Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpay	er's name	Social security numb	ber
BHA	RATH REDDY BARLA	440-55-053	3
Spouse	o's name	Spouse's social sect	urity number
Par	Tox Poturn Information Tox Year Ending December 21 0001 (Ente		thorizing)
Par	t I Tax Return Information – Tax Year Ending December 31, 2021 (Ente	r year you are au	unonzing.)
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	62,133.
2	Total tax	2	6,589.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	9,812.
4	Amount you want refunded to you	4	4,623.
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 lauthorize GLOBAL TAXES LLC to enter or generate my PIN

Enter five digits, but don't enter all zeros							
5	0	5	3	3			

my

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 Bharath

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Date > 03/15/2022

		as my
er fiv n't er		

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

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

Spouse's signature ►	Date					 		
Practitioner PIN Method Returns Only—continu	e be	low	1					
Part III Certification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	5	8	7		6 all zei	 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 — See nit This Form to the IRS Unless		
For Denember le Deduction Act Nation and ver	w tow waterwa in otwestigns		Earm 8879 (Bay, 01 2021)

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

E 104(artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		(99) urn	202	21	OMB No. 1	545-0	074 IRS Us	se Only	r−Do not v	vrite or staple	in this space.
Filing Statu	s 🗙 s	Single 🗌 Married filing jointly	Marri	ed filing :	separately	(MFS)	Head	l of ho	ousehold (H	CH)	Qua	alifying wid	ow(er) (QW)
Check only one box.		u checked the MFS box, enter the r son is a child but not your dependen		your spo	use. If you	checl	ked the HO	H or (QW box, en	ter th	e child's	s name if th	ne qualifying
Your first name	and mi	iddle initial	Last na	ame							Your so	ocial securi	ty number
BHARATH	RED	DY	BAR	LA							440-	55-053	3
If joint return, s	pouse's	first name and middle initial	Last na	ame							Spouse	's social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.					Apt. no.		•		on Campaign
		H STREET							2155		1	here if you,	or your tly, want \$3
		ce. If you have a foreign address, also co	omplete	spaces be	low.	Sta			IP code				Checking a
SCOTTSD						A			85254		1	low will not	•
Foreign countr	y name			Foreign p	rovince/state	coun	ty	F	oreign postal	code	your ta	x or refund	
At any time du	irina 20	021, did you receive, sell, exchange	or othe	erwise di	spose of ar	ny fina	ancial intere	est in	anv virtual (curre	ncv?	X Yes	
Standard		eone can claim: You as a de			•	-	a depende						
Deduction		Spouse itemizes on a separate retur	•										
Age/Blindnes	s You:	Were born before January 2, 1	957 [Are b	ind S p	ouse	: 🗌 Was	born	before Jan	uary 2	2, 1957	Is b	lind
Dependent	s (see	instructions):		(2) \$	Social securi	ty	(3) Relatio	onship	(4)	/ if q	ualifies fo	or (see instru	ictions):
If more		irst name Last name			number	-	to yo	u		tax c			her dependents
than four													
dependents, see instruction	<u> </u>												
and check	5 —												
here 🕨 🗌													
	1	Wages, salaries, tips, etc. Attach I	-orm(s)	W-2 .							. 1		69,552.
Attach	2a	Tax-exempt interest	2a			bТ	axable inte	rest			. 2k	b	
Sch. B if	3a	Qualified dividends	3a				Ordinary div		ls		. 3k	b	
required.	4a	IRA distributions	4a				axable amo				. 41	b	
	5a	Pensions and annuities	5a			bТ	axable amo	ount .			. 5t	b	
Standard	6a	Social security benefits	6a			bТ	axable amo	ount .			. 6t	b	
Deduction for-	7	Capital gain or (loss). Attach Sche	dule D i	f require	d. If not rec	uired	, check her	e.			7		-429.
 Single or Married filing 	8	Other income from Schedule 1, lin									. 8		-6,990.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. ⁻	This is yo	ur total ind	come					▶ 9		62,133.
 Married filing 	10	Adjustments to income from Sche	dule 1,	line 26							. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted	gross inco	me					▶ 11	1	62,133.
widow(er), \$25,100	12a	Standard deduction or itemized	-					12a	1	,55	ο.		
Head of	b	Charitable contributions if you take	the sta	ndard de	duction (se	e instr	ructions)	12b		30	0.		
household, \$18,800	с	Add lines 12a and 12b									. 12	с	12,850.
 If you checked 	13	Qualified business income deduct	ion fron	n Form 8	995 or Fori	n 899	5-A				. 13		
any box under Standard	14										. 14	1	12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lir	ne 11. lf z	ero or less	, ente	er-0				. 15		49,283.
	1												

