Form **8879**

(Rev. January 2021)

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.

OMB No. 1545-0074

	5				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
ANOC	OP REDDY GAYAM	899-08	-128	1	
Spouse's	s name	Spouse's soo	ial secu	urity numbe	r
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	er year you a	ro our	thorizina	1
	whole dollars only on lines 1 through 5.	er year you a	re au	unonzing	.)
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1 1	J 71	,497.
	Total tax		2		,646.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,399.
	Amount you want refunded to you		4		753.
5	Amount you owe		5		
Part		keep a cop	y of y	our retu	ırn)
my kno return (a to send for any Agent to paymen authoriz paymen busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the contribution in the intermediate and ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial taxes owed on this return and/or a payment of estimated tax, and the financial institution attoin is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation redected adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the preceive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) I	ove are the ammitter, or electro- jection of the transport of transport of the transport of transport of the transport of t	ounts for the conic reference in the conic reference in the conic received in the conic	from the in turn original ssion, (b) the designated paration so to this acco To revoke (ved no late ectronic paracknowledge	come tax ator (ERO) ne reason Financial ftware for bunt. This (cancel) a er than 2 ayment of e that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X	•	my PIN	1 2	2 8 1	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	r En		digits, but er all zeros	asiny
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Your si	gnature ▶ Date ▶				
Snous	e's PIN: check one box only				
	I authorize to enter or generate	my PIN			as my
	ERO firm name	_	ter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN met below.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue belov	v			
Part I	II Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5		8 6	1 9 8	9
		Don't ent	er all Ze	2108	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of	mitting this retu	ırn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

E1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [bu checked the MFS box, enter the reson is a child but not your depender	name of	ed filing separately your spouse. If you	` ′	_		, ,	_	, 0	, , , ,
Your first name			Last na	ame					Your so	cial security r	number
ANOOP RI	EDDY		GAY	AM					899-08-1281		
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse'	's social secur	ity number
		er and street). If you have a P.O. box, see	e instruct	ions.				Apt. no.	•	ntial Election	
		ce. If you have a foreign address, also co	omplete s	·				code 3022	spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change		
Foreign country	y name			Foreign province/stat	e/coun	ty	For	eign postal code	1	ow will not cit c or refund.	Spouse
At any time du	ring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	ny fina	ancial intere	st in an	y virtual curre	ncy?	X Yes	No
Standard Deduction	_	neone can claim: You as a de Spouse itemizes on a separate retu	•	•			nt				
Age/Blindness	you:	: Were born before January 2, 1	1957 [Are blind S	pouse	: Was	born be	efore January 2	2, 1957	☐ Is blind	t
Dependent		instructions): irst name Last name	(2) Social security number (3) Relationship to you			(4) ✓ if q Child tax c		r (see instruction			
If more than four	(.,.	2400 1141110									<u>aoponaonia</u>
dependents,											
see instruction and check	s ——										
here ▶											
	1_	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1	79	9,633.
Attach	2a	Tax-exempt interest	2a		b T	axable inter	rest		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		b (Ordinary divi	dends		. 3b)	
	4a	IRA distributions	4a		b T	axable amo	unt .		. 4b)	
	5a	Pensions and annuities	5a		b T	axable amo	unt .		. 5b)	
Standard	6a	Social security benefits	6a		b T	axable amo	unt .		. 6b)	
Deduction for—	7	Capital gain or (loss). Attach Sche	edule D i	f required. If not re	quired	l, check here	е.	▶ [7		484.
Single or Married filing	8	Other income from Schedule 1, lir	ne 10						. 8	-8	620.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come				▶ 9	71	497.
Married filing	10	Adjustments to income from Sche	edule 1,	line 26					. 10)	
jointly or Qualifying	11	Subtract line 10 from line 9. This is	s your a	djusted gross inc	ome				▶ 11	71	,497.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Schedu	le A)		12a	12,55	0.		
Head of	b	Charitable contributions if you take	e the sta	ndard deduction (se	e inst	ructions)	12b	30	0.		
household, \$18,800	С	Add lines 12a and 12b							. 120	12	2,850.
If you checked	13	Qualified business income deduct	tion fron	n Form 8995 or For	m 899	95-A			. 13		
any box under Standard Deduction, see instructions.	14	Add lines 12c and 13							. 14	12	2,850.
	15	Taxable income. Subtract line 14	from lir	ne 11. If zero or less	s, ente	er -0			. 15	58	8,647.

