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

Submi	ssion Identification Number (SID)							
Taxpaye	er's name	Social secu	Social security number					
ANUI	RAG NERLAKANTI	326-3	7-7382	2				
Spouse'	s name	Spouse's so	ocial secu	rity numbe	r			
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	_ er year you	are aut	horizing	.)			
Enter v	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	84	,645.			
2	Total tax		2	11	,539.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12	2,958.			
4	Amount you want refunded to you		4	1	,419.			
5	Amount you owe		5					
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a co	py of y	our retu	ırn)			
to send for any Agent t paymer authoriz paymer busines taxes t persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transfer my 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 loo initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account index of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recessed as a superior to the payment (settlement) date. I also authorize the financial institutions involved in the oreceive 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 approximate the more received to the all identification number (PIN) below is my signature for the income tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate the more tax return (original or amended) I approximate tax return (original or amended) I	jection of the J.S. Treasury dicated in the ion to debit the the authoriquests must leeprocessing payment. I fu	transmis and its of tax prep ne entry t zation. To be receive of the ele- urther ac	sion, (b) the designated paration so to revoke (byed no late ectronic parknowledge	he reason Financial ftware for ount. This (cancel) a er than 2 ayment of that the			
	nic Funds Withdrawal Consent.							
· ·	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate	, DIN	7 7 3	8 8 2				
×	I authorize GLOBAL TAXES LLC to enter or generate	· E		digits, but	as my			
	signature on the income tax return (original or amended) I am now authorizing.	a	ion't ente	r 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 methodow.							
Your s	ignature ▶ Date ▶							
Spous	se's PIN: check one box only	_						
	I authorize to enter or generate	my PIN			as my			
	ERO firm name		nter five	digits, but	asiny			
	signature on the income tax return (original or amended) I am now authorizing.	d	lon't ente	r 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 meti below.							
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below	/						
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		8 6	1 9 8	9			
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the 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 e-file Providers of	tax return (ori	ginal or a	amended) .ccordance				
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To	Do So						

£1040

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

2021

OMB No. 1545-0074

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

Filing Status Check only one box.	If yo	Single Married filing jointly but checked the MFS box, enter the reson is a child but not your dependent	name of	ed filing separately your spouse. If you	,	_		` ,	_	, ,	` , ` ,
Your first name	and m	iddle initial	Last na	ame					Your so	cial securi	ity number
ANURAG			NER	LAKANTI					326-3	37-738	32
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's social security number		
	•	er and street). If you have a P.O. box, see	instruct	ions.				Apt. no.	ł		ion Campaigr
38952 P					1			204		ere if you if filing ioi	, or your ntly, want \$3
FARMING		ce. If you have a foreign address, also co	omplete :	spaces below.	Sta M:			code 3335	to go to	0,	Checking a
Foreign countr	y name			Foreign province/stat	te/coun	ty	Fore	eign postal code	your tax	or refund	l. Spouse
At any time du	ıring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	any fina	ancial interes	st in an	y virtual curre	ncy?	Yes	⊠ No
Standard Deduction		neone can claim:	•			'	nt				
Age/Blindnes	s You	: Were born before January 2, 1	957 [Are blind S	pouse	: Was b	orn be	efore January 2	2, 1957	☐ Is b	lind
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relation	nship	(4) 🗸 if q	ualifies for	(see instru	uctions):
- I · · · · · · · · · · · · ·				number		to you	1	Child tax c	redit	Credit for o	ther dependents
than four											
dependents, see instruction	s										
and check											
here ▶ □											
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		94,375.
Attach	2a	Tax-exempt interest	2a		b T	axable inter	est		. 2b		
Sch. B if required.	3a	Qualified dividends	3a		b C	Ordinary divid	dends		. 3b		
required.	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	dule D	if required. If not re	quired	, check here		▶[7		-30.
 Single or Married filing 	8	Other income from Schedule 1, lir	ne 10		·				. 8		-9,700.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total ir	come				▶ 9		84,645.
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			ome				▶ 11		84,645.
widow(er),	12a	Standard deduction or itemized				-	12a	12,55	0.		
\$25,100 • Head of	b	Charitable contributions if you take		•			12b	30			
household, \$18,800	С	Add lines 12a and 12b							. 120	:	12,850.
If you checked	13	Qualified business income deduct		n Form 8995 or Fo	rm 899	95-A			. 13		
any box under Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction,	15	Taxable income. Subtract line 14	from lin	ne 11. If zero or les	s, ente	er -0			. 15		71,795.