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

Form **1040** (2021)

Form 1040 (2021	1)									Page	2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16		6 , 589	
	17	Amount from Schedule 2, lin	ie3					17			
	18	Add lines 16 and 17						18		6,589	
	19	Nonrefundable child tax cree	dit or credit for o	ther depender	nts from Schedul	e 8812		19			
	20	Amount from Schedule 3, lin	ie8					20			
	21	Add lines 19 and 20						21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22		6,589	
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23		0 .	_
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24		6,589	
	25	Federal income tax withheld				1 1					
	а	Form(s) W-2				25a 9	,812.				
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	,			25c					
	d	Add lines 25a through 25c						25d		9,812	
If you have a	26	2021 estimated tax payment			3.7			26			_
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a					
attach och. Elo.		Check here if you were k									
		January 2, 2004, and you taxpayers who are at least a									
	b	Nontaxable combat pay elec	-	1 1							
	С	Prior year (2019) earned inco				-					
	28	Refundable child tax credit or			Schedule 8812	28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Recovery rebate credit. See				30 1	,400.				
	31	Amount from Schedule 3, lin				31	•				
	32	Add lines 27a and 28 throug	h 31. These are	your total oth	er payments an	d refundable crec	lits 🕨	32	-	1,400	
	33	Add lines 25d, 26, and 32. T						33		1,212	_
Refund	34	If line 33 is more than line 24						34		4,623	
neiuliu	35a	Amount of line 34 you want	refunded to you	. If Form 8888	is attached, che	ck here		35a		4,623	,
Direct deposit?	►b	Routing number 0 8 1	9 0 4 8	0 8	► c Type: 🛛	Checking	Savings				
See instructions.	►d	Account number 2 9 1	0 2 3 1	2 8 0 2	2 4		•				
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax 🕨	36					
Amount	37	Amount you owe. Subtract	line 33 from line	24. For detail	s on how to pay,	see instructions	. 🕨	37			_
You Owe	38	Estimated tax penalty (see in				38					
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	? See					_
Designee		tructions				. 🕨 🗌 Yes. Co	omplete b	elow.	X No		
		signee's		Phone			nal identif				
		ne 🕨		no. 🕨			er (PIN) 🕨			<u> </u>	_
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com									
Here		ur signature		Date	Your occupation			• •	it you an lo		
				Duto					N, enter it		
Joint return?					SOFTWARE	ENGINEER	(see i	nst.) 🕨			
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's occupa	tion			t your spo		
your records.	,							ty Prote	ection PIN,		re
	Dh/	one no. (708)265-640	2	Email address				,,,			
		parer's name	3 Preparer's signat		BARLABHARATH	REDDY@GMAIL.CC	PTIN		Check if:		_
Paid		PRIYA RAM SAGAR GUPTA TALLAM					P02082	202		employed	
Preparer		n's name GLOBAL TAX		IVIN DAGAR	JOLIA IALLAN	1 0 0 / 1 0 / 2 0 2 2			678)96		_
Use Only		n's address > 2530 Pebbl		n Cummin	T GA 300/1			s EIN ►		.01719	_
Co to united					2						
GO TO WWW.Irs.go	ov/rom	n1040 for instructions and the late	si information.		BAA	REV 03/07/22 PRO			Form	1040 (20	∠1)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

Internal Revenue Service	► Go to www.irs.gov/Form1040 for
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR

Your social security number 440-55-0533

Part I Additional Income

BHARATH REDDY BARLA

1	Taxable refunds, credits, or offsets of state and local income taxes		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	-6,990.
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	-6,990.

