Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2022**

2022 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....▶

397.

REV 03/12/22 PRO

1555

D27-93-2749 SRINADH REDDY CHITUKULA

370 OAKLEY DR APT 711
NASHVILLE NT 37211

Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/15/2022**

2022 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

397.

REV 03/12/22 PRO

1555

D27-93-2749 SRINADH REDDY CHITUKULA

370 OAKLEY DR APT 711
NASHVILLE NT 37211

Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/15/2022**

2022 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

397.

REV 03/12/22 PRO

1555

D27-93-2749 SRINADH REDDY CHITUKULA

370 OAKLEY DR APT 711
NASHVILLE NT 37211

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/17/2023**

2022 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2022 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

397.

REV 03/12/22 PRO

1555

D27-93-2749 SRINADH REDDY CHITUKULA

370 OAKLEY DR APT 711
NASHVILLE NT 37211

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

Subm	ission Identification Number (SID)				
Taxpay	er's name	Social securit	y numbe	er	
SRI	NADH REDDY CHITUKULA	027-93-	-2749		
Spouse	's name	Spouse's soc	ial secur	ity number	
Par	Tax Return Information — Tax Year Ending December 31, 2021 (Enter	year you a	re auth	norizing.)	
	whole dollars only on lines 1 through 5.	, ,			
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	95,	169.
2	Total tax		2	13,	860.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	12,	275.
4	Amount you want refunded to you		4		
5	Amount you owe		5	1,	585.
Part		еер а сор	y of yo	our retur	n)
return to sen- for any Agent payme author payme busine taxes persor Electro	cowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original 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 reject delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the intermediate of the intermediate and institution account indicated in the intermediate and institution in the intermediate and institution institution in the intermediate and institution involved in the intermediate and institution involved in the intermediate interme	tter, or electroction of the tr S. Treasury and the tr sated in the tr n to debit the the authorizatests must be processing of ayment. I furth now authority my PIN The sate of the treatment o	onic return ansmiss and its deax preparently to attion. To be received the elected and and and and are acknown and and are acknown as a second acknown and are acknown as a second acknown and are acknown as a second	urn origination, (b) the esignated for the aration soft of this according to the aration soft of the aration soft of the aration soft of the aration and the aration aratic paymowledge d, if applications are applications.	or (ERO) e reason Financial ware for unt. This cancel) a r than 2 yment of that the
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN methology.				
Your	signature ▶ Date ▶				
Spou	se's PIN: check one box only				
Г	I authorize to enter or generate	nv PIN			as my
_	ERO firm name	_	er five d	igits, but	ao my
	signature on the income tax return (original or amended) I am now authorizing.	do	n't enter	all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 8	7 2 7 Don't enter	8 6 er all zer	1 9 8 os	9
author	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ta ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	ırn in ac	cordance	
FRO'	s signature ► Date ►				
	ERO Must Retain This Form — See Instructions				

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V 2021 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V 2021**

▼ Detach Here and Mail With Your Payment and Return **▼**

Department of the Treasury Internal Revenue Service

(99)

2021

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ► Do not staple this voucher or your payment to Form 1040.
- ► Make your check or money order payable to the 'United States Treasury.'
- ► Write your social security number (SSN) on your check or money order.

of your payment ►
REV 03/12/22 PRO 1555

Enter the amount

1,585.