Form 1040 (2021	1)									Page 2
	16	Tax (see instructions). Check	if any from Form	ı(s): 1 881	4 2 🗌 4972	3 🗌		. 16		11,539.
	17	Amount from Schedule 2, lin	ne 3					. 17		
	18	Add lines 16 and 17						. 18		11,539.
	19	Nonrefundable child tax cred	dit or credit for c	ther depender	nts from Schedul	e 8812 .		. 19		
	20	Amount from Schedule 3, lin	ne 8					. 20		
	21	Add lines 19 and 20						. 21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22		11,539.
	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		11,539.
	25	Federal income tax withheld								
	а	Form(s) W-2				25a	12,9	58.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c						. 250	<u> </u>	12,958.
16	26	2021 estimated tax payment						. 26		
If you have a qualifying child,	27a	Earned income credit (EIC)			Nο	27a				
attach Sch. EIC.		Check here if you were k								
		January 2, 2004, and you taxpayers who are at least a	ge 18, to claim t	he EIC. See in						
	b	Nontaxable combat pay elec								
	С	Prior year (2019) earned inco								
	28	Refundable child tax credit or								
	29	American opportunity credit				29				
	30	Recovery rebate credit. See				30				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27a and 28 throug								
	33	Add lines 25d, 26, and 32. T								12,958.
Refund	34	If line 33 is more than line 24						. 34		1,419.
	35a	Amount of line 34 you want				_		35a	1	1,419.
Direct deposit? See instructions.	►b	Routing number 0 7 1			▶ c Type: 🔀	Checking	Savi	ngs		
occ manactions.	►d	Account number 6 7 3								
-	36	Amount of line 34 you want a				36			-	
Amount	37	Amount you owe. Subtract				1 1	ns .	▶ 37	\bot	
You Owe	38	Estimated tax penalty (see in	nstructions) .		<u> ▶</u>	38				
Third Party Designee	ins	you want to allow another structions	•			. ► TYe		lete below	_)
		signee's ne ▶		Phone no. ▶			Personal number (f	identificatio PINI) ▶	ال ا	
Cian		der penalties of perjury, I declare t	hat I have examine		d accompanying sch				est of my	knowledge and
Sign		ief, they are true, correct, and com								
Here	You	ur signature		Date	Your occupation			If the IRS s	ent you ar	ı Identity
	k.							Protection		it here
Joint return?					SOFTWARE		R	(see inst.)		
See instructions. Keep a copy for	Spo	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion		If the IRS s		pouse an N, enter it here
your records.								(see inst.)		1 1 1
	Pho	one no. (832)983-433	0	Email address	ANURAG.NERLA	KANTT@GMAT	L. COM			
		eparer's name	Preparer's signat			Date	PT	IN	Check	if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/17/20	22 PO	2082703	₃ □ Se	lf-employed
Preparer									none no. (678)965-9522	
Use Only		m's address ► 2530 Pebb		n Cummin	g GA 30041			Firm's EIN		-1017196
Go to www.irs.q		n1040 for instructions and the late			BAA	REV 02/05/22 F	PRO			m 1040 (2021)
õ										. ,

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

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

Additional locates

Additional locates

Par	Additional income				
1	Taxable refunds, credits, or offsets of state and local income taxes	s.		1	0.
2 a	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, tr Schedule E			5	-9,700.
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) .	8р			
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 1040-NR, line 8			10	-9,700.

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

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 Your social security number 326-37-7382 ANURAG NERLAKANTI

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

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. line 2, column (g) 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 72. 133. -61. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 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 -61. 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	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and					
	form may be easier to complete if you round off cents to le dollars.	ff cents to (sales price)		Form(s) 8949, Part II, line 2, column (g)		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	105.	74.			31.					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked										
10	Totals for all transactions reported on Form(s) 8949 with Box F checked										
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11						
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12						
13	Capital gain distributions. See the instructions		13								
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()								
15		orksheet in the instructions									

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -30. • 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. Are lines 15 and 16 both gains? 17 ☐ **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. 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 30.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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

Sales and Other Dispositions of Capital Assets

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

▶ 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

14	
ANTIRAG	NERLAKANTI

Social security number or taxpayer identification number 326-37-7382

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 Part I 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 F	orm 1099-B	·			
(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 co	any, to gain or loss. amount in column (g), ode in column (f). arate 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	02/01/21	07/19/21	72.	133.			-61.
2 Totals. Add the amounts in columns negative amounts). Enter each total 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	72.	133.			-61.

