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.

Social accurity number

Submission Identification Number (SID)

Taxpayer's name

Taxpayer's name	Social security number
VENKATA R AKULA	440-11-0155
Spouse's name	Spouse's social security number
RATNA S AKULA	277-06-3251
Part I Tax Return Information – Tax Year Ending December 31, 2021 (En	nter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 379,724.
2 Total tax	2 71,109.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 72,209.
4 Amount you want refunded to you	. 4 1,100.
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	d keep a copy of your return)
Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amend	ded) I am now authorizing, and to the best of

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I autnorize	GLOBAL	TAXES	ERO firm name	_ to enter or generate my PIN	E	n
$\mathbf{\nabla}$	l authorize	CTODAT		TTO	to outon on monoyoto mu DINI	11	•

1	0	1	5	5	as mv
Ent don	asiny				

3

6

5

1

as mv

2

Enter five digits, but don't enter all zeros

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

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

Your signature 🕨

Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC
ERO firm name

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

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

Spouse's signature 🕨	Date 🕨
Practitioner PIN Me	thod Returns Only—continue below
Part III Certification and Authentication – Pra	ctitioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by yo	ur five-digit self-selected PIN. 5 8 7 2 7 8 0 8 2 7 1 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date ►	
	ERO Must Retain This Form – Don't Submit This Form to the IRS Un		
			F 0070 (D 01 0001)

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

Date

to enter or generate my PIN

1040		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		(99) urn 2	021	OMB No.	1545-00	074 IRS Use Onl	y—Do not v	write or staple	in this space.
Filing Status Check only one box.	lf yo	Single \boxed{X} Married filing jointly $$ u checked the MFS box, enter the n on is a child but not your dependent	ame of y	ed filing sepa your spouse.				ousehold (HOH) QW box, enter tl		, ,	low(er) (QW) he qualifying
Your first name	e and mi	ddle initial	Last na	me					Your se	ocial securi	ty number
VENKATA	R		AKUL	A					440-	11-015	5
If joint return, s	pouse's	first name and middle initial	Last na	me					Spouse	's social se	curity number
RATNA S			AKUL	A					277-	06-325	1
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.				Apt. no.	Preside	ential Electi	on Campaign
1141 LUI	NA RI	C						24312	Check	here if you,	, or your
		ce. If you have a foreign address, also co	mplete s	paces below.	S	tate	Z	IP code			ntly, want \$3
DALLAS						ΓX	-	752349487		o this fund. low will not	Checking a
Foreign countr	y name		F	oreign provinc	ce/state/cou	inty	F	oreign postal code	-	x or refund	0
Ū				0.1				0.	-	You	Spouse
At any time du	uring 20	021, did you receive, sell, exchange,	, or othe	rwise dispos	e of any fir	nancial inter	rest in a	any virtual curre	ency?	Yes	X No
Standard	Som	eone can claim: 🗌 You as a de	pendent	t 🗌 You	r spouse a	s a depend	ent				
Deduction	_	Spouse itemizes on a separate retur	•		•	•					
		·		_	_						
Age/Blindnes			957	Are blind	Spous	se: 🗌 Was	s born	before January		ls b	-
Dependent	•			(2) Social num	,	(3) Relatito y		.,		or (see instru	,
If more	(1) Fi	rst name Last name		nun		10 y	ou	Child tax o	credit	Credit for ot	ther dependents
than four dependents,											
see instruction	s —										
and check											
here 🕨 📃											
Attach	1	Wages, salaries, tips, etc. Attach F	111	N-2.	· · ·		• •		. 1		40,679.
Sch. B if	2a		2a	1 - 0 0	_	Taxable int			. 21	-	101.
required.	<u>3a</u>		3a	17,03		Ordinary di			. 31		17,856.
) 4a		4a			Taxable am			. 41	-	
	5a		5a			Taxable am			. 51	-	
Standard Deduction for —	6a	,	6a			Taxable am		• • • •	. 61	-	
Single or	7	Capital gain or (loss). Attach Scher		required. If	not require	d, check he	ere .	🕨			21,304.
Married filing separately,	8	Other income from Schedule 1, lin							. 8		0.
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		•	otal incom	е			▶ 9		79,940.
 Married filing jointly or 	10	Adjustments to income from Sche	,						. 10		216.
Qualifying	11	Subtract line 10 from line 9. This is	-				· · ·		▶ <u>1</u>	I 3	79,724.
widow(er), \$25,100	12a	Standard deduction or itemized		,	,		12a	25,10			
 Head of household, 	b	Charitable contributions if you take	the stan	idard deducti	on (see ins	structions)	12b	60	0.		
\$18,800	С								. 12	c	25,700.
 If you checked any box under 	13	Qualified business income deduct							. 1:		72.
Standard	14								. 14		25,772.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. If zero	or less, en	ter -0			. 1	5 3.	53,952.