SRINADH REDDY CHITUKULA

370 OAKLEY DR 711 NASHVILLE NN 37211

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

202	1

OMB No. 1545-0074

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

Filing Status	s 🔀 S	Single Married filing jointly	Marı	ried filing separately	(MFS)	☐ Head of	hous	ehold (HOH)	Qua	lifying wid	ow(er) (QW)
Check only one box.	If yo	u checked the MFS box, enter the roor is a child but not your dependen		f your spouse. If you	checl	ked the HOH o	r QW	/ box, enter th	ne child's	name if th	ne qualifying
Your first name	and mi	iddle initial	Last n	ame					Your so	cial securit	ty number
SRINADH	RED:	DY	CHI	TUKULA					027-	93-274	9
If joint return, s	pouse's	s first name and middle initial	Last r	ame					Spouse	's social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Preside	ential Election	on Campaign
_370 OAK	LEY :	DR						711		here if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete	spaces below.	Sta	te	ZIP	code			ntly, want \$3 Checking a
NASHVIL:	LE				TI	N	37	211	_	low will not	•
Foreign country	y name			Foreign province/state	e/coun	ty	Fore	eign postal code	your ta	x or refund.	Spouse
At any time du	ıring 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	ny fina	ancial interest i	in an	y virtual curre	ncy?	X Yes	☐ No
Standard	_	eone can claim: You as a de	•	•							
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a dual-statu	s alier	1					
Age/Blindness	You:	Were born before January 2, 1	957	Are blind S	oouse	: Was bo	rn be	fore January	2, 1957	☐ Is bl	ind
Dependent				(2) Social securi	ty	(3) Relationsh	nip			r (see instru	
If more	(1) F	irst name Last name		number to you			Child tax cred		redit	Credit for ot	her dependents
than four dependents.											
see instruction	s										
and check											
here									<u> </u>		
Attach	_1_	Wages, salaries, tips, etc. Attach	1` ') W-2					. 1		81 , 957.
Sch. B if	2a	· -	2a			axable interes			. 2t		
required.	3a		3a			Ordinary divide			. 3k		
	4a		4a			axable amoun			. 4k		
	5a	_	5a			axable amoun			. 5k		
Standard Deduction for—	6a	, _	6a			axable amoun	ıt .		. 6t		
Single or	7	Capital gain or (loss). Attach Sche		if required. If not red	quired	, check here		▶ [_ 7		61,972.
Married filing separately,	8	Other income from Schedule 1, lin							. 8		48,760.
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		•	come				9	_	95 , 169.
Married filing jointly or	10	Adjustments to income from Sche							. 10		
Qualifying	11	Subtract line 10 from line 9. This is	•				i		1 1	1 9	95 , 169.
widow(er), \$25,100	12a	Standard deduction or itemized		•	,	12	_	12,55			
Head of household,	b	Charitable contributions if you take	the sta	andard deduction (se	e insti	ructions) 12	b	30	0.		
\$18,800	С	Add lines 12a and 12b							. 12		12 , 850.
If you checked any box under	13	Qualified business income deduct	ion fro	m Form 8995 or For	m 899	95-A			. 13		
Standard	14	Add lines 12c and 13							. 14		12,850.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from I	ne 11. If zero or less	s, ente	er-0			. 15	5 8	82 , 319.

	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	13,860.
	17	Amount from Schedule 2, line 3						17	0.
	18	Add lines 16 and 17						18	13,860.
	19	Nonrefundable child tax credit or credit for o	ther depender	nts from Schedule	e 8812			19	
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0					22	13,860.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is your total tax					. ▶	24	13,860.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	12,	,275.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	12,275.
If you have a	26	2021 estimated tax payments and amount a	pplied from 20	20 return				26	
qualifying child,	27a	Earned income credit (EIC)			27a				
attach Sch. EIC.		Check here if you were born after Janu January 2, 2004, and you satisfy all the							
		taxpayers who are at least age 18, to claim t							
	b	Nontaxable combat pay election	1 1						
	С	Prior year (2019) earned income	. 27c						
	28	Refundable child tax credit or additional child	tax credit from	Schedule 8812	28				
	29	American opportunity credit from Form 8863	s, line 8		29				
	30	Recovery rebate credit. See instructions .			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27a and 28 through 31. These are	your total oth	er payments and	d refun	dable cred	its 🕨	32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				. ▶	33	12,275.
Refund	34	If line 33 is more than line 24, subtract line 24	4 from line 33.	This is the amou	nt you	overpaid		34	
Herana	35a	Amount of line 34 you want refunded to you	ı. If Form 8888	is attached, che	ck here		▶ □	35a	
Direct deposit?	▶b	Routing number X X X X X X X X	XX	▶ c Type:] Checl	king 🗌 S	avings		
See instructions.	►d	Account number X X X X X X X X	X X X X	X X X X	X 2	X			
	36	Amount of line 34 you want applied to your	2022 estimate	ed tax 🕨	36				
Amount	37	Amount you owe. Subtract line 33 from line	24. For details	s on how to pay,	see ins	tructions	. ▶	37	1,585.
You Owe	38	Estimated tax penalty (see instructions) .		🕨	38				
Third Party Designee		you want to allow another person to disc				Yes. Co	mplete h	elow.	X No
Boolgiloo	Des	signee's	Phone				nal identif		
	nar	me ►	no. ►			numb	er (PIN)	>	
Sign		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration of							
Here	You	ur signature	Date	Your occupation					nt you an Identity
Joint return?				SOFTWARE I	ENGI	NEER		inst.) ▶	IN, enter it here
See instructions.	Spo	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat	ion				nt your spouse an
Keep a copy for your records.	,							ity Prote inst.) ▶	ection PIN, enter it here
yea. 1000.ac.		10.10.1.5550500						iist.)	
		pone no. (848) 666-2693 sparer's name Preparer's signat	Email address	SRINADHREDD		MAIL.COI	M PTIN		Chook if:
Paid		1		OIIDMA	Date	10/0000		7702	Check if:
Preparer		SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/18/2022 P02082							Self-employed
Use Only									(678) 965-9522
		m's address ▶ 2530 Pebble Creek L	n Cumming				Firm'	's EIN ▶	
Go to www.irs.go	ov/Forn	n1040 for instructions and the latest information.		BAA	REV 03	3/12/22 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