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 (2021) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ANURAG NERLAKANTI

Social security number or taxpayer identification number 326-37-7382

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☐ (E) Long-term transactions	•	. ,	•	•	,	· · · · · · · · · · · · · · · · · · ·				
(F) Long-term transactions				·						
(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 co	any, to gain or loss. amount in column (g), ode in column (f). arate 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	03/06/20	07/19/21	105.	74.			31.			
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	al here and inc is checked), lir	lude on your ne 9 (if Box E	105.	74.			31.			

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.

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.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13

) SHOWN OF FEMALE							ur sociai	-	
	RAG NERLAKANTI	Davalit	M-1 "			a la contro		26-37		
Part	Income or Loss From Rental Real Estate and Schedule C. See instructions. If you are an individual,	-		-						
A Di										
	d you make any payments in 2021 that would require you									
	'Yes," did you or will you file required Form(s) 1099?	7ID anda\		• •			•		Y	es No
<u>1a_</u> A	Physical address of each property (street, city, state,									
B	CHIKKADPALLY HYDERABAD TELANGANA IN	500020								
1b	Type of Property (from list below) 2 For each rental real estate pasove, report the number of personal use days. Check the control of the co	of fair rental	and			Rental Days	Per	sonal l	Jse	QJV
Α	3 if you meet the requirement qualified joint venture. See	ts to file as	a of the	Α		365		()	
В	qualified joint venture. See	instructions	6.	В						
С				С						
Туре	of Property:									
1 Sing	gle Family Residence 3 Vacation/Short-Term Rent	tal 5 Land	b	7	' Self-	Rental				
	ti-Family Residence 4 Commercial	6 Roy	alties	8	Othe	r (describe)			
Incon				Α		E	3			С
3	Rents received			6	500.					
4	Royalties received	4								
Exper										
5	Advertising									
6	Auto and travel (see instructions)									
7	Cleaning and maintenance			1,0	000.					
8	Commissions	8								
9	Insurance									
10	Legal and other professional fees									
11	Management fees			8	300.					
12	Mortgage interest paid to banks, etc. (see instructions									
13	Other interest									
14	Repairs				500.					
15	Supplies			2,0	000.					
16	Taxes	16								
17	Utilities	17		4,0	000.					
18	Depreciation expense or depletion	18								
19	Other (list)			10 0	200					
20	Total expenses. Add lines 5 through 19	20		10,3	500.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties).	1 1								
	result is a (loss), see instructions to find out if you mu file Form 6198	ust 21		-9,7	700					
20	Deductible rental real estate loss after limitation, if ar			J, 1	,					
22	on Form 8582 (see instructions)	1y, 22		9 7	00.)	()/		١
23a	Total of all amounts reported on line 3 for all rental pro			J, 11	23a	1	6	00.		
b	Total of all amounts reported on line 4 for all revalty per			•	23b			00.		
C	Total of all amounts reported on line 4 for all properti			•	23c					
d	Total of all amounts reported on line 18 for all properti				23d					
e	Total of all amounts reported on line 20 for all properti				23e	1	.0,3	00.		
24	Income. Add positive amounts shown on line 21. Do		e anv los	sses			, .	24		
25	Losses. Add royalty losses from line 21 and rental real es		-		nter tota	al losses her	е.	25 (9,700.)
26	Total rental real estate and royalty income or (loss									-,,
20	here. If Parts II, III, IV, and line 40 on page 2 do n									
	Schedule 1 (Form 1040), line 5. Otherwise, include this							26		-9,700.

