									
5	Enter \$150,000. If married filing separ	150,000.								
6	Enter modified adjusted gross income	e, but not less thar	n zero. See instruc	tions 6	101,200.					
	<b>Note:</b> If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent	er -0-						
7	Subtract line 6 from line 5			7	48,800.					
8	Multiply line 7 by 50% (0.50). Do not e	nter more than \$25	,000. If married filir	ng separately, see	instructions	8	24,400.			
9	Enter the <b>smaller</b> of line 4 or line 8					9	8,450.			
Par										
10	Add the income, if any, on lines 1a an	d 2a and enter the	etotal			10	0.			
11	Total losses allowed from all passiv out how to report the losses on your t					11	8,450.			
Par										
	Name of activity	Current year Pric		Prior years	Overall gain or		ain or loss			
	Name of activity	(a) Net income (line 1a)	<b>(b)</b> Net loss (line 1b)	(c) Unallowed loss (line 1c)	101(34)		<b>(e)</b> Loss			
KUK.	ATPALLY	0.	8,450.				8,450.			

For Paperwork Reduction Act Notice, see instructions. BAA REV 04/01/22 PRO

Form 8582 (2021)

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

	Name of activity	Curre	Current year			Prior years		Overall gain or loss		
	Name of activity		(b)	(b) Net loss (line 2b)		lowed ne 2c)	(d) Gain		(e) Loss	
		(line 2a)	(11	10 20)	1000 (11	10 20)				
	on Part I, lines 2a, 2b, and 2c		Devet II			ationa				
Part VI	Use This Part if an Am			, Line 9. S		ctions.				
	Name of activity	Form or schedule and line number to be reported or (see instructions)	a (a	) Loss	<b>(b)</b> R	atio	<b>(c)</b> Special allowance		(d) Subtract column (c) from column (a).	
KUKATPAI	ΓΓΛ	E Ln 22		8,450.	1.0000	00000	8,45	0.	0.	
Total				8,450.	1.0	0	8,45	0.	0.	
Part VII	Allocation of Unallowe	d Losses. See inst	ruction	s.						
	Name of activity	Form or sch and line nu to be repor (see instruc	Imber ted on	(a) l	LOSS	(	<b>b)</b> Ratio	(c)	Unallowed loss	
	<u></u>		. 🕨				1.00			
Part VIII	Allowed Losses. See in									
Name of activity		Form or sch and line nu to be repor (see instruc	mber ted on (a) L		Loss (b) U		Jnallowed loss		c) Allowed loss	
				1		1		1		

REV 04/01/22 PRO

Form **8582** (2021)



# **Illinois Department of Revenue** 2021 Form IL-1040

or for fiscal year ending

Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

## **Step 1: Personal Information**

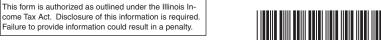
		-21-4059 IUSHA REDDY		1: KATIKI REI	991 DDY				
	164	CORAL LANE				III KAA KAKI DANEESEKA	n an	ANY DAVESTICATION	
	WHE	ELING	IL	60090	COOK				
С	Che Che	eck If someone can clai eck the box if this appli p 2: Income Federal adjusted gross	m you, es to y s incom interes	or your spouse ou during 2021 the from your fed t and dividend	if filing jointly, as : Nonresid eral Form 1040	filing separately Wido s a dependent. See instructi ent - <b>Attach</b> Sch. NR F or 1040-SR, Line 11. ur federal Form 1040 or 10	ons. You Part-year resident	Spouse t - <b>Attach</b> Sch	n. NR le dollars only) 92 , 750 <u>.00</u> .00
	4	Total income. Add Li	nes 1 tł	hrough 3.				4	92,750.00
Staple W-2 and 1099 forms here	Stej 5 6 7 8 9	<b>3: Base Income</b> Social Security benefi received if included in Illinois Income Tax ove Schedule 1, Ln. 1. Other subtractions. At Check if Line 7 inclu Add Lines 5, 6, and 7 Illinois base income	Line 1 payme t <b>tach</b> S des an . This is	. Attach Page ent included in Schedule M. y amount from the total of yo	1 of federal retu federal Form 10 n Schedule 129 ur subtractions.	ırn. 40 or 1040-SR, 19-C. □	5 6 7	.00 .00 .00 <b>8</b> <b>9</b>	.00 
2 an		o 4: Exemptions				• • • •	2	275.55	
aple W-	10	c Check if legally blir	er: 🗆 nd: 🗖	] You + 🗆 S ] You + 🗖 S	pouse # of pouse # of	. See instructions. f checkboxes X \$1,000 f checkboxes X \$1,000 edule IL-E/EIC, Step 2, Line	= b = c	<u>375.00</u> .00 .00	
S							 d	0.00	