Department of the Treasury Internal Revenue Service

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

SRINADH REDDY CHITUKULA

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

Attachment Sequence No. 01 Your social security number

027-93-2749

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxe	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	-48,760.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E	•	5	0.
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	040 1040 00	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1	040, 1040-5H, Or	10	40.760

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

Par	Adjustments to Income			
11	Educator expenses		. 11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
13	Health savings account deduction. Attach Form 8889		. 13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	. 14	
15	Deductible part of self-employment tax. Attach Schedule SE		. 15	
16	Self-employed SEP, SIMPLE, and qualified plans		. 16	
17	Self-employed health insurance deduction		. 17	
18	Penalty on early withdrawal of savings		. 18	
19a	Alimony paid		. 19a	
b	Recipient's SSN	>	_	
С	Date of original divorce or separation agreement (see instructions)	·		
20	IRA deduction		. 20	
21	Student loan interest deduction		. 21	
22	Reserved for future use		. 22	
23	Archer MSA deduction		. 23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	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	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		. 25	
26	Add lines 11 through 23 and 25. These are your adjustments t here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury

► Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Attachment Sequence No. **09**

	of proprietor						al security number (SSN)
	NADH REDDY CHITUKUL						7-93-2749
Α	Principal business or profession	n, incl	uding product or service (see	e instru	uctions)	B En	ter code from instructions
	SOFTWARE ENGINEER						▶ 5 1 9 1 0 0
С	Business name. If no separate	busin	ess name, leave blank.			D Em	ployer ID number (EIN) (see instr.)
E	Business address (including s						
	City, town or post office, state				TN 37211		
F	Accounting method: (1)			_			
G					2021? If "No," see instructions for li		
Η.							
					n(s) 1099? See instructions		
Pari		requi	red Form(s) 1099?				L Yes L No
1					this income was reported to you on d		
2						2	
3							
3 4							
5		,				-	
6					refund (see instructions)		
7						7	
Part			for business use of you				
8	Advertising	8	Tor business use or you	18	Office expense (see instructions) .	18	
9	Car and truck expenses (see			19	Pension and profit-sharing plans .	19	
3	instructions)	9	20,983.	20	Rent or lease (see instructions):		
10	Commissions and fees .	10	20,3001	a	Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)	11		b	Other business property		
12	Depletion	12		21	Repairs and maintenance		
13	Depreciation and section 179			22	Supplies (not included in Part III) .		
	expense deduction (not			23	Taxes and licenses		
	included in Part III) (see instructions)	13		24	Travel and meals:		
14	Employee benefit programs			а	Travel	24a	5,047.
	(other than on line 19) .	14		b	Deductible meals (see		
15	Insurance (other than health)	15			instructions)	24b	2,400.
16	Interest (see instructions):			25	Utilities	25	
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26	
b	Other	16b		27a	Other expenses (from line 48)	27a	ı
17	Legal and professional services	17		b	Reserved for future use	27b	
28	Total expenses before expen	ses fo	r business use of home. Add	lines 8	3 through 27a ▶	28	48,760.
29	Tentative profit or (loss). Subtr	ract lin	e 28 from line 7			29	-48,760.
30	Expenses for business use o	f your	home. Do not report these	expe	nses elsewhere. Attach Form 8829		
	unless using the simplified me						
	Simplified method filers only	: Ente	r the total square footage of	(a) you			
	and (b) the part of your home	used f	or business:		Use the Simplified		
			=	er on I	ine 30	30	
31	Net profit or (loss). Subtract I)		
	 If a profit, enter on both Sch checked the box on line 1, see 		, ,		′ ′ ′	31	-48,760.
	 If a loss, you must go to line 		ionong. Lotates and trusts, t	our <u>e</u> i O		31	10,700.
32	If you have a loss, check the b		it describes vour investment	in thic	activity. See instructions		
0 2	-		-		1		
	 If you checked 32a, enter the SE, line 2. (If you checked the 		•	•		322	All investment is at risk.
	Form 1041, line 3.	DOX OI	rimo i, soo ule iire si ilistiud		Lotates and trusts, enter on		Some investment is not
	If you checked 32b, you must	st atta	ch Form 6198. Your loss ma	ıy be liı	mited.		at risk.

