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 securi	ty numl	ber					
DHI	KSHITH REDDY KANDALA	738-35	738-35-1097						
Spouse'	's name	Spouse's so	ouse's social security number						
Part	Tax Return Information — Tax Year Ending December 31, 2021 (Ente	r vear vou a	ire all	thorizin	a)				
	whole dollars only on lines 1 through 5.	i you you c	iic au	tiiOiiZiii	9.)				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1	Adjusted gross income		1	g	95,6	77.			
2	Total tax		2			70.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			21.			
4	Amount you want refunded to you		4			51.			
5	Amount you owe		5						
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of y	our re	turn)				
return (to send for any Agent t paymen authori paymen busines taxes t person	oviledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abortoriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudely in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Usinitiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account income for my federal taxes owed on this return and/or a payment of estimated tax, and the financial institutivation 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 requires a days prior 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 paint of the U.S. Treasury Financial formation number (PIN) below is my signature for the income tax return (original or amended) I amount of the U.S. Treasury Financial or amended) I amount of the U.S. Treasury Financial or amended) I amount of the U.S. Treasury Financial or amended) I amount of the U.S. Treasury Financial or amended) I amount of the U.S. Treasury Financial or amended) I amount of the U.S. Treasury Financial or amended I amount or amended or amended or amount of the U.S. Treasury Financial or amended or	itter, or electrection of the tale. Treasury a icated in the toon to debit the ethe authorize uests must be processing opayment. I fur	onic reransmisond its cax prepartion. The receiff the elast secondary attention.	turn originassion, (b) designate paration so this act or revoke ved no lifectronic controlled.	nator the red Fine softwater counted (care ater to payme ge the counter to payme ge the counter to payme the count	(ERO) eason ancial are for t. This ncel) a han 2 ent of at the			
	nic Funds Withdrawal Consent. yer's PIN: check one box only				٦				
X		my PIN 5	1 (0 9 7		s my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, bu er all zeros	t	3 my			
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.								
Your s	ignature ▶ Date ▶ _								
Spous	se's PIN: check one box only				_				
	I authorize to enter or generate	my PIN			l a	s my			
	ERO firm name		ter five	digits, bu	_	Olliy			
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	S				
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.								
Spous	e's signature ▶ Date ▶								
	Practitioner PIN Method Returns Only—continue below	1							
Part	Certification and Authentication — Practitioner PIN Method Only								
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't en	8 6	1 9	8 9	9			
	that the above numeric entry is my PIN, which is my signature for the electronic individual income t	ax return (orig	inal or	amended					
	zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subn ments of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of I					th the			
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	
DHIKSHI'	TH R	EDDY	KANI	DALA					738-3	35-109	7	
If joint return, s	pouse's	s first name and middle initial	Last na	ame					Spouse's social security number			
Home address	(numbe	er and street). If you have a P.O. box, see	e instructi	ions.				Apt. no.	Preside	ntial Electi	ion Campaigr	
12370 A	LAME:	DA TRACE CIRCLE						1118	•	ere if you		
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete s	spaces below.	Sta			code	to go to	this fund.	ntly, want \$3 Checking a	
Foreign countr	y name			Foreign province/sta	te/coun	ty	Fore	eign postal code	box below will not change your tax or refund. You Spou			
At any time du	ıring 20	021, did you receive, sell, exchange	, or othe	erwise dispose of a	any fina	ancial interes	st in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction		neone can claim: You as a de Spouse itemizes on a separate retu				'	nt					
Age/Blindness	s You	: Were born before January 2, 1	1957 [Are blind S	pouse	e: Was b	oorn be	fore 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):	
If more	(1) F	irst name Last name	number to you			ı	Child tax c	redit	Credit for of	ther dependents		
than four												
dependents, see instruction												
and check	s											
here ▶ 🗌												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1	1	07,000.	
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 Taxable amount .				. 5b			
Standard	6a	Social security benefits	6a		b T	axable amo	unt .		. 6b			
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not re	equired	l, check here		▶ [_ 7		-623.	
 Single or Married filing 	8	Other income from Schedule 1, lir	ne 10						. 8	_	10,700.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total ir	ncome				▶ 9		95,677.	
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		95,677.	
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	tions (from Schedu	ule A)	-	12a	12,55	0.			
Head of	b	Charitable contributions if you take		,	,	ructions)	12b	30	0.			
household, \$18,800	С	Add lines 12a and 12b							. 120	;	12,850.	
If you checked	13	Qualified business income deduct	tion fron	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 lir	ne 11. If zero or les	s, ente	er -0			. 15		82,827.	