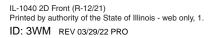
Exemption allowance. Add Lines 10a through 10d. Step 5: Net Income and Tax 11 ama Subtract Lina 10 from Line 0 Staple your check and IL-1040-V 🍉

Attach Schedule IL-E/EIC.

residents: Net income. Subtract Line 10 noni Line 9.		
Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule	NR. 11	90,375.00
<i>Residents:</i> Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.		
Nonresidents and part-year residents: Enter the tax from Schedule NR.	12	4,474.00
Recapture of investment tax credits. Attach Schedule 4255.	13	.00
Income tax. Add Lines 12 and 13. Cannot be less than zero.	14	4,474.00
p 6: Tax After Nonrefundable Credits		
Income tax paid to another state while an Illinois resident. Attach Schedule CR. 15	.00	
Property tax and K-12 education expense credit amount from Schedule ICR.		
Attach Schedule ICR. 16	.00	
Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 17	.00	
Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.	18	0.00
Tax after nonrefundable credits. Subtract Line 18 from Line 14.	19	4,474.00
p 7: Other Taxes		
Household employment tax. See instructions.	20	.00
Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table		
in the instructions. <b>Do not</b> leave blank.	21	0.00
Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.	22	.00
	Nonresidents and part-year residents:       Enter the Illinois net income from Schedule NR. Attach Schedule Residents:         Multiply Line 11 by 4.95% (.0495).       Cannot be less than zero.         Nonresidents and part-year residents:       Enter the tax from Schedule NR.         Recapture of investment tax credits.       Attach Schedule 4255.         Income tax.       Add Lines 12 and 13.         Credit and to another state while an Illinois resident.       Attach Schedule CR.         Property tax and K-12 education expense credit amount from Schedule ICR.       16	Nonresidents and part-year residents:       Enter the Illinois net income from Schedule NR. Attach Schedule NR. 11         Residents:       Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.       12         Nonresidents and part-year residents:       Enter the tax from Schedule NR.       12         Recapture of investment tax credits.       Attach Schedule 4255.       13         Income tax.       Add Lines 12 and 13. Cannot be less than zero.       14         p 6: Tax After Nonrefundable Credits       14         Income tax paid to another state while an Illinois resident.       Attach Schedule ICR.       15       .00         Property tax and K-12 education expense credit amount from Schedule ICR.       16       .00         Attach Schedule ICR.       16       .00         Credit amount from Schedule 1299-C.       17       .00         Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.       18         Tax after nonrefundable credits.       Subtract Line 18 from Line 14.       19         p 7: Other Taxes       20           Household employment tax. See instructions.       20           Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table       21

23 Total Tax. Add Lines 19, 20, 21, and 22.





4,474.00

**NO HANDWRITTEN ENTRIES ON THIS FORM** 

2,375.00

0.00

10

23

d



24	Total tax from Page 1, Line 23.	24	4,474.00							
Ste	p 8: Payments and Refundable Credit									
25	Illinois Income Tax withheld. Attach Schedule IL-WIT. 25	4,774.00								
26	Estimated payments from Forms IL-1040-ES and IL-505-I,		NO							
	including any overpayment applied from a prior year return. 26	.00	Ĩ							
	Pass-through withholding. Attach Schedule K-1-P or K-1-T. 27	.00	A							
	Pass-through entity tax credit. Attach Schedule K-1-P or K-1-T. 28	.00	Ī							
29	Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 8. Attach Schedule IL-E/EIC. 29	.00	<b>A</b> A							
30	Total payments and refundable credit. Add Lines 25 through 29.	30	4,774.00							
Ste	p 9: Total		Ē							
31	If Line 30 is greater than Line 24, subtract Line 24 from Line 30.	31	<u>300.00</u>							
32	If Line 24 is greater than Line 30, subtract Line 30 from Line 24.	32	<b></b>							
Ste	p 10: Underpayment of Estimated Tax Penalty and Donations - Only complete Step	10 for late-payment	penalty							
for	underpayment of estimated tax or to make a voluntary charitable donation.		, Si							
33	Late-payment penalty for underpayment of estimated tax. 33	.00	9							
	a 🔲 Check if at least two-thirds of your federal gross income is from farming.		Ë							
	<b>b</b> Check if you or your spouse are 65 or older and permanently living in a nursing home.		H, H							
	c 🔲 Check if your income was not received evenly during the year and you annualized your income	ne on Form IL-2210.	코							
	Attach Form IL-2210.		AN							
	<b>d</b> Check if you were not required to file an Illinois Individual Income Tax return in the previous	tax year.	<u>s</u>							
	Voluntary charitable donations. Attach Schedule G. 34	.00	GN							
35	Total penalty and donations. Add Lines 33 and 34.	35	<u>A</u> <u>00.</u>							
Ste	p 11: Refund		4,774.00 300.00 penalty .00 .00 .00 .00 .00 .00 .00 .0							
36	If you have an amount on Line 31 and this amount is greater than Line 35, subtract Line 35 from I	ine 31.								
	This is your <b>overpayment</b> .	36	<u> </u>							
37	Amount from Line 36 you want refunded to you. Check one box on Line 38. See instructions.	37	300.00							
38	I choose to receive my refund by		si							
	a X direct deposit - Complete the information below if you check this box.		л Т							
		ecking or Savings	300.00 ON THIS FORM							
	to college savings funds	Saving of Savings	5							
	here. See instructions! Account number 3 2 5 0 6 9 2 6 0 4 1 4									
39	<b>b</b> paper check.	39	00							
	Amount to be <b>credited forward.</b> Subtract Line 37 from Line 36. See instructions.	39	.00							
Ste	Amount to be <b>credited forward.</b> Subtract Line 37 from Line 36. See instructions. <b>p 12: Amount You Owe</b>	39	.00							
Ste 40	Amount to be <b>credited forward.</b> Subtract Line 37 from Line 36. See instructions. <b>p 12: Amount You Owe</b> If you have an amount on Line 32, add Lines 32 and 35. <b>- or -</b>	39	.00							
Ste 40	Amount to be <b>credited forward.</b> Subtract Line 37 from Line 36. See instructions. <b>p 12: Amount You Owe</b>	39	.00							