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

Form **1040** (2021)

Form 1040 (2021)								Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 4972	3		16	69 , 540.
	17	Amount from Schedule 2, lin						17	
	18	Add lines 16 and 17						18	69,540.
	19	Nonrefundable child tax cre	dit or credit for o	other depender	nts from Schedul	e8812		19	
	20	Amount from Schedule 3, lin	ne8					20	739.
	21	Add lines 19 and 20						21	739.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	68,801.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	2,308.
	24	Add lines 22 and 23. This is	your total tax				. 🕨	24	71,109.
	25	Federal income tax withheld	l from:			1 1			
	а	Form(s) W-2				25a 72	,121.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	,			25c	88.		
	d	Add lines 25a through 25c						25d	72,209.
If you have a	26	2021 estimated tax payment						26	
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a			
attach Sch. Elc.		Check here if you were I							
		January 2, 2004, and you taxpayers who are at least a							
	b	Nontaxable combat pay elec	-	1 1					
	c	Prior year (2019) earned inco				-			
	28	Refundable child tax credit or		·	Schedule 8812	28			
	29	American opportunity credit				29			
	30	Recovery rebate credit. See				30			
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27a and 28 throug				-	lits 🕨	32	
	33	Add lines 25d, 26, and 32. T						33	72,209.
	34	If line 33 is more than line 24						34	1,100.
Refund	35a					•		35a	1,100.
Direct deposit?	►b	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here . . ▶ Routing number 2 1 1 3 9 1 8 2 5 ▶ c Type: X Checking Savings						,	
See instructions.	►d	Account number 1 1 1					ournige		
	36	Amount of line 34 you want			ed tax 🕨	36			
Amount	37	Amount you owe. Subtract					. 🕨	37	
You Owe	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee		· · · ·				. 🕨 🗌 Yes. Co	omplete l	below.	X No
·		signee's		Phone			onal identi		
	nar	ne 🕨		no. 🕨		num	ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here									, ,
	YO	ur signature		Date	Your occupation				t you an Identity N, enter it here
Joint return?					PRINCIPAL	ARCHITECT		inst.) 🕨	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupa	tion			t your spouse an
Keep a copy for your records.									ction PIN, enter it here
your records.						DEVELOPER	(see	inst.) 🕨	
		one no. (513) 441-687		Email address	VRAKULA@Y		DTIN		
Paid		parer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	RV	SSMANIKUMARAPPANA	RVSSMANIK	UMARAPPAN	JA	03/06/2022	P0209		Self-employed
Use Only		m's name ► GLOBAL TA							646)727-7157
	Firr	m's address ► 2530 Pebb.	le Creek L	n Cummin	g GA 30041		Firm	's EIN ►	
Go to www.irs.go	ov/Form	n1040 for instructions and the late	st information.		BAA	REV 02/17/22 PRO			Form 1040 (2021)

SCHED	ULE 1
(Form 10)40)

Department of the Treasury

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Additional Income and Adjustments to Income

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

2021 Attachment Sequence No. 01

OMB No. 1545-0074

Internal nevenue Service		
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc
VENKATA R & RA	TNA S AKULA	440-11

our social security number

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	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, tro Schedule E		5	
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	040, 1040-SR, or	10	0.