	16	Tax (see instructions). Check if any from Form(s): 1	2 4972	3 🗌		16	8,646.
	17	Amount from Schedule 2, line 3				17	
	18	Add lines 16 and 17				18	8,646.
	19	Nonrefundable child tax credit or credit for other dependen	ts from Schedule	8812		19	
	20	Amount from Schedule 3, line 8				20	
	21	Add lines 19 and 20				21	
	22	Subtract line 21 from line 18. If zero or less, enter -0				22	8,646.
	23	Other taxes, including self-employment tax, from Schedule	2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax			🕨	24	8,646.
	25	Federal income tax withheld from:					
	а	Form(s) W-2		25a 1	2,399.		
	b	Form(s) 1099		25b			
	С	Other forms (see instructions)		25c			
	d	Add lines 25a through 25c				25d	12,399.
If you have a	26	2021 estimated tax payments and amount applied from 202				26	
qualifying child,	27a	Earned income credit (EIC)	No	27a			
attach Sch. EIC.		Check here if you were born after January 1, 1998,					
		January 2, 2004, and you satisfy all the other require					
	h	taxpayers who are at least age 18, to claim the EIC. See ins Nontaxable combat pay election 27b	structions				
	b			-			
	с 28	Prior year (2019) earned income	Sahadula 9919	28			
	29			29		-	
	30	American opportunity credit from Form 8863, line 8 Recovery rebate credit. See instructions		30		-	
	31	Amount from Schedule 3, line 15		31		-	
	32	Add lines 27a and 28 through 31. These are your total othe			adite >	32	
	33	Add lines 25d, 26, and 32. These are your total payments				33	12,399.
	34	If line 33 is more than line 24, subtract line 24 from line 33.				34	3,753.
Refund	35a	Amount of line 34 you want refunded to you. If Form 8888		•		35a	3,753.
Direct deposit?	▶b	Routing number 0 3 1 2 0 2 0 8 4	Jou	377331			
See instructions.	▶d	Account number 3 8 3 0 1 3 9 8 7 8 2					
	36	Amount of line 34 you want applied to your 2022 estimate		36			
Amount	37	Amount you owe. Subtract line 33 from line 24. For details			. ▶	37	
You Owe	38	Estimated tax penalty (see instructions)		38			
Third Party		you want to allow another person to discuss this return					
Designee		ructions			Complete b	elow.	X No
		ignee's Phone			rsonal identif		
		no.			mber (PIN)		
Sign		ler penalties of perjury, I declare that I have examined this return and of, they are true, correct, and complete. Declaration of preparer (other					
Here			Your occupation	sea on an informa	1		nt you an Identity
	, 101	r signature Date	Your occupation				N, enter it here
Joint return?			SOFTWARE E	NGINEER	(see	inst.) 🖊	
See instructions.	Spo	use's signature. If a joint return, both must sign. Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.	,					tity Prote inst.) ▶ Î	ection PIN, enter it here
,		(01.6) 000 6085		.0.01.7.7.7	,	1151.)	
		ne no. (216) 333-6075 Email address parer's name Preparer's signature	GAYAMANOOF	P@GMAIL.CO Date	PTIN		Check if:
Paid		1, 3	ייידיים החרווי			2702	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR (JUPTA TALLAM	03/31/2022			Self-employed
Use Only		n's name ► GLOBAL TAXES LLC		678) 965-9522			
		n's address ▶ 2530 Pebble Creek Ln Cumming			<u> </u>	's EIN ▶	
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.	BAA	REV 03/26/22 PRO	1		Form 1040 (2021)

Form 1040 (2021)

Page 2

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

ANOOP REDDY GAYAM

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

Sequence No. 01
Your social security number
899-08-1281

Pai	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	0.
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, treschedule E		5	-8,620.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k		
I	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	-8 620

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee officials. Attach Form 2106	•	12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the 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)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
Z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, lin		26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

NB 201

2021

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99) ► 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.