Step 13: If this is a joint return, both you and your spouse must sign below. Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Sign	Your signature		Date (mm/dd/yyyy)	Spouse's sig	Date (mm/dd/yyyy	/)	Daytime phone number				
Here								(916) 936-9626			
	Print/Type paid preparer's name			Paid prepare	Date (mm/dd/yyyy	/)		Paid Preparer's PTIN			
Paid	SYAM PRIYA RAM SAGAR GUPTA TALLAM			SYAM PRIYA R	AM SAGAR GUPTA TALLAM	04/10/202	2	self-employed	P02082703		
Preparer Use Only	Firm's name GLOBAL TAXES LLC					Firm's FEIN	•	301017196			
occ only	Firm's address > 2530 Pebble Creek LnC			lumming	Firm's phone		(678) 965-9522				
Third	Designee's name (please print)				Designee's phone number			Check if the Department may			
Party				( )			discuss this return with the third				
Designee							party designee shown in this step.				

# Refer to the 2021 IL-1040 Instructions for the address to mail your return.



Illinois Department of Revenue

# 2021 Schedule IL-WIT Illinois Income Tax Withheld

Attach to your Form IL-1040. If you have more than five withholding forms, complete multiple copies of this schedule. IL Attachment No. 31

Use the reference for Column A shown in the chart below.									
Form Type	Letter Code for Column A	Form Type	Letter Code for Column A						
W-2	W	1099-DIV	D						
W-2G	WG	1099-INT	I						
1099-R	R	1042-S	S						
1099-G	G	1099-B	В						
1099-MISC	М	1099-K	K						
1099-OID	0	1099-NEC	N						

### Step 1: Provide your withholding records (include all W-2 and 1099 forms that show Illinois withholding)

VINUSHA REDDY KA	7 Your Sc	7 <u>6</u> ocial Se	curity num			<u>1</u> 0	5	9		
Column A Form type	Federal Wa	Column C ges, Winnings, is, Compensatio		Illinois W Distributio	<b>Columr</b> /ages, Win ons, Comp	s Illi	Column E Illinois Income Tax Withheld			
1	20-8236936 000	\$	101,200.	<u>)0</u>	\$	101,:	200 <b>.00</b>	\$	4,77	74 <b>•00</b>
2		\$	•[	<u>)0</u>	\$		•00	\$		•00
3		\$	•	<u>)0</u>	\$		•00	\$		•00
4		\$	•[	00	\$		•00	\$		•00
5		\$	•[	<u>)0</u>	\$		•00	\$		•00

# Step 2: Provide spouse's withholding records (include all W-2 and 1099 forms that show Illinois withholding)

Your spouse's name as shown on Form IL-1040

Your spouse's Social Security number

(	Column A Form type	Column B Employer/Payer Identification Number	Federal Wages,	I <b>mn C</b> Winnings, Gross ompensation, etc.	Illinois Wage	<b>lumn D</b> s, Winnings, Gross Compensation, etc.	Ш	Column E linois Income Tax Withheld
6 _			. \$	•00	\$	• <u>00</u>	\$	•00
7 _			\$	•00	\$	•00	\$	•00
8 _			\$	•00	\$	•00	\$	•00
9 _			. \$	•00	\$	•00	\$	•00
10 _			. \$	•00	\$	•00	\$	•00

### Step 3: Total Illinois withholding

11 Add the amounts in Column E for Lines 1 through 10 (and the amounts from Column E of any additional copies you attached). This is the total amount of your Illinois income tax withheld. Enter this amount here and on Form IL-1040, Line 25.