	16	Tax (see instructions). Check						16	13,970.
	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	13,970.
	19	Nonrefundable child tax cred	lit or credit for o	ther depender	nts from Schedule	8812		19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less, o	enter -0				22	13,970.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is					. ▶	24	13,970.
	25	Federal income tax withheld	from:			1 1			
	а	Form(s) W-2				25 a 17	7,121.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	17,121.
If you have a	26	2021 estimated tax payment						26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)			No	27a			
attach Sch. Elc.		Check here if you were by January 2, 2004, and you taxpayers who are at least a	r satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for				
	b	Nontaxable combat pay elec							
	С	Prior year (2019) earned inco			0 1 1 1 0010				
	28	Refundable child tax credit or				28			
	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						32	1.0.1
	33	Add lines 25d, 26, and 32. T						33	17,121.
Refund	34	If line 33 is more than line 24						34	3,151.
5	35a	Amount of line 34 you want i				_	► ∐ Savings	35a	3,151.
Direct deposit? See instructions.	▶b	Routing number 1 1 1							
	►d	Account number 4 8 8							
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Amount you owe. Subtract				1 1	. ▶	37	
	38	Estimated tax penalty (see in				38			
Third Party Designee		you want to allow another tructions			n with the IRS?		omplete b	elow.	X No
		signee's		Phone		onal identif			
		me ▶		no. ▶			ber (PIN)		
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com							
пеге	Yo	ur signature		Date Your occupation					t you an Identity
	k.							ection Pl nst.) ▶	N, enter it here
Joint return? See instructions.	On Con	ouse's signature. If a joint return, t	ath must sime	Date	SOFTWARE E		- '		nt your spouse an
Keep a copy for	Sp	ouse's signature. If a joint return, t	our must sign.	Date	Spouse's occupan	OH			ection PIN, enter it here
your records.								nst.) ▶	
	Ph	one no. (201)755-646	3	Email address	DHIKSHITHREDDY	KANDALA@GMAIL.C	OM		
Deid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/17/2022	P02082	2703	Self-employed
Preparer	Fir	m's name ▶ GLOBAL TAX	KES LLC			•			678)965-9522
Use Only	Fire	m's address ▶ 2530 Pebb		n Cummin	g GA 30041			s EIN ▶	•
Go to www.irs.go		n1040 for instructions and the late			BAA	REV 02/05/22 PRO			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

DHIKSHITH REDDY KANDALA

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

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

Your social security number 738-35-1097

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tru Schedule E		5	-10,700.
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) .	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	040, 1040-SR, or	10	10.700

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)

Department of the Treasury

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service (99) Name(s) shown on return Your social security number 738-35-1097 DHIKSHITH REDDY KANDALA 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. 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) 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 3,977. 4,600. -623. 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 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 -623. 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 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 -623. • 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. □ 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 623.) 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.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.
 ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2021 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number

738-35-1097

DHIKSHITH REDDY KANDALA

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 Form 1099-B Adjustment, if any, to gain or loss. 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss). (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of (sales price) and see Column (e) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions with column (a) instructions Robinhood Crypto LLC 01/01/21 05/19/21 3,927. 4,545. -618. 05/06/21 Robinhood Securities LLC 01/01/21 50. 55 -5.

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.

3,977.

-623.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked). ►

4,600.

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 Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

Your social security number

Name(s) shown on return DHIKSHITH REDDY KANDALA 738-35-1097 Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Part I Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. A Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Physical address of each property (street, city, state, ZIP code) Α KOHEDA VILL, RR DISTRICT ABDULLAPURMET MANDAL TELANGANA IN 501511 В C 1b Fair Rental Personal Use Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 600. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 700. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 600. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 3,000. 15 2,500. 15 Supplies . Taxes 16 16 17 17 4,500. 18 Depreciation expense or depletion . . 18 Other (list)
----19 19 Total expenses. Add lines 5 through 19 20 20 11,300. 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 -10,700.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 10,700.) 600 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 11,300. Income. Add positive amounts shown on line 21. Do not include any losses 24 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 10,700. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

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

-10,700.