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

Schedule 1 (Form 1040) 2021

Par	Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government 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	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympicmedals 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)		
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 . . . 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) 24k		
z	Other adjustments. List type and amount ► 24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	
	BΔΔ REV 03/07/22 PRO	Sched	ule 1 (Form 1040) 2021

REV 03/07/22 PRO

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

2021 Attachment Sequence No. 12

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

Department of the Treasury

BHARATH REDDY BARLA

Your social security number

440-55-0533

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	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result	
	e dollars.	(sales price)		line 2, columr		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	2,095.	2,500.			-405.	
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	1,971.	1,979.			-8.	
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4		
5	5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1						
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions						
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .	, ,	7	-413.	

Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below.		(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	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	8.	24.			-16.
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	in or (loss)	11				
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions		13			
14	Carryover	14	()			
15	Net long-term capital gain or (loss). Combine lines 8a on the back				15	-16.

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-429.
	• 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?		
	 Yes. Go to line 18. 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	(429.)
	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 03/07/22 PRO

Schedule D (Form 1040) 2021

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number				
BHARATH REDDY BARLA	440-55-0533				

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) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	See the separate instructions.		(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	05/02/21	12/12/21	2,095.	2,500.			-405.
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 (al here and inc is checked), lir	lude on your ne 2 (if Box B	2,095.	2,500.			-405.

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

Form 8949 (2021)	Attachment Sequence No. 12A
------------------	------------------------------------

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side BHARATH REDDY BARLA

Before you check Box D, E, or F 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 II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) (c) Date sold or		(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if If you enter an enter a co See the sep	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 Securities LLC	05/05/20	12/12/21	8.	24.			-16.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 8b (if Box D abov above is checked), or line 10 (if Box	al here and inc e is checked), li i	lude on your ne 9 (if Box E	8.	24.			-16.

Note: If you checked Box D 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.

Page 2

Social security number or taxpayer identification number

440-55-0533

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

► Go to www.irs.gov/Form8949 for instructions and the latest information.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
BHARATH REDDY BARLA	440-55-0533

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.

(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

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions.	n (g), (h) Gain or (loss). Is. 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) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g)	
ROBINHOOD CRYPTO LLC	05/05/21	12/12/21	1,971.	1,979.			-8.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶			1,971.	1,979.			-8.	

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

SCHED	ULE E
(Form 1	040)

Supplemental Income and Loss

OMB No. 1545-0074

6 12

(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 Attach to Form 1040, 1040-SR, 1040-NR, or 1041.								
	Internal Revenue Service (99) Go to www.irs.gov/ScheduleE for instructions and the latest information. Sequence No. 13 Name(s) shown on return Your social security number								
. ,	shown on return								-
_	ATH REDDY BARLA						440-5		
Part		s From Rental Real Estate and Ro	-	-					
		instructions. If you are an individual, rep							
		ents in 2021 that would require you to		. ,					
		ou file required Form(s) 1099?							Yes 🗌 No
<u>1a</u>		each property (street, city, state, ZIF		,					
	H.NO: 2-4-459,	, ROAD NO: 6 NEW NAGOLE (COLOR	NY NAGOL	E HYDE	RABAD TEL	ANGANA	IN 5	00035
<u>C</u>					Г а	w Dowtol	Dava ava		1
1b	Type of Property	2 For each rental real estate prop above report the number of fa	perty li	sted	га	ir Rental Days	Persona Day		QJV
	(from list below)	above, report the number of fa personal use days. Check the if you meet the requirements to	QJV b	ox only			Day		<u> </u>
	3	j if you meet the requirements to qualified joint venture. See inst	o file a		4	365		0	
					-				
<u>с</u>	(Duranta)			C	Ĵ.				
	of Property:	2. Maastian (Chart Tarra Dantal	5 a	l	7 0	Devetal			
	gle Family Residence	3 Vacation/Short-Term Rental				f-Rental			
Incom	ti-Family Residence	4 Commercial Properties:	6 KO	yalties		er (describe)			
3	-	•	3	A		В			C
4			4		410.				
Expen			4						
5			5						
6		instructions)	6						
7			7		1,250.				
8	•		8		1,230.				
9			9						
9 10		essional fees	10						
11	•		11		1 250				
12	-	id to banks, etc. (see instructions)	12		1,350.				
13			12						
14			14		1,650.				
15			15		1,350.				
16			16		1,000.				
17			17		1,800.				
18		e or depletion	18		1,000.				
19	Other (list)		19						
20		lines 5 through 19	20		7,400.				
21	•	line 3 (rents) and/or 4 (royalties). If			,,1001				
21		instructions to find out if you must							
	file Form 6198		21	-	-6,990.				
22		I estate loss after limitation, if any,							
	on Form 8582 (see in		22	(6,990.)	()
23a		reported on line 3 for all rental prope	rties		. 23a		410.		,
b		reported on line 4 for all royalty prop							
с		reported on line 12 for all properties							
d		reported on line 18 for all properties							
е		reported on line 20 for all properties					7,400.		
24		e amounts shown on line 21. Do no	t inclu	ide any loss			. 24		
25		osses from line 21 and rental real estate				tal losses here	. 25	(6,990.)
26		ate and royalty income or (loss).							,
		IV, and line 40 on page 2 do not							
		40), line 5. Otherwise, include this ar					. 26		-6,990.
For Pa		Notice, see the separate instructions.		NPA		-6,990)	hodulo E	(Form 1040) 2021