Name(s) shown on return
ANOOP REDDY GAYAM

Your social security number
899-08-1281

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Yes
No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 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 4,792. 5,178. 188. -198. 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 2,589. 1,907. 682. Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 484. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2. column (a) with column (a) 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 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 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2021 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 484. • 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 • 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. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

8949 Form

Sales and Other Dispositions of Capital Assets

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

2021
Attachment
Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return

ANOOP REDDY GAYAM

Social security number or taxpayer identification number

899-08-1281

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

(C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a) Description of property	(b) (c) Date solo	Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, i If you enter an enter a c See the sep	Gain or (loss). Subtract column (e) from column (d) and	
(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 Amount of adjustme		from column (d) and combine the result with column (g)
Robinhood Securities LLC	05/05/21	12/12/21	4,792.	5,178.	W	188.	-198.
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 6)	al here and inc is checked), lir	lude on your ne 2 (if Box B	4,792.	5,178.		188.	-198.

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.

Form **8949**

Sales and Other Dispositions of Capital Assets

2021

Department of the Treasury Internal Revenue Service ► 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.

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return
ANOOP REDDY GAYAM

Social security number or taxpayer identification number

899-08-1281

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.

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

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)

Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

				reported on not reported			sis wasn't report	ed to the IF	RS	
1		(a)		(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co	any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
	(Example:	ple: 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)
ROBIN	IHOOD C	RYPTO	LLC	05/05/21	12/12/21	2,589.	1,907.			682.
nega	ative amoun	ts). Enter	each tota	s (d), (e), (g), and al here and inc	lude on your					

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.

682.

above is checked), or line 3 (if Box C above is checked) ▶

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

2021

Attachment Sequence No. 13

Department of the Treasury Internal Revenue Service (99)

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

Name(s)	shown on return							ır social sec	-	mber
ANOO	P REDDY GAYAM							9-08-1	-	
Part	Income or Loss From Rental Real Estate and Ros Schedule C. See instructions. If you are an individual, rep	-		-						rty, use
A Dic	d you make any payments in 2021 that would require you to	file Fo	rm(s) 10	099? S	ee inst	ructions .		[Yes	X No
B If "	Yes," did you or will you file required Form(s) 1099?							[Yes	☐ No
1a	Physical address of each property (street, city, state, ZIF	code)								
Α	FLAT NO 203, EDEN PARK APT VIP ROAD ON			RA PI	RADES	H TN 52	3002			
В	12211 110 200, 2221 11111 1121 1121 110112 01						0002			
C										
	Type of Property 2 For each rental real estate property	oorty lie	atod.		Fair	Rental	Per	sonal Use		
10	Type of Property (from list below) 2 For each rental real estate propabove, report the number of fa	ir renta	l and			Days		Days		QJV
A	hereonal use days (thack the l	QJV bo	ox only	Δ.		365		0		
	3 if you meet the requirements to qualified joint venture. See inst	o file as	sa	A B		303		U		
	qualified joint venture. See inst	i dotion	J.							
<u>C</u>				С						
	of Property:									
•	gle Family Residence 3 Vacation/Short-Term Rental				7 Self-					
	ti-Family Residence 4 Commercial	6 Roy	alties/		8 Othe	r (describe)			
Incom	e: Properties:			Α		E	3		(;
3	Rents received	3			670.					
4	Royalties received	4								
Expen										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1.	420.					
8	Commissions.	8			120.					
9		9								
-	Insurance	10								
10	Legal and other professional fees				450					
11	Management fees	11		2,	450.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			920.					
15	Supplies	15		1,	650.					
16	Taxes	16								
17	Utilities	17		1,	850.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		9,	290.					
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,	620.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22 (8 6	20.)	()(
23a	Total of all amounts reported on line 3 for all rental prope			0,0	23a	\	6	70.		
23a b	Total of all amounts reported on line 4 for all royalty prop				23b		0	,		
C	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d		0 0	20		
е	Total of all amounts reported on line 20 for all properties				23e		9,2			
24	Income. Add positive amounts shown on line 21. Do no		-					24		
25	Losses. Add royalty losses from line 21 and rental real estate	losses	from lin	e 22. E	nter tota	al losses he	re.	25 (8	3 , 620.
26	Total rental real estate and royalty income or (loss).	Combir	ne lines	24 an	d 25. E	nter the re	sult			
	here. If Parts II, III, IV, and line 40 on page 2 do not	apply 1	to you,	also e	enter th	nis amount	on			
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount i	in the to	otal on	line 41	on page 2	.	26	-	-8,620.