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

Schedule 1 (Form 1040) 2021

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	216.
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b		
С	Nontaxable amount of the value of Olympic and Paralympicmedals and USOC prize money reported on line 81 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations24i		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
z	Other adjustments. List type and amount ► 24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter		
	here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	216.
	BAA REV 02/17/22 PRO	Schedu	le 1 (Form 1040) 2021

Page **2**

SCHE	DULE	2
(Form	1040)	

Department of the Treasury

Internal Revenue Service

Additional Taxes

OMB No. 1545-0074

2021

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

► Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 02 Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 440-11-0155 VENKATA R & RATNA S AKULA Dort L Toy

Ра			
1	Alternative minimum tax. Attach Form 6251	1	
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 .	3	
Pa	rt II Other Taxes		
4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income.Attach Form 4137 5		
6	Uncollected social security and Medicare tax on wages. Attach Form 8919		
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required	8	
9	Household employment taxes. Attach Schedule H	9	
10	D Repayment of first-time homebuyer credit. Attach Form 5405 if required		
11	Additional Medicare Tax, Attach Form 8959	11	016

11	Additional Medicare Tax. Attach Form 8959	11	816.
12	Net investment income tax. Attach Form 8960	12	1,492.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	
	(cc	ontinu	led on page 2

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

Schedule 2 (Form 1040) 2021

Par	t II Other Taxes (continued)			
17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount ▶	17a		
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b		
С	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853 .	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount ►	17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Additional tax from Schedule 8812		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, 18, and 19. These are your total other			
	and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b BAA	REV 02/17/22 PRO	21 Schedu	2,308. ile 2 (Form 1040) 2021

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

21

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	Attach to	Form	1040,	1040-SR,	or	1040-	NR.	
A	 	40.40	e			.1.11.	1 - 1 1	1 . C

Department of the Treasury ► Attach to Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service ► Go to www.irs.gov/Form1040 for instructions and the latest information.				Att	achment guence No. 03		
Name	s) shown on Form 1040, 1040-SR, or 1040-NR			cial se	curity number		
	KATA R & RATNA S AKULA		440-1	1-01	55		
Par	Part I Nonrefundable Credits						
1	Foreign tax credit. Attach Form 1116 if required			1	739.		
2	Credit for child and dependent care expenses from Form 244 Form 2441			2			
3	Education credits from Form 8863, line 19			3			
4	Retirement savings contributions credit. Attach Form 8880			4			
5	Residential energy credits. Attach Form 5695		[5			
6	Other nonrefundable credits:						
а	General business credit. Attach Form 3800	6a					
b	Credit for prior year minimum tax. Attach Form 8801	6b					
С	Adoption credit. Attach Form 8839	6c					
d	Credit for the elderly or disabled. Attach Schedule R	6d					
е	Alternative motor vehicle credit. Attach Form 8910	6e					
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f					
g	Mortgage interest credit. Attach Form 8396	6g					
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h					
i	Qualified electric vehicle credit. Attach Form 8834	6i					
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j					
k	Credit to holders of tax credit bonds. Attach Form 8912	6k					
I.	Amount on Form 8978, line 14. See instructions	61					
Z	Other nonrefundable credits. List type and amount ▶	6z					
7	Total other nonrefundable credits. Add lines 6a through 6z			7			
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 104	0-SR, or 104	0-NR,				
	line 20		•••	8	739.		
			(co	ntinue	ed on page 2)		

For Paperwork Reduction Act Notice, see your tax return instructions. REV 02/17/22 PRO Schedule 3 (Form 1040) 2021 BAA

Schedule 3 (Form 1040) 2021

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
Z	Other payments or refundable credits. List type and amount	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	
	BAA REV	02/17/22 PRO	Schedu	le 3 (Form 1040) 2021