2021 MICHIGAN Individual Income Tax Return MI-1040

2021 MIICHIGAN INC Return is due April 18, 2022					'n IVII-10	J 4 U				ended Return ude Schedule AMD)]
1. Filer's First Name	M.I.	Last Name	ласк	IIV.		2. File	er's Full	Social Sec	curity	No. (Example: 123-45-678	9)
ANURAG		NERLAKAN'	TI						•		σ,
lf a Joint Return, Spouse's First Name	M.I.	Last Name					326		37		2790)
Home Address (Number, Street, or P.O.	•	<u></u>				3. Sp	ouse s r	-ull Sociai	Secui	rity No. (Example: 123-45-6	3/89)
38952 POLO CLUB D	R <u>,</u> AP'	T. 204									
City or Town				ZIP Code		4. Scl			(5 dig	its – see page 60)	
FARMINGTON			MI	48335				3250			
 STATE CAMPAIGN FUND Check if you (and/or your spoufiling a joint return) want \$3 of to go to this fund. This will not your tax or reduce your refund 	your taxes increase	. ==	er ouse				nis box	if 2/3 of y		AFARERS ncome is from farming,	
7. 2021 FILING STATUS. Check	one.				8. 2021 I	RESIDE	NCY S	TATUS.	Chec	k all that apply.	
a. X Single	* If y	ou check box "c," co	:omplet	.e	a. X	Residen	ıt				
L. The second of Ellins in Indianalists		3 and enter spouse'			. ┌┐	N	U4 *			* If you check box "b" o "c," you must complete	
b. Married filing jointly	Delo-	N:			b	Nonresi	dent ^			and include Schedule	
c. Married filing separately	*				с. 🔲	Part-Yea	ar Resi	dent *		NR.	
9. EXEMPTIONS. NOTE: If so	meone els	e can claim you as	a deρε	endent, che	ck box 9e, e	nter 0 o	n line S	a and en	ter \$	1,500 on line 9e (see in	str.).
Number of exemptions (se	e instructi	ions)			9a.		$\begin{bmatrix} 1 \\ x \end{bmatrix}$	\$4,900	9a.	4900	00
b. Number of individuals who		,					7	Ψ1,0			+-
blind, hemiplegic, paraple							x	\$2,800	9b.		00
c. Number of qualified disabl							x	\$400	9c.		00
d. Number of Certificates of S	Stillbirth fro	m MDHHS (see ins	structio	ns)	9d.	L	x	\$4,900	9d.		00
e. Claimed as dependent, se	e line 9 No	OTE above			9e.				9e.		00
f. Add lines 9a, 9b, 9c, 9d ar	nd 9e. Ent	ter here and on line	: 15						9f.	4900	00
10. Adjusted Gross Income from	m your U.S	3. Form <i>1040</i> (see i	instruct	tions)				. 10.		84645	00
11. Additions from Schedule 1, lin	ne 9. Incl u	ıde Schedule 1						. 11.			00
12. Total. Add lines 10 and 11								. 12.		84645	00
13. Subtractions from Schedule 1	1, line 29.	Include Schedule	1					. 13.		0	00
14. Income subject to tax. Subt	ract line 1	3 from line 12. If lin	าe 13 is	greater th	an line 12, er	nter "0" .		. 14.		84645	00
15. Exemption allowance. Enter	r amount f	rom line 9f or Sche	dule Ni	R, line 19				. 15.		4900	00
16. Taxable income. Subtract lin	ie 15 from	line 14. If line 15 is	s greate	er than line	: 14, enter "0'	"		. 16.		79745	00
17. Tax. Multiply line 16 by 4.25%	6 (0.0425)				AMOUN			. 17.		3389 CREDIT	00
Income Tax Imposed by gove Include a copy of the return (see the control of the control				3a.		-	00	18b.			00
Michigan Historic Preservatio instructions)	n Tax Cre	dit carryforward (see	ee				00	19b.			00
20. Income Tax. Subtract the sur If the sum of lines 18b and 19	m of lines	18b and 19b from li	line 17.					·		3389	00