NPA

Good Life. Great Service.

DEPARTMENT OF REVENUE

Nebraska Individual Income Tax Return for the taxable year January 1, 2021 through December 31, 2021 or other taxable year: , 2021 through

FORM 1040N

2021

	Your First Name and Initial	Last Name	е				Please	Do Not Write In Th	is Spa	ce			
ŧ	ANOOP REDDY	GAYAM											
r E	If a Joint Return, Spouse's First Name and Initial	Last Name	е										
o ed													
ë Ty	Current Mailing Address (Number and Street or PO B	lox)											
Pleas	2505 N 185TH STREET												
_	City	State				Zip Code							
_	ELKHORN	NE			6802	22							
		e's Social S	Security N	Number				High School D					
_	8 9 9 0 8 1 2 8 1						2	8 2 8	0	1			
_A	at any time during 2021, did you receive, sell,	, exchang	ge, or ot	herwise	dispos	se of any fina	ncial in	terest in any virtual	currer	icy?	X Yes	S No)
(1	1) Farmer/Rancher (2) Active Military	(` ′ 📖	eceased T irst name &		. ,							
_	1 Federal Filing Status:												
	(1) ∑ Single (3) ☐ Marrie	d, filing s	separat	elv-Spo	use's SS	SN:		(4) ☐ H∈	ad of	Hous	sehold		
	(2) Married, filing jointly and Full	_	•	, ,							h depend	ent child	ren
-	2a Check if YOU were: (1) ☐ 65 or o	older	(2)	Blind	2	2b Check he	re if so	meone (such as y					
	SPOUSE was: (3) 65 or 6	older	(4)	Blind				a dependent: (1)			(2) S		
	3 Type of Return:		. ,										
	(1) X Resident (2) Partial	l-year res sident (a			e III)	,	2021 t	0	, 4	2021	(attach S	Schedule	e III)
_	4 Nebraska personal exemptions. (Enter					applies):							
	a Yourself. If someone can claim you									4 a	1		
	b Spouse. Married filing jointly returns	-											
	C Dependents, if more than three	see inst	ruction	s		Dependent's							
	First Name		Last Na	I		I Security Nu							
								Total number of					
								dependents liste	d	4 c			
	Total Nebraska personal exemptions –	add lines	s 4a, 4b	o, and 4	С							4	1
	5 Federal adjusted gross income (AGI) (li	ine 11, F	ederal	Form 10)40 or	1040-SR) D	o not le	eave blank	[5	71,	497.	00
	6 Nebraska standard deduction (if you ch	necked a	ny box	es on lir	ne 2a d	or 2b above,							
	see instructions; otherwise, enter \$7,100	o if single	e; \$14,2	200 if ma	arried,	filing jointly	or						
	qualified widow[er]; \$7,100 if married, filing	separate	ely; or \$	10,450 if	f head	of household) . 6	7,100.	00				
	7 Total itemized deductions (line 17, Fede	eral Sche	edule A	– see i	instruc	tions)	7		00				
	8 State and local income taxes (line 5a, S	Schedule	A, Fed	eral For	m 104	1040-S	R) 8	0.	00				
	9 Nebraska itemized deductions (line 7 n	ninus line	e 8)				9	0.	00				
1	0 Nebraska standard deduction or the Ne	ebraska i	itemize	d deduc	ctions,	whichever is	s great	er					
	(the larger of line 6 or line 9)								-	10	7,	,100.	00
1	1 Nebraska income before adjustments (line 5 mi	nus line	e 10)			<u></u>			11	64,	,397.	00
1	2 Adjustments increasing federal AGI (lin	ne 9, fron	n attach	ned Neb	oraska	Schedule I)	. 12		00				
	3 Adjustments decreasing federal AGI (li								00				
1	4 Nebraska Taxable Income (enter line 1												
	complete lines 15 and 16. Partial-year						or. Sch	. III before continu	ing .	14	64	,397.	00
1	5 Nebraska income tax (Partial-year residual)												
	from line 9, Nebraska Schedule III. Pap		-										
	All others must use Tax Calculation Sc	hedule.)					15	3,480.	00				
1	6 Nebraska other tax calculation:												
	a Federal Tax on Lump-Sum Distribution			n 4972)	16 a \$	S							
	b Federal tax on early distributions (les												
	Form 5329 or line 8, Sch. 2, Federal F												
	c Total (add lines 16a and 16b)												
	Residents multiply line 16c by 29.6%												
	Partial-year residents and nonreside												
	Nebraska Schedule III								00				
1	7 Total Nebraska tax before Nebraska pe		-										
_	Do not pay the amount on this line. Pay	y the am	ount fro	om line 4	43					17	3,	480.	00