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2021

E-file Signature Authorization (Arizona Forms 140, 140A, 140EZ, 140NR and 140PY)

Do not mail this form to the Arizona Department of Revenue. The ERO must retain this document a minimum of four years.

Your First Name and Initial	.ast Name		Your Social Security Number*
BHARATH REDDY B.	BARLA	Enter	440 55 0533
Your Spouse's First Name and Initial (if filed joint)	ast Name	your SSN(s).	Spouse's Social Security No.*

PART 1 – PURPOSE (If you are e-filing a Small Business Income Tax Return, also complete Form AZ-8879 SBI)*Do Not Truncate

• To certify the truthfulness, correctness, and completeness of the taxpayer's electronic income tax return.

• To authorize the Electronic Return Originator (ERO) to affirm that the taxpayer wishes to use the taxpayer's electronic signature to the taxpayer's federal individual income tax return as the taxpayer's signature to the taxpayer's electronic Arizona individual income tax return.

PART 2 – TAX RETURN INFO		PART 3 – FINANCIAL INSTITUTION INFORMATION			
			Must be preser	nt when reque	esting direct debit or deposit.
1 Arizona Adjusted Gross Income	7,680 00		Foreign Ac	count Deposit	/Debit: See instructions below.
2 Balance of Tax	159 00		TYPE OF ACCOUNT		ROUTING NUMBER
3 Arizona Income Tax Withheld	207 00		🛛 Checking	Savings	0 8 1 9 0 4 8 0 8
Check box 4 <u>or</u> box 5:			ACCOUNT NUMBER		
4 REFUND: Enter the amount of	48 00	2 9 1 0 2	3 1 2 8	0 2 4	
5 AMOUNT YOU OWE: Enter th	e amount owed	00		JEST DATE	\$

Box 4 Checkbox – Refund: You are due a refund based on the information provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3).

Box 5 Checkbox – Amount You Owe: You owe taxes based on the information provided on your tax return. You have elected to direct debit for payment. The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).

Foreign Account Deposit/Debit Checkbox: Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come from a foreign account. If you check this box, do not enter your account numbers. If this box is checked, we will not direct deposit or debit your account. If you are due a refund, we will send you a check instead. If you owe tax, *you must mail a check to the Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.*

PART 4 – DECLARATION AND SIGNATURE AUTHORIZATION (Sign only after completing Part 2)

Under penalties of perjury, I declare that I have examined a copy of my electronic Arizona individual income tax return and accompanying schedules and statements for the year ending December 31, 2021, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts of Arizona adjusted gross income, total tax, Arizona income tax withheld, and refund (or amount owed) listed above are the amounts shown on the copy of my electronic Arizona income tax return.