**11 \$** 4,774**.00** 

# → Attach all Schedules IL-WIT to your IL-1040. ←

۶ Illin	ois Departm	ent of Reve	enue 🗌		<u></u>			<b> </b> - [					
	21 IL-845 not mail Form				Tax Elect		c Fil	-				า	
	vide taxpayer in	formation				_						_	
	HA REDDY	Provocia first name (ar		KI REDDY		$\frac{7}{2}$	7 6	2	1 _		40	5	
Print 164 CC		Spouse's first name (ar	id last name if differe	ent) Last na	ame	Social	Security	number					
or						Spous	e's Socia	 al Security					
WHEEL			IL	600	90	•		6-962		1			
City			State	ZIP		<u> </u>	/	e number	<u> </u>				
	nlata informati	an from tox rate				,							
•	plete information		urn						4	c	10 Z	75 <b> (</b>	00
	ne from Form IL-10 Form IL-1040, Line								1_ 2			<u>74 (</u>	
	come Tax withheld		0 Line 25 only	(enter " <b>0</b> " if n	one)				2 -			74 (	
	nent from Form IL-		o, Line 20 only		one)				4			0010	
	ount due from Forn								5				00
	us: <u>×</u> Single _			ed filing separa	ately Wido	owed	Hea	d of ho	useho	ld			
-	plete direct de		-	- · ·	-								
<ul> <li>does not support within the Unit</li> <li>7 Routing n</li> <li>8 Account n</li> <li>9 Type of acc</li> <li>10 Date the p</li> </ul>	ayment or refund ort international AC ed States or those o. (RN): <u>1</u> 2 no. (AN): <u>3</u> 2 ccount: <u>X</u> Cher payment is to be e	CH transactions. IE not funded by inte 1 0 0 0 5 0 6 9 cking Savi lectronically withd	DOR will only peernational funds.           3         5         8           2         6         0         4           ngs        //        //        //	rform direct tra Electronic pay	nsactions ( <i>e.g.</i>	, debit, d	deposi	t) with fi	nancia	al insti	tution	s loca	
	ayer declaration	and signature	(Sign only of	tor completi	a Stop 2 ap	d if an	nliaak	la Sta	n 2 )				
X I conse	ent that my refund t. If I have filed a jo	may be directly de	eposited as des	ignated in Ste	p 3 and declar	e the inf	ormati	on on Li	ines 7			is	
I autho withdra involve	orize the Illinois De awal as designated ad in the processin solve issues related	partment of Reve d in the electronic g of an electronic	nue (IDOR) and portion of my 2 overpayment of	t its designated 021 Illinois Ind	d financial ager ividual Income	nt to init Tax reti	iate ar urn. I a	ACH e uthorize	lectror e the fi	nic fur inanci	nds al ins		ons
I do no	ot want direct depo	sit of my refund, c	or an electronic	funds withdraw	val (direct debi	t) of my	baland	ce due.					
originator (ERC and accompar	es of perjury, I decla O) are identical. To nying information m I or rejected. If reje	the best of my kno ay be sent to IDO	owledge, my retu R by my ERO. I	urn is true, corr authorize IDO	ect, and compl R to inform my	lete. I co ERO an	onsent d/or th	that my e transr	returr nitter v	n, this when i	decla my re	aratior turn h	nas
Sign													
here Your signa	ature		Date	Spo	ouse's signature (if	joint returi	n, <b>both</b> i	must sign)	1	Dat	te		
I declare that I have followed	tronic return or have examined th all requirements o nying information a	his taxpayer's elec f this program and	tronic Form IL-1 d declare, under	040, the inforr	nation on this	Form IL-	-8453,						
				04/10	/2022	Chec	k if pai	d prepar	rer: 🖂	(See	instru	ictions	s.)
ERO's sigr	nature			Date		01100		- 6.000	<u></u>				,
	L TAXES LLC					P	0	2 0	8	2	7	0	3
	ne or your name if self-e					Your P	TIN						
only $\frac{2530}{10}$	Pebble Creek	Ln					0	1_0			1 9		
Mailing ad	dress					Federa	al employ	yer identifi	cation n	umber	(FEIN)	)	

Step 6: Attach required documents (e.g., W-2 forms, 1099 forms, IL-1310). Do not mail Form IL-8453 and these documents unless requested for review.

GA

State

Cumming

City

This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.

30041

ZIP



(678) 965-9522

Daytime phone number