SCHEDULE	B
(Form 1040)	

Department of the Treasury Internal Revenue Service (99)

Interest and Ordinary Dividends

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



Name(s) shown on return Your social security numb						ber
	& RAI	INA S AKULA	44()-11-015	-	
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ►		Am	ount	
(See instructions		DIGITAL FEDERAL CREDIT UNION NATIONAL FINANCIAL SERVICES LLC				99. 1.
and the Instructions for Form 1040, line 2b.)		NATIONAL FINANCIAL SERVICES LLC				1.
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that			1			
form.	2	Add the amounts on line 1	2		1	01.
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815.	3		1	<u>01.</u>
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR,			1	0.1
	Nata	line 2b	4	٨٣	⊥ ount	01.
Part II	5	If line 4 is over \$1,500, you must complete Part III. List name of payer ► NATIONAL FINANCIAL SERVICES LLC		AIII		16.
-	Ŭ	NATIONAL FINANCIAL SERVICES LLC				<u>10.</u> 78.
Ordinary		NATIONAL FINANCIAL SERVICES LLC			12,6	
Dividends		NATIONAL FINANCIAL SERVICES LLC			3,5	
(See instructions and the Instructions for Form 1040, line 3b.)			5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary						
dividends shown on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6		17,8	56.
		If line 6 is over \$1,500, you must complete Part III.			, , ,	
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary divide n account; or (c) received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2021, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locat country? See instructions	ed in	a foreign		×
Caution: If required, failure to file FinCEN		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Fin(and its instructions for filing requirements and exceptions to those requirements.	and CEN I	Financial Form 114		
Form 114 may result in substantial	b	If you are required to file FinCEN Form 114, enter the name of the foreign court financial account is located ►				
penalties. See instructions.	8	During 2021, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions				×

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

20 Attachment Sequence No. 12

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

Department of the Treasury

VENKATA R & RATNA S AKULA

Your social security number

440-11-0155

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? × No **Yes** 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 lines 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 e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part I,	combine the result 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	786,204.	813,082.	19,1	18.	-7,760.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	13,005.	12,272.		45.	778.
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions					(1,617.)
7	7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back					-8,599.

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e)	(g) Adjustmer	nts	(h) Gain or (loss) Subtract column (e)
			Cost (or other basis)	to gain or loss from Form(s) 8949, Part II, line 2, column (g)		from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	75,498.	45,654.			29,844.
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	59.			
14	14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions					()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back					15	29,903.
For F	aperwork Reduction Act Notice, see your tax return instruction				Schedu	ile D (Form 1040) 2021

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	21,304.
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 both gains?		
	 Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21	()
	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.		

REV 02/17/22 PRO

Schedule D (Form 1040) 2021

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Sequence No. 12A

20

Attachment

► 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.

Name(s) shown on re-

Name(s) shown on return	Social security number or taxpayer identification number
VENKATA R & RATNA S AKULA	440-11-0155

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	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 (sales price) al (Mo., day, yr.) (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)	
NATIONAL FINANCIAL SERVICES LLC	Various	04/15/21	784,252.	811,440.	W	19,118.	-8,070.	
NATIONAL FINANCIAL SERVICES LLC	Various	07/22/21	1,952.	1,642.			310.	
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 C	al here and inc is checked), lir	lude on your le 2 (if Box B	786,204.	813,082.		19,118.	-7,760.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form 8949 (2021)		Attachment Sequence No. 12A	Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side VENKATA R & RATNA S AKULA

Social security number or taxpayer identification number 440-11-0155

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

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

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

1 (a) Description of property	(b) Date acquired	(c) 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	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	isposed of (sales price) and see <i>Colur</i> no., day, yr.) (see instructions) in the separation instruction		(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
NATIONAL FINANCIAL SERVICES LLC	Various	06/07/21	22,173.	16,139.			6,034.
Morgan Stanley Domestic Holdings, Inc		12/31/21	7,091.	1,891.			5,200.
NATIONAL FINANCIAL SERVICES LLC	Various	02/19/21	46,234.	27,624.			18,610.
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 8b (if Box D above is checked), line 9 (if Box E above is checked). or line 10 (if Box F above is checked) ►			75 , 498.	45,654.			29,844.