- **6a** X I consent that my refund be directly deposited as designated in the electronic portion of my 2021 Arizona individual income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- **6b** I do not want direct deposit of my refund or I am not receiving a refund.
- **6c** I authorize the Arizona Department of Revenue (ADOR) 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 Arizona taxes owed on this return. 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.

If I have filed a balance due return, I understand that if the ADOR does not receive full and timely payment of my tax liability by April 18, 2022, I will remain liable for the tax liability and all applicable interest and penalties. When electronically filing my federal and state tax returns, I understand that if there is an error on my federal return, my state return will also be rejected.

I consent to my Electronic Return Originator (ERO) or On-Line Service Provider (OLSP) sending my electronic Arizona individual income tax return and accompanying schedules and statements to ADOR, and I consent to my ERO or OLSP sending such information to ADOR through a transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the transmission of my return is accepted and, if the return is rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/ or transmitter the reason(s) for the delay, or when the refund was sent. If ADOR contacts my ERO for a copy of my return, any documents or schedules to my return, and/or this authorization form, I authorize my ERO to release copies of the requested documents to ADOR.

I authorize GLOBAL TAXES LLC

(ELECTRONIC RETURN ORIGINATOR)

to make the election that I want my electronic signature to my electronic federal individual income tax return to serve as my signature to my electronic Arizona individual income tax return for the year ending December 31, 2021. I understand that when my ERO makes the election that my electronic signature to my federal individual income tax return will serve as my signature to my Arizona individual income tax return and declared under penalties of perjury that to the best of my knowledge and belief the return is true, correct and complete.