2021 N	II-1040, Page 2 of 2									
		Filer	's Full Social S	ecurity Number] 3	26 -	- 3	37 '	7382	
21.	Enter amount of Income Tax from li	ne 20					21.		3389	00
22.	Voluntary Contributions from Form						22.			00
	•				•••••					100
23.	USE TAX. Use tax due on Internet, Worksheet 1 (see instructions)		•				23.			00
24.	Total Tax Liability. Add lines 21, 22	2 and 23				24.			3389	00
	INDABLE CREDITS AND PAYN									_
25.	Property Tax Credit. Include MI-1	040CR or MI-1040CF	R-2				25.			00
26.	Farmland Preservation Tax Credi	t. Include MI-1040CF	R-5				26.			00
			_	FEC	DERAL			MICH	HIGAN	
27.	Earned Income Tax Credit. Multiply enter result on line 27b	line 27a by 6% (0.06)	and 27a.			00	27b.			00
28.	Michigan Historic Preservation Tax		_	3581			28.			00
29.	Credit for allocated share of tax pai	,					29.			00
	•	, 0	,	`	,					
30.	Michigan tax withheld from Schedu	le W, line 6. Include \$	Schedule W ((do not subn	nit W-2s)		30.		4021	- 00
31.	Estimated tax, extension payments	and 2020 credit forwa	ard				31.			00
32.	2021 AMENDED RETURNS ONLY	. ,	0 0	2021 return s	hould skip to	line 33.				
	Amended returns must include Sch	hedule AMD (see ins	tructions).							
	32a. If you had a refund and/or negative number on line 3.		ginal return, che	eck box 32a an	d enter this amo	ount as a				
	32b. If you paid with the origina any additional tax paid after						32c.			00
33.	Total refundable credits and payme	nts. Add lines 25, 26.	27b. 28. 29. 3	30. 31 and 32	²c	33.			4021	- 00
	IND OR TAX DUE									
	If line 33 is less than line 24, subtra	ct line 33 from line 24	. If applicable	e, see instruct	ions.					
	Include interest 00 a	and penalty	00	\	OU OWE	34.				00
35.	Overpayment. If line 33 is greater	than line 24, subtract	line 24 from li	ine 33		35.			632	2 00
36.	Credit Forward. Amount of line 35	to be credited to your	2022 estimat	ted tax for yo	ur 2022 tax re	turn	36.			00
37.	Subtract line 36 from line 35				REFUND	37.			632	2 00
	ECT DEPOSIT	a. Routing Transi	t Number	b. A	ccount Numbe	er		c. Type of	Account	
	it your refund directly to your financial ion! See instructions and complete a, b	071000013		(7276	2500		1. 2	X Checking	2. Savi	ngs
and c.		071000013		673763	3590 					
	eased Taxpayer. If Filer and/or Spousers DATE OF DEATH ONLY. Example							leclare under per ion of which I hav		
	TO DEATH ONE! LAMBIE		,	l	Preparer's PTII				- ary knowned	
Filer		Spouse -		<u> </u>	P02082					
	ayer Certification. I declare under tachments is true and complete to the bes		e information in	n this return	Preparer's Nan SYAM PI		• • •	SAGAR (GUPTA 7	TA.
Filer's	Signature		Date		Preparer's Sign		RAM	SAGAR (ר גייסוונ	ים
Spous	se's Signature		Date					ess and Telephon		
					GLOBAL	TAX	ES LI	LC		
					2530 PI					
	By checking this box, I authorize Tre	easury to discuss my	return with my	y preparer.	CUMMING					
ı ''	- -		•	• •	678-96					

Refund, credit, or zero returns. Mail your return to:

 ${\bf Michigan\ Department\ of\ Treasury,\ Lansing,\ MI\ 48956}$

Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

2021 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2021, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
ANURAG		NERLAKANTI	326 — 37 — 7382
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

			$\neg \neg$				
A B		В	B C D			E	
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)			Box 17 — Michigar income tax withheld		
	<u> </u>		<u></u>	<u> </u>	寸		П
Х		47-2051918	INFODRIVE SYSTEM	94375	00	4021	00
					00		00
					00		00
					00		00
					00		00
Enter	Table	1 Subtotal from additional Sche	dule W forms (if applicable)				00
4.	SUB	TOTAL. Enter total of Table 1, c	olumn E		4.	4021	00

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	D	E			
Enter "X" for: Filer or Spouse		Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld		
			00	00		
			00	00		
			00	00		
			00	00		
			00	00		
Enter Tabl	e 2 Subtotal from additional Sche		00			
5. SU	5. SUBTOTAL. Enter total of Table 2, column E					
6. TO T	「AL. Add lines 4 and 5. Enter her	e and carry to MI-1040, line 30) 6.	4021 00		

REV 02/05/22 PRO

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

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

Additional locates

Additional locates

Par	Additional income				
1	Taxable refunds, credits, or offsets of state and local income taxes	s.		1	0.
2 a	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, tr Schedule E			5	-9,700.
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) .	8р			
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 1040-NR, line 8			10	-9,700.