BAA

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

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to			
			(planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor of "Yes," attach explanation	ry? 	. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part	Information on Your Vehicle. Complete this part only if you are claiming car or are not required to file Form 4562 for this business. See the instructions for line Form 4562.			
43	When did you place your vehicle in service for business purposes? (month/day/year) ▶ 04/10/201	9		
44	Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your	vehicl	e for:	
а	Business 37,470 b Commuting (see instructions) c C	Other		2 , 579
45	Was your vehicle available for personal use during off-duty hours?		X Yes	☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		Yes	⊠ No
47a	Do you have evidence to support your deduction?		Yes	⊠ No
	If "Yes," is the evidence written?			☐ No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or lin	e 30		
48	Total other expenses. Enter here and on line 27a	48		

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on return Your social security number 027-93-2749 SRINADH REDDY CHITUKULA

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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 5,967,488. 5,992,202. 76,055. 51,341. 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 85,446. 74,815. 10,631. 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 61,972. 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 (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2021 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 61,972. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number
SRINADH REDDY CHITUKULA	027-93-2749
Poters you shock Pox A. P. or C. holow and whether you received any Form(s) 1000 P.	or substitute statement(a) from your broker A substitute

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on 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 (B) Short-term transactions	•	٠,,	•	•		•	e)
(C) Short-term transactions				sis wasii t report	ed to the in	10	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)	Adjustment, it 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.)		in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Securities LLC	06/05/21	12/12/21	5,967,488.	5,992,202.	W	76,055.	51,341.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C)	al here and inc is checked), lir	lude on your ne 2 (if Box B	5,967,488.	5,992,202.		76,055.	51,341.

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.

Sales and Other Dispositions of Capital Assets

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Sequence No. 12A

Name(s) shown on return SRINADH REDDY CHITUKULA Social security number or taxpayer identification number

027-93-2749

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	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.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
Robinhood Crypto LLC	05/06/21	12/12/21	85,446.	74,815.			10,631.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above should be proposed on the should be s	al here and inc is checked), lir	lude on your ne 2 (if Box B	85 446	74 815			10 631

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.

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

SCHEDULE E (Form 1040)

Department of the Treasury

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.

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

OMB No. 1545-0074 Attachment

Internal Revenue Service (99) Sequence No. 13 Name(s) shown on return Your social security number 027-93-2749 SRINADH REDDY CHITUKULA 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 HNO: 2-2-161/20, MADHURA NAGAR COLONY MACHA BOLLARUM, SECUNDERABAD TELANGANA IN 500010 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 Α 0 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 . 3 620. 4 4 Royalties received Expenses: 5 Advertising 5 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 2,500. 8 8 Commissions. 9 Insurance 9 10 Legal and other professional fees . . . 10 11 Management fees 11 1,650. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 Other interest. 14 Repairs. 14 1,950. 1,370. 15 15 Supplies . Taxes 16 16 17 17 1,720. 18 Depreciation expense or depletion . . 18 Other (list) 19 19 Total expenses. Add lines 5 through 19 20 20 9,190. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -8,570.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 0.) 620 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 c Total of all amounts reported on line 12 for all properties 23c d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 9,190. 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 0. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

0.

26

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

Department of the Treasury

Name(s) shown on return

Internal Revenue Service (99)

Passive Activity Loss Limitations

► See separate instructions.