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.

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

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

2021 Attachment Sequence No. 12A

Social security number or taxpayer identification number				
5				
5				

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

1 (a) Description of property			(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a c	f any, to gain or loss. amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) (g) Code(s) from instructions Amount of adjustment			
NATIONAL FINANCIAL SERVICES LLC	Various	04/15/21	13,005.	12,272.	W	45.	778.	
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) ►			13,005.	12,272.		45.	778.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

	1116	Fo	oreign Ta	x Credit				0	MB No. 1545-0121
Form ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■							2021		
	nent of the Treasury	Attach to Forn Go to www.irs.gov/For					T		Attachment Sequence No. 19
Internal Name	Revenue Service (99)						as shown		e 1 of your tax return
	KATA R & RAT	'NA S AKULA			-	11-0155			
		6 for each category of income listed to income listed to in U.S. dollars except where specified			me in the ins	tructions. C	heck onl	y one	box on each Form
a 🗌 :	Section 951A catego	ory income c 🗵 Passive catego	ory income	e Section	901(j) incom	е	g	Lum	p-sum distributions
b	E Foreign branch category income d General category income f Certain income re-sourced by treaty								
h Do	aidant of (name of	foountru) N IIGA							
	sident of (name of : If you paid taxes	to only one foreign country or U.	S. possessior	n. use columr	h A in Part I	and line A	in Part	II. If v	ou paid taxes to
		country or U.S. possession, use							
Par	t I Taxable In	come or Loss From Sources					hecke	d abo	ove)
			Fo	oreign Country	y or U.S. Po				Total
i	Enter the name	e of the foreign country or U.S.			В	C		(Add	cols. A, B, and C.)
	1		Various						
1a		om sources within country shown							
	above and of instructions):	the type checked above (see From 1099s							
		F10m 10995							
			17,8	356.				1a	17,856.
b	Check if line 1a	is compensation for personal							<i>.</i>
		an employee, your total om all sources is \$250,000 or							
		used an alternative basis to							
		urce. See instructions							
		Caution: See instructions.):							
2	1a (attach statem	tely related to the income on line							
3	,	of other deductions not definitely							
-	related:	SEE STMT							
а	Certain itemized	deductions or standard deduction							
	(see instructions)		25,1						
b		s (attach statement)		216.					
с С		3b	25,3						
d e	•	urce income (see instructions)	389,6						
f		line 3e (see instructions))458					
g	-	y line 3f		.59.					
4	Pro rata share of	interest expense (see instructions):							
а	00	interest (use the Worksheet for							
		Interest in the instructions)							
b		pense							
5 6		4a, 4b, and 5	1 . 1	.59.				6	1,159.
7		om line 1a. Enter the result here an					. 🕨	7	16,697.
Par	t II Foreign Ta	xes Paid or Accrued (see in	structions)						· · · · · · · · · · · · · · · · · · ·
	Credit is claimed for taxes		Fo	reign taxes paid	d or accrued				
2	(you must check one)			· ·					
Country	(j) 🗙 Paid (k) 🗌 Accrued	In foreign currency Taxes withheld at source on:	(p) Other	Taxes w	vithheld at sour	In U.S. d	ollars	her	(u) Total foreign
ပို	(I) Date paid	(n) Rents (a) Inter	foreign taxes				foreign	taxes	taxes paid or
	or accrued	(m) Dividends and royalties (o) Inter	est paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	paid accru		accrued (add cols. (q) through (t))
A 1	2/31/2021			739.					739.
В									
С									
8		ugh C, column (u). Enter the tota	I here and on		2		. 🕨	8	739.