40	N. I	40	1.40				
	Nebr. personal exemption credit for residents only (\$142 times the number on line 4)	18	142.	00	-		
	Credit for tax paid to another state, line 6, Nebraska Schedule II						
	(attach Nebraska Schedule II and a copy of the other state's return)			00			
	Credit for the elderly or disabled (attach copy of Federal Schedule R)			00			
	Community Development Assistance Act credit (attach Form CDN)			00			
22	Form 3800N nonrefundable credit (attach Form 3800N)	22		00			
23	Nebraska child/dependent care nonrefundable credit, only if line 5 is more						
1	than \$29,000 (attach a copy of Federal Form 2441 and see instructions)	23		00			
24 (Credit for financial institution tax (attach Form NFC)	24		00			
	Employer's credit for expenses incurred for TANF (ADC) recipients (see instr.)			00			
	School Readiness Tax Credit for providers (see instructions)			00			
	Designated extremely blighted area tax credit (attach Form 1040N-EB)			00			
	Total nonrefundable credits (add lines 18 through 27)				28	142.	00
					20	112.	- 00
	Nebraska tax after nonrefundable credits. Subtract line 28 from line 17 (if line 28 is						
	enter -0-). If the result is greater than your federal tax liability, see page 9 in the ins					2 222	00
	federal tax, check box \square and attach a copy of the federal return \dots		 		29	3,338.	00
	Total Nebraska income tax withheld (attach 2021 Forms, see instructions)						
	a W-2\$ 4,160. b K-1N\$						
(c W-2G, 1099-R,1099-MISC, 1099-NEC or others \$0	30	4,160.	00			
31 2	2021 estimated income tax payments (include any 2020 overpayment credited to						
4	2021 and any payments submitted with an extension request)	31		00			
	Form 3800N refundable credit (attach Form 3800N)	32		00			
	Nebraska child/dependent care refundable credit, if line 5 is \$29,000 or less						
	·	33		00			
	Beginning Farmer credit from Form 1099 BFC (NDA NextGen)	34		00	1		
		34		00	1		
	Nebraska earned income credit. Enter number of qualifying children 97	25		00			
	Federal credit 98 \$ x .10 (10%) (attach pages 1-2 of federal return)			00	-		
	Nebraska Property Tax Incentive Act Credit (attach Form PTC)			00	-		
	Credit for qualified Volunteer Emergency Responders (see instructions)			00			
	School Readiness Tax Credit for qualified staff members (see instructions)			00	<u> </u>		
	Total refundable credits (add lines 30 through 38)				39	4,160.	00
	Penalty for underpayment of estimated tax (see instructions). If you calculated a Fo						
(or greater, or used the annualized income method, attach Form 2210N, and check	this	box 96		40		00
41	Total tax and penalty. Add lines 29 and 40				41	3,338.	00
42	Use tax due on taxable purchases where applicable sales tax was not collected. (so	ee ir	nstructions)				
	Enter purchases subject to state tax 91 \$ State tax 92 \$ (purc	hases x 5.5%);				
	Enter purchases subject to local tax 93 \$Local tax 94 \$ (purch			%)			
	95 Local code(see local rate schedule);			/			
	Add state and local taxes and enter on line 42. If no use tax is due, enter -0- on line	42					
					42	0.	00
43 '					42	0.	00
	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 fr	om 1	the total of lines 4	1		0.	
á	Total amount due . If line 39 is less than total of lines 41 and 42, subtract line 39 france and 42. Pay this amount in full. For electronic or credit card payment, check here \Box	om i	the total of lines 4 d see instructions .	1	43		00
44	Total amount due . If line 39 is less than total of lines 41 and 42, subtract line 39 frand 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines 41 and 42 and 4	om and	the total of lines 4 d see instructions .	1 9		822.	
44 (45)	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41	the total of lines 4 d see instructions .	1 9	43		00
44 (45 / 46 \	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46	the total of lines 4 d see instructions . and 42 from line 3	1 9 00 00	43		00
44 (45) 46) 47)	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	1 9 00 00	43	822.	00