RE	→		
SE SIGN HERE	→	YOUR PEN AND INK SIGNATURE	DATE
PLEASE		SPOUSE'S PEN AND INK SIGNATURE	DATE

RETURN.		Arizona Form 140NR Nonresident Personal Income Tax Return						FOR CALENDAR YEAR				
RET	82F		heck box 82F f filing under extensi	on OR FISCAL YEAR	BEGINNIN	GLILI	2,0,2	1.				. 66F
뷥			First Name and Middle In							Your Soc	cial Security Nu	umber
	1	BHA	RATH REDDY			BARLA			Enter	440 55 0533		
10		Spous	e's First Name and Midd	le Initial (if box 4 or 6 che	cked)	Last Name			your	Spouse's	Social Securit	ty No.
ITEMS	1							SSN(s).		1		
Ē	(Current Home Address - number and street, rural route					Apt. No.		Daytime Pl	none (wi	th area code)	
	2	170	30 N 49TH STREE	T			2155		94 (708)265-	6403	
ANY			own or Post Office	State		ZIP Code		L	ast Names Used in Las	st Four Pri	or Year(s) (if diff	erent)
DO NOT STAPLE	3	SCO	TTSDALE	AZ		85254						97
AP	N	4	Married filing joint r	eturn 🛛 🗛 🔲 Injured Sp	ouse Prote	ction of Joint Ov	rerpayment		EVENUE USE ONLY. I		MARK IN THIS A	REA.
ST	TATI	4 Married filing joint return 4a Injured Spouse Protection of Joint Overpation 5 Head of household: Enter name of qualifying child or dependent on next line:						88	BR			
OT	ю Ю		L									
	FILING	6	u .	ate return: Enter spouse's r	name and Soc	cial Security Numb	er above.					
ă	ш	7	Single	claimed. Do not put a c	hook mork							
	10b					and 9, also comp	alata linas 47		IPM		RCVD	
	pup	8	Age 65 or over (you	and 48.	-	and 10b, compl				BOR		
	10a and 10b	9	Blind (you and/or s									
	Ś	10a	Dependents: Under	-		nts: Age 17 and						
	Exemptions 8 and 9 - Dependent	11-13	Residency Status (che	ck one): 11 🛛 Nonresid	ent 12 🗌 N	Ionresident Acti	ve Military	13	Composite Return	(see inst	tructions - page	28)
	aper		(Box 10a and 10b): De	ependent Information. Se	e instruction			the				
	ĕ		EIDST AN	(a) ND LAST NAME	SOCIA	(b) L SECURITY NO.	(c) RELATIONSI		(d) NO. OF MONTHS ✓ Dep	(e) endent Age	(f) ✓ if you did no	t claim
	6 pr			yourself or spouse.)	00017		REEAHONO		LIVED IN YOUR	luded in: 2	this person on federal return of	your
	8 ar								HOME IN 2021 (Box 10	Da) (Box 10		
	ons	10c										
	npti	10d								┥╘	!	
٨R.	Exen	10e								┥╘	<u> </u>	
0t		10 f										
ts after Form 140NR.		14		and you are the spouse o		• •		Δm	2021 FEDERAL nount from Federal Ret		2021 ARIZON Source Amount C	
L			•	nder the Military Spouses					L	r		
Ĕ			•	>				15 16	69,552	00	7,680	00 00
ftel							F			00		00
s af	e			nds			Г			00		00
	some			s) from federal Schedule (18 19		00		00
me	Arizona Inco		(deral Schedule D. See insi					-429		(00 0
cu	zonä		· · · ·	s, estates, trusts, small busin					-6,990			00 0
ъ	Ari			n your federal return. Incl					,	00		00
Jer				5 through 22	•				62,133	00	7,680	00
oth				ts: Include your own schedul						00		00
or		25	5 Federal adjusted gross income: Subtract line 24 from line 23 in the FEDERAL column						00			
les		26	26 Arizona gross income: Subtract line 24 from line 23 in the ARIZONA column							26	7,680	00
np		27	Arizona income ratio:	Divide line 26 by line 25, and	enter the resu	ult (not over 1.000)			27	0.124	
che				BS check the box if you are							7	00
Z SC				ncome. Subtract line 28 fr							7,680	
AZ	suo	30 This I	Total depreciation include box may be blank or may cor	d in Arizona gross income	a from vour re							00
and	dditi		This box may be blank or may contain a printed barcode of data from your return. 31 Partnership Income adjustment. See instructions 31									00
alo	Ă		32 Other Additions to Income. See instructions								7,680	
ler	2				W N R.		ced gain/loss			00	,,	-100
fec	age			1997, 1998, 2078, 2018, 1997, 1997, 1998, 1998, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 19 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 1997, 199			erm gain/loss			00		
ed	d uc				₩₩₩₩₩₩₩₩ ₩₩₩₩₩₩		rm gain/loss		0	00		
uir	nt.						jain. See instr.			00		
Place any required federal and AZ schedules or other documer	Subtractions – cont. on page 2		astro destructions and the second	N AN	s NGR ANS				25)	38	(00 0
ז א					1181868				fied small business			00
a ar	actic		an an ann an	is from the other indexed call for	9146-190 3 998				reciation			00
ace	ubträ					41 Partner	ship Income.	See	instructions	41		00
Ъ	ึง					42 Subtrac	t lines 38 thro	ugh 4	11 from line 33	42	7,680	00 0