For Paperwork Reduction Act Notice, see instructions. BAA

Form **1116** (2021)

	116 (2021)				Page 2
Part	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	739.		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10			
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11	739.	-	
12	Reduction in foreign taxes (see instructions)	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13		-	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	avail	able for credit . . .	14	739.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category	45	16 607		
16	of income checked above Part I. See instructions	15 16	16,697.		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no				
	foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than				
	one Form 1116, you must complete line 20.)	17	16,697.	-	
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	353,952.		
	Caution: If you figured your tax using the lower rates on qualified c				
19	instructions. Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	0.0472
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, li 1040), line 2. Estates and trusts: Enter the amount from Form 104 total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and t from Form 1040-NR, line 16	1, Sc	hedule G, line 1a; or the	20	69,540.
	Caution: If you are completing line 20 for separate category g (lump-s Form 8978, Partner's Additional Reporting Year Tax, see instructions.	um di	istributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	3,282.
22	Increase in limitation (section 960(c))			22	
23	Add lines 21 and 22			23	3,282.
24	Enter the smaller of line 14 or line 23. If this is the only Form 111 through 32 and enter this amount on line 33. Otherwise, complete the				
	instructions		<u> </u>	24	739.
	V Summary of Credits From Separate Parts III (see instruction of Credit for taxes on section 0514 extragery income	UCTIO 25	ns)		
25 26	Credit for taxes on section 951A category income	25		-	
20	Credit for taxes on passive category income	20			
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
31	Credit for taxes on lump-sum distributions	31			
32	Add lines 25 through 31	·		32	
33	Enter the smaller of line 20 or line 32			33	739.
34	Reduction of credit for international boycott operations. See instructio			34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter h				
	1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, I	line 1a	a	35	739.

Form **1116** (2021)

Form	8889
Depar	tment of the Treasury

Internal Revenue Service

VENKATA R AKULA

Health Savings Accounts (HSAs)

OMB No. 1545-0074

Sequence No. 52

Attachment

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

▶ Go to www.irs.gov/Form8889 for instructions and the latest information.

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

Social security number of HSA	
beneficiary. If both spouses	
have HSAs soo instructions	440-11-0155

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.			
	See instructions	Sel	f-only	🔀 Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		216.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3		7,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		7,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		7,200.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		1,000.
8	Add lines 6 and 7	8		8,200.
9 10	Employer contributions made to your HSAs for 2021 . . . 9 Qualified HSA funding distributions 10			
11	Add lines 9 and 10	11		
12	Subtract line 11 from line 8. If zero or less, enter -0	12		8,200.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		216.
_	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.			
Part	a separate Part II for each spouse.	rate I	-ISAs,	complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b		
C A	Subtract line 14b from line 14a	14c		
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16		
	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b		
Part			efore	
	completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.			,
18	Last-month rule	18		
19	Qualified HSA funding distribution	19		
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21		

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

BAA REV 02/17/22 PRO

Form 8995-A 1	L
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Department of the Treasury

Qualified Business Income Deduction

► Attach to your tax return.

▶ Go to www.irs.gov/Form8995A for instructions and the latest information.

OMB No. 1545-2294 2 (0 Attachment

Sequence No. 55A Internal Revenue Service Name(s) shown on return Your taxpayer identification number VENKATA R & RATNA S AKULA 440-11-0155

Note: You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is above \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Trade, Business, or Aggregation Information Part I