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

Identifying number

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

OMB No. 1545-1008 Attachment Sequence No. **858**

SRIN	NADH REDDY CHITUKULA				027-9	93-2749			
Par	t I 2021 Passive Activity Loss								
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.						
	Il Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, s	ee Special				
1a	Activities with net income (enter the a	mount from Part I\	/, column (a)) .	1a					
b	Activities with net loss (enter the amo)				
С									
d	Combine lines 1a, 1b, and 1c				1	d			
All Ot	her Passive Activities								
2 a	Activities with net income (enter the a	mount from Part V	', column (a)) .	2a	0.				
b	Activities with net loss (enter the amo	unt from Part V, co	olumn (b))	2b (-8,570.)				
С	Prior years' unallowed losses (enter the)				
d	Combine lines 2a, 2b, and 2c				2	d -8,570.			
3	Combine lines 1d and 2d. If this line i								
	all losses are allowed, including any		ed losses entered						
	losses on the forms and schedules no	ormally used .			<u>.</u> 3	-8, 570.			
	If line 3 is a loss and: • Line 1d is a lead	loss, go to Part II. loss (and line 1d is	zero or more), sk	ip Part II and go to	line 10.				
	on: If your filing status is married filing . Instead, go to line 10.	separately and yo	ou lived with your	spouse at any tim	ne during the ye	ar, do not complete			
Par	t II Special Allowance for Rer	ntal Real Estate	Activities With	Active Participa	ation				
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruc	tions for an examp	ole.				
4	Enter the smaller of the loss on line 1	d or the loss on lir	ne 3		4	4			
5	Enter \$150,000. If married filing separ	ately, see instructi	ons	5					
6	Enter modified adjusted gross income	e, but not less than	n zero. See instruc	ctions 6					
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent	ter -0-					
7	Subtract line 6 from line 5			7					
8	Multiply line 7 by 50% (0.50). Do not e			• .		3			
9	Enter the smaller of line 4 or line 8				9	0.			
Part		10 1 1				•			
10	Add the income, if any, on lines 1a an					0.			
11	Total losses allowed from all passiv out how to report the losses on your t					1 0.			
Part					1	<u> </u>			
r ai t	Complete This Fait Belon	, , , , , , , , , , , , , , , , , , ,	, ,	The mondations.					
	Name of activity	Currer	nt year	Prior years	Overall	gain or loss			
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss			

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

Page **2**

e Pa	ert I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.				
Current year				Prior ye	ears	Overall gain or loss			
(a) Net income (line 2a)		(b) (lii	Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
	0.		8,570.					8,570.	
	0.		8 , 570.						
t Is	Shown on F	art II,	Line 9. S	ee instruc	tions.				
and to b	d line number e reported on	(a) Loss	(b) Ra	tio	(c) Special allowance		(d) Subtract column (c) from column (a).	
	•			1.00)				
oss	es. See instr	uction	S.						
	and line nun	nber ed on	(a) L) Loss (b) Ratio		(b) Ratio	(c) Unallowed		
	E Ln 22			8,570.		1.00000000		8,570.	
		. ▶		8,570.		1.00		8,570.	
		odulo							
	and line number to be reported on (see instructions)		(a) Loss		(b) Unallowed loss		(c) Allowed loss		
	E Ln 22	Ln 22		8,570.		8,570.		0.	
-									
		. •		8,570.		8 , 570.		0.	
	t Is Formand to be (see	Currer (a) Net income (line 2a) 0. t Is Shown on F Form or schedule and line number to be reported on (see instructions) Form or schedule and line num to be reported (see instructions) E Ln 2. Ictions. Form or schedule and line num to be reported (see instructions)	Current year (a) Net income (line 2a) 0. t Is Shown on Part II, Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E Ln 22 Ictions. Form or schedule and line number to be reported on (see instructions)	Current year (a) Net income (line 2a) (b) Net loss (line 2b) 0. 8,570. 1 Is Shown on Part II, Line 9. S Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E In 22 Ictions. Form or schedule and line number to be reported on (see instructions) (a) Loss (a) Loss (b) Net loss (line 2b) 8,570.	Current year Prior year (a) Net income (line 2a) (b) Net loss (line 2b) (c) Unalli loss (line 2b) 0. 8,570. 1 Is Shown on Part II, Line 9. See instructions (a) Loss (b) Rational line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) E Ln 22 8,570. 1.00 8