Γ	Your I	Name (as shown on page 1) Yo	umber			
	BHA	ARATH REDDY BARLA				
1 0	43	Interest on U.S. obligations such as U.S. savings bonds and treasury bills		43		00
Subtractions - cont. from page	44	Agricultural crops contributed to Arizona charitable organizations				00
	45	Other Subtractions from Income: Complete Other Subtractions from Arizona Gross Income schedu				00
Sub cont.	46	Subtract lines 43 through 45 from line 42. Enter the difference	46	7,680		
Ĭ	47	Age 65 or over: Multiply the number in box 8 by \$2,100		00	· · · · ·	100
s	48	Blind: Multiply the number in box 9 by \$1,500		00		
tior	49	Other Exemptions: See instructions49E Multiply the number in box 49E by \$2,300		00		
Exemptions	50	Add lines 47, 48, and 49. Enter the total		00		
Ĕ	51	Multiply line 50 by the Arizona ratio on line 27			00	
	52	Arizona adjusted gross income: Subtract line 51 from line 46. If less than zero, enter "0"	52	7,680		
	53	Deductions: Check box and enter amount. See instructions		1,556		
	54	If you checked box 53S and claim charitable contributions, check 54C Complete page 3. See ins				00
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than zero, enter "0"			6,124	00
ах	56a				159	00
of Tax	56b					00
Ce	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 30				00
Balance	58	Subtotal of tax: Add lines 56a, 56b and 57. Enter the total			159	00
8	59	Dependent Tax Credit. See instructions		59		00
	60	Nonrefundable credits from Arizona Form 301, Part 2, line 61		60		00
	61	Balance of tax: Subtract lines 59 and 60 from line 58. If the sum of lines 59 and 60 is more than line 58, enter	r "O"	61	159	00
Total Payments and Refundable Credits	62	2021 AZ income tax withheld		62	207	00
ents e Cre	63	2021 AZ estimated tax payments63a 00 Claim of Right 63b 0	0 Add 63a and 63b	63c		00
aym	64	2021 AZ extension payment (Form 204)		64		00
tal P efunc	65	Other refundable credits: Check the box(es) and enter the total amount	308-l 652 349	65		00
₽₩	66	Total payments and refundable credits: Add lines 62 through 65. Enter the total	66	207		
or	67	TAX DUE: If line 61 is larger than line 66, subtract line 66 from line 61. Enter amount of tax due. Skip lines 68,	67		00	
Due	68	OVERPAYMENT: If line 66 is larger than line 61, subtract line 61 from line 66. Enter amount of overpayment.		48	00	
Tax Due or Overpayment	69	Amount of line 68 to be applied to 2022 estimated tax	69		00	
0	70	Balance of overpayment: Subtract line 69 from line 68. Enter the difference.	70	48	00	
Gifts	71 ·	- 81 Voluntary Gifts to:Assigned to Schools71QU Arizona Wildlife				
5 C		Child Abuse Prevention				
Voluntary		Neighbors Helping Neighbors76 00 Special Olympics				
Volu	~~	I Didn't Pay Enough Fund79 000 Sustainable State Parks 80 000 Spay/Neuter of Animals		J		
L	82	Political Party (if amount is entered on line 75 - check only one): 821 Democratic 822 Libertarian 823			00	
nalty	83	Estimated payment penalty		83		00
Pena	84	841 Annualized/Other 842 Farmer or Fisherman 843 Form 221 included		0.5		00
F		Add lines 71 through 81 and 83. Enter the total	85 86	4.8	00	
or wed	86	Direct Deposit of Refund: Check box 86Å if your deposit will be ultimately placed in a foreign account; see in	00	01	100	
n d d		CM Checking or ROUTING NUMBER ACCOUNT NUMBER				
Refund or Amount Owed		98 S□ Savings 0 8 1 9 0 4 8 0 8 2 9 1 0 2 4 0				
<	87	AMOUNT OWED: Add lines 67 and 85. Make check payable to Arizona Department of Revenue; write your S	87		00	
	I	Under penalties of perjury, I declare that I have read this return and any documents with it, and to th	e best of my kno	wledge		е
	1	true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information	r has a	ny knowledge.		
Ш Ш	-	Bharath 03/15/2022 SOI	FTWARE ENGI	INEEE	>	
L 山	,	YOUR SIGNATURE 03/15/2022 30.		\	-	
PLEASE SIGN HERE						
	€				_	
S		SPOUSE'S SIGNATURE DATE SPOU	JSE'S OCCUPATION			
E		SYAM PRIYA RAM SAGAR GUPTA TALLAM 03162022 GLOBAL TAXES LL	C			
A	Ī	PAID PREPARER'S SIGNATURE DATE FIRM'S NAME (PREPARER'S IF SI				-
Ľ	_	2530 Pebble Creek Ln	30-10171			
Δ	Ī	PAID PREPARER'S STREET ADDRESS	PAID PREPARER'S			
		Cumming GA 30041	(678) 965			_
	ŀ	PAID PREPARER'S CITY STATE ZIP CODE	PAID PREPARER'S	PHONE N	NUMBER	

If you are also sending a payment, mail to Arizona Department of Revenue, PO Box 52016, Phoenix, AZ 85072-2016 (PO Box 29204, Phoenix, AZ 85038-9204 if your return has a barcode). If you are not sending a payment, mail to Arizona Department of Revenue, PO Box 52138, Phoenix, AZ 85072-2138 (PO Box 29205, Phoenix, AZ 85038-9205 if your return has a barcode).