44 (45 / 46 \ 47 /	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 fr and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 / 46 \ 47 /	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 / 46 \ 47 /	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 / 46) 47 / i 48a	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 / 45 / 46 \ 47 / i 48a	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 fr and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 / 46) 47 / i 48a	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	9 90 00 00 be	43 44 47	822.	00
44 (45 /46) 46) 47 / 48a 48c 48d	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	41 45 46 refu	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	1 9 00 00 be 	43 44 47 2 = S	822. 822. avings Direct Deposi	00
44 (45 /46) 46) 47 / 48a 48c 48d	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 at the b	the total of lines 4 d see instructions . and 42 from line 3 nd will generally	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00
44 (45 / 45 / 46 \ 47 / i 48a 48c 48d	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 46 of the b	the total of lines 4 d see instructions . and 42 from line 3 nd will generally 1 = Checkir 1 open of my knowledge an OOP@GMAIL.CO	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00
44 (45) 46) 47) 48a 48c 48d	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 46 of the b	the total of lines 4 d see instructions . and 42 from line 3 nd will generally 1 = Checkir 1 open of my knowledge an OOP@GMAIL.CO	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00
44 45 46 47 47 48a 48c 48d Si he	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 46 of the b	the total of lines 4 d see instructions . and 42 from line 3 nd will generally 1 = Checkir 1 open of my knowledge an OOP@GMAIL.CO	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00
44 45 46 47 47 48a 48c 48d Si he	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax. Wildlife Conservation Fund donation of \$1 or more Amount of line 44 you want refunded to you (line 44 minus lines 45 and 46) Your issued by July 15, if your paper return is filed by April 15 (see instructions). Routing Number 3 8 3 0 1 3 9 8 7 8 2 4 I Check this box if this refund will go to a bank account outside the United States Under penalties of perjury, I declare that, as taxpayer or preparer, I have examined this return and to Spouse's Signature Spouse's Signature (if filling jointly, both must sign) Spouse's Signature (if filling jointly, both must sign) Account Number Spouse's Signature (if filling jointly, both must sign)	and 41 45 46 46 46 of the b	the total of lines 4 d see instructions . and 42 from line 3 nd will generally 1 = Checkir 1 open of my knowledge an OOP@GMAIL.CO	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00
44 0 45 7 46 N 47 7 ii 48a 48a 48c 48d Sii he e e e c e iis retur	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and	the total of lines 4 d see instructions . and 42 from line 39 md will generally	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00
44 45 44 45 44 45 44 45 44 45 44 48 48 48 48 48 48 48 48 48 48 48 48	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 46 46 46 46 46 46 46 46 46 46 46	the total of lines 4 d see instructions . and 42 from line 39 nd will generally	1 9 00 00 be ng 2	43 44 47 2 = S	822. avings Direct Deposi true, correct, and comp	00 00
44 45 44 45 44 45 44 45 44 45 44 48 48 48 48 48 48 48 48 48 48 48 48	Total amount due. If line 39 is less than total of lines 41 and 42, subtract line 39 from and 42. Pay this amount in full. For electronic or credit card payment, check here Overpayment. If line 39 is more than total of lines 41 and 42, subtract total of lines Amount of line 44 you want applied to your 2022 estimated tax	and 41 45 46 46 46 46 46 46 46 46 46 46 46 46 46	the total of lines 4 d see instructions . and 42 from line 39 nd will generally	1 9 00 00 be ng 2	43 44 47 2 = S	822. 822. avings Direct Deposi	00 00