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Passive Activity Loss Limitations

► See separate instructions.

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

OMB No. 1545-1008

Department of the Treasury Internal Revenue Service (99)

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

Attachment Sequence No. **858** Identifying number

DHIE	KSHITH REDDY KANDALA					738	3-35-	-1097	
Pai									
	Caution: Complete Parts IV an	nd V before comple	eting Part I.						
	al Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive particip	ation, s	see Special			
1a	Activities with net income (enter the a	mount from Part I\	/, column (a)) .	1	a	0.			
b	Activities with net loss (enter the amount	10,700.)							
С	c Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c (
d	Combine lines 1a, 1b, and 1c						1d	-10,700.	
All Ot	her Passive Activities								
2a	Activities with net income (enter the a	mount from Part V	column (a))	2	a				
b	Activities with net loss (enter the amount)			
c	Prior years' unallowed losses (enter the)			
d	Combine lines 2a, 2b, and 2c		. , , ,		- \		2d		
3	Combine lines 1d and 2d. If this line is								
J	all losses are allowed, including any								
	losses on the forms and schedules no						3	-10,700.	
		-							
	If line 3 is a loss and: • Line 1d is a l	_	7040 04 money old	in Dort II o	ad aa ta	lina 10			
	• Line 2d is a i	oss (and line 1d is	zero or more), sk	ip Fait ii ai	ia go ic	o line 10.			
	on: If your filing status is married filingInstead, go to line 10.	separately and yo	ou lived with your	spouse at	any tim	ne during the	year,	do not complete	
Par	t II Special Allowance for Rer	ntal Real Estate	Activities With	Active P	articip	ation			
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruc	tions for a	n examp	ole.			
4	Enter the smaller of the loss on line 1						4	10,700.	
5	Enter \$150,000. If married filing separ	ately, see instructi	ons	5	5 1	150,000.			
6	Enter modified adjusted gross income	e, but not less than	zero. See instruc	tions 6	1	106,377.			
	Note: If line 6 is greater than or equal	to line 5, skip line	s 7 and 8 and ent	er -0-					
	on line 9. Otherwise, go to line 7.								
7	Subtract line 6 from line 5			7		43,623.			
8	Multiply line 7 by 50% (0.50). Do not en			•	•		8	21,812.	
9	Enter the smaller of line 4 or line 8						9	10,700.	
Par		10 1 1							
10	Add the income, if any, on lines 1a an						10	0.	
11	Total losses allowed from all passiv						11	10,700.	
Par	out how to report the losses on your to Complete This Part Before	e Part I I ines 1:		 See instru	tions		11	10,700.	
ı aı	Complete This Fart Belon				tions.				
		Currer	nt year	Prior y	ears	Ove	rall ga	in or loss	
	Name of activity	(a) Net income	(b) Net loss	(c) Unal	owed				
		(line 1a)	(line 1b)	loss (lin		(d) Gair	ו	(e) Loss	
KOH	EDA VILL,RR DISTRICT	0.	10,700.	<u> </u>				10,700.	
	,		2,					2,1201	
Total.	Enter on Part I, lines 1a, 1b, and 1c ▶	0.	10,700.						

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c ▶

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Part V Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			•	
Name of activity	Current year			Prior ye	Overa	Overall gain or loss				
Name of activity		(a) Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)				(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c ▶										
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.				
Name of activity	an to	rm or schedule ad line number be reported on se instructions)	(a) Loss		(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
KOHEDA VILL,RR DISTRICT		E Ln 22	10,700.		1.00000000		10,70	0.	0.	
Total		🕨		10,700.	1.00)	10,70	0.	0.	
Part VII Allocation of Unallowed L	oss	ses. See instr	uction	S.						
Name of activity		Form or sched and line number to be reported (see instruction		ber d on (a) Los		((b) Ratio		(c) Unallowed loss	
Total			. •				1.00			
Part VIII Allowed Losses. See instru	ucti	ons.								
Name of activity		Form or schedu and line number to be reported of (see instruction		(a) l	_OSS	(b) Unallowed loss		(c) Allowed loss	
Total										

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