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Ch specified		(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
А]			
В]			
С]			
Part	Determine Your Adjusted Qualified Business	Income				
				Α	В	С
	Qualified business income from the trade, business, or aggre See instructions		2			
	Multiply line 2 by 20% (0.20). If your taxable income is \$1 or less (\$164,925 if married filing separately; \$329,800 if filing jointly), skip lines 4 through 12 and enter the amou line 3 on line 13	married nt from	3			
	Allocable share of W-2 wages from the trade, busine aggregation		4			
5	Multiply line 4 by 50% (0.50)		5			
6	Multiply line 4 by 25% (0.25)		6			
	Allocable share of the unadjusted basis immediately					
	acquisition (UBIA) of all qualified property		7			
	Multiply line 7 by 2.5% (0.025)		8			
	Add lines 6 and 8		9			
	Enter the greater of line 5 or line 9		10			
11	W-2 wage and UBIA of qualified property limitation. En smaller of line 3 or line 10		11			
12	Phased-in reduction. Enter the amount from line 26, if any .		12			
	Qualified business income deduction before patron rec		12			
	Enter the greater of line 11 or line 12		13			
	Patron reduction. Enter the amount from Schedule D (Form 8 line 6, if any. See instructions		14			
15	Qualified business income component. Subtract line 14 from	line 13	15			
	Total qualified business income component. Add all a					
	reported on line 15	. 🕨	16			
For Priv	vacy Act and Paperwork Reduction Act Notice, see separate ins	structions	i.	REV 02/17/	22 PRO Fo	orm 8995-A (2021)

Complete Part III only if your taxable income is more than \$164,900 but not \$214,900 (\$164,925 and \$214,925 if married filing separately; \$329,800 and \$429,800 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

				Α		В		С	
17	Enter the amounts from line 3		17						
18	Enter the amounts from line 10		18						
19	Subtract line 18 from line 17		19						
20	Taxable income before qualified business income deduction	20							
21	Threshold. Enter \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly)	21							
22	Subtract line 21 from line 20	22							
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23							
24	Phase-in percentage. Divide line 22 by line 23	24 %							
25	Total phase-in reduction. Multiply line 19 by	line 24	25						
26	Qualified business income after phase-in re 25 from line 17. Enter this amount here ar corresponding trade or business	nd on line 12, for the	26						
Part	IV Determine Your Qualified Busines	ss Income Deductio	n						
27	Total qualified business income compo businesses, or aggregations. Enter the amou								
28	Qualified REIT dividends and publicly trac (loss). See instructions					358.			
29	Qualified REIT dividends and PTP (loss) carry				()			
30	Total qualified REIT dividends and PTP inc								
	less than zero, enter -0					358.			
31	REIT and PTP component. Multiply line 30 b					72.			
32	Qualified business income deduction before					-	32	72.	
33	Taxable income before qualified business inc					024.			
34 35	Net capital gain. See instructions					335.	35	315,689.	
36	Subtract line 34 from line 33. If zero or less, enter -0- .					36	63,138.		
37	Qualified business income deduction before the domestic production activities deduction (DPAD)								
	under section 199A(g). Enter the smaller of li						37	72.	
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter			enter					
	more than line 33 minus line 37				38				
39	Total qualified business income deduction. Add lines 37 and 38				-	39	72.		
40	Total qualified REIT dividends and PTP (lo	, ,						()	
	greater, enter -0						40	(<u> 0.</u>)	
							F	orm 8995-A (2021)	

Form **8959** Department of the Treasury Internal Revenue Service

Name(s) shown on return

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions.
 Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

► Go to *www.irs.gov/Form*8959 for instructions and the latest information.