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			
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	24 g		
h	,	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	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE D (Form 1040)

Capital Gains and Losses

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 Your social security number 326-37-7382 ANURAG NERLAKANTI

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

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. line 2, column (g) 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 72. 133. -61. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 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 -61. 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	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost			(h) Gain or (loss) Subtract column (e) from column (d) and		
	form may be easier to complete if you round off cents to le dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum		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	105.	74.			31.		
9	Totals for all transactions reported on Form(s) 8949 with Box E checked							
10	Totals for all transactions reported on Form(s) 8949 with Box F checked							
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824							
12	Net long-term gain or (loss) from partnerships, S corporat	12						
13	Capital gain distributions. See the instructions	13						
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	()					
15	Net long-term capital gain or (loss). Combine lines 88 on the back	•	. ,		15	31.		

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -30. • 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. Are lines 15 and 16 both gains? 17 ☐ **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. 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 30.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ 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

Sales and Other Dispositions of Capital Assets

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

Attachment

OMB No. 1545-0074

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

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

Sequence No. 12A

Social security number or taxpayer identification number

ANURAG NERLAKANTI 326-37-7382 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 Part I 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 F	orm 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	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	02/01/21	07/19/21	72.	133.			-61.
2 Totals. Add the amounts in columns negative amounts). Enter each total 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	72.	133.			-61.

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 (2021) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ANURAG NERLAKANTI

Social security number or taxpayer identification number 326-37-7382

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☐ (E) Long-term transactions	•	. ,	•	•	,	<u>.</u>	9)
(F) Long-term transactions				·			
(a) Description of property	(b) Date acquired	(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	(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	03/06/20	07/19/21	105.	74.			31.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	105.	74.			31.

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.

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.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 13

	A STATE TO A MANAGET								-	, number
	AG NERLAKANTI	Davaliti -	Al. ·	I£		a la contro		26-37		
Part	Income or Loss From Rental Real Estate and F Schedule C. See instructions. If you are an individual, re	-		-						
A Di	-									
	d you make any payments in 2021 that would require you									
	'Yes," did you or will you file required Form(s) 1099?		· · ·				•	<u> </u>	Y	es No
<u>1a_</u> 	Physical address of each property (street, city, state, Z									
B	CHIKKADPALLY HYDERABAD TELANGANA IN	500020	1							
1b	Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only								Use	QJV
Α	3 if you meet the requirements qualified joint venture. See ir	to file as	s a	Α		365		0 🗌		
В	qualified joint venture. See ir	nstruction	is.	В						
С				С						
Туре	of Property:									
1 Sing	gle Family Residence 3 Vacation/Short-Term Renta	al 5 Lan	nd		7 Self-	Rental				
	ti-Family Residence 4 Commercial		/alties		8 Othe	r (describe)			
Incom		S:		Α		E	3			С
_ 3	Rents received	3			600.					
4	Royalties received	4								
Exper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		1,	000.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11			800.					
12	Mortgage interest paid to banks, etc. (see instructions)									
13	Other interest	13								
14	Repairs	14			500.					
15	Supplies	15		2,	000.					
16	Taxes	16								
17	Utilities	17		4,	000.					
18	Depreciation expense or depletion	18								
19	Other (list)			1.0	200					
20	Total expenses. Add lines 5 through 19	20		ΙU,	300.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties).									
	result is a (loss), see instructions to find out if you mus file Form 6198	1		_ 0	700.					
20	Deductible rental real estate loss after limitation, if any	, 21		٦,	, , , ,					
22	on Form 8582 (see instructions)	^{/,} 22	(9 7	00.)	(\/		١
23a	Total of all amounts reported on line 3 for all rental prop		\	7,1	23a	\		00.		
b	Total of all amounts reported on line 4 for all royalty pro			•	23b					
C	Total of all amounts reported on line 12 for all propertie			•	23c					
d	Total of all amounts reported on line 18 for all propertie			•	23d					
e	Total of all amounts reported on line 20 for all propertie			•	23e	1	.0,3	00		
24	Income. Add positive amounts shown on line 21. Do r		de anv lo	osses			, .	24		
25	Losses. Add royalty losses from line 21 and rental real esta		-		nter tota	al losses her	e .	25 (9,700.)
26	Total rental real estate and royalty income or (loss)							1-1		. , /
20	here. If Parts II, III, IV, and line 40 on page 2 do no									
	Schedule 1 (Form 1040), line 5. Otherwise, include this							26		-9,700.