OMB No. 1545-0074

Your social security number 440-11-0155

VENK	ATA R & RATNA S AKULA	440-	11-01	55
Part	Additional Medicare Tax on Medicare Wages			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5			
2	Unreported tips from Form 4137, line 6		_	
3	Wages from Form 8919, line 6			
4	Add lines 1 through 3	340,679.	·	
5	Enter the following amount for your filing status:			
	Married filing jointly			
	Married filing separately			
	Single, Head of household, or Qualifying widow(er) \$200,000	250,000	-	
6	Subtract line 5 from line 4. If zero or less, enter -0		6	90,679.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). En	er here and go to		
	Part II		7	816.
Part	II Additional Medicare Tax on Self-Employment Income			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you			
	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	3		
9	Enter the following amount for your filing status:			
	Married filing jointly.			
	Married filing separately			
	Single, Head of household, or Qualifying widow(er) \$200,000			
10	Enter the amount from line 4	0		
11	Subtract line 10 from line 9. If zero or less, enter -0		-	
12	Subtract line 11 from line 8. If zero or less, enter -0		12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.00			
10	go to Part III		13	
Part	Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) C	ompensation		
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14			
••	(see instructions)	4		
15	Enter the following amount for your filing status:		-	
	Married filing jointly			
	Married filing separately			
	Single, Head of household, or Qualifying widow(er) \$200,000 1	5		
16	Subtract line 15 from line 14. If zero or less, enter -0-	-	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 1		-	
17	Enter here and go to Part IV	, , ,	17	
Part				
	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line	11 (Form 1040-PR		
10	or 1040-SS filers, see instructions), and go to Part V		18	816.
Part				010.
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form			
	W-2, enter the total of the amounts from box 6	9 5,028		
20	Enter the amount from line 1			
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax			
	withholding on Medicare wages	1 4,940		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additio			
	withholding on Medicare wages	22	88.	
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, bo			
	14 (see instructions)	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with			
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c	(Form 1040-PR or		
	1040-SS filers, see instructions)	<u> </u>	24	88.
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA	REV 02/17/22 PRO		Form 8959 (2021)

Form **8960**

Net Investment Income Tax— Individuals, Estates, and Trusts

OMB No. 1545-2227 20

Attach to your tax return.

Department of the Treasury Attach to your tax return. Internal Revenue Service (99) Go to www.irs.gov/Form8960 for instructions and the latest information.				Attachment Sequence No. 72		
				Varia	_	curity number or EIN
VENKATA R & RATNA S AKULA 440-						•
Part I Investment Income Section 6013(g) election (see instructions)						0100
 Section 6013(h) election (see instructions) Regulations section 1.1411-10(g) election (see instructions) 						
1	Taxable interest (see instructions)					101.
2	Ordinary dividends (see instructions)				1	17,856.
3					3	17,000.
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see					
та	instructions)					
b	Adjustment for net income or loss derived in the ordinary course of a non- section 1411 trade or business (see instructions)	4b				
С	Combine lines 4a and 4b				4c	
5a	5		21,	304.		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)					
с	Adjustment from disposition of partnership interest or S corporation stock (see					
	instructions)	5c				
d	Combine lines 5a through 5c				5d	21,304.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)				6	
7	Other modifications to investment income (see instructions)				7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7.				8	39,261.
Part			ns			
9a	Investment interest expenses (see instructions)	9a				
b	State, local, and foreign income tax (see instructions)	9b				
С	Miscellaneous investment expenses (see instructions)	9c				
d	Add lines 9a, 9b, and 9c				9d	
10	Additional modifications (see instructions)				10	
11	Total deductions and modifications. Add lines 9d and 10				11	
_	Tax Computation					
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, Estates and trusts, complete lines 18a–21. If zero or less, enter -0				12	39,261.
	Individuals:					
13	Modified adjusted gross income (see instructions)	13	379,	724		
14	Threshold based on filing status (see instructions)	14	250,			
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	129,			
16	Enter the smaller of line 12 or line 15				16	39,261.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include					
	on your tax return (see instructions)				17	1,492.
18a	Net investment income (line 12 above)	18a				
b	Deductions for distributions of net investment income and deductions under					
	section 642(c) (see instructions)	18b				
С	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c				
19a	Adjusted gross income (see instructions)	19a				
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b				
С	Subtract line 19b from line 19a. If zero or less, enter -0	19c				
20	Enter the smaller of line 18c or line 19c			20		
21 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and						
	include on your tax return (see instructions)				21	
For Pa	perwork Reduction Act Notice, see your tax return instructions.	RE\	/ 02/17/22 PRO			Form 8960 (2021)

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

BAA

Additional information from your 2021 Federal Tax Return

Form 1116: Foreign Tax Credit Foreign Taxes (A) Line 3

Explanation Statement

Other Deduction Statement

CONVERSION RATE \$1=73.936 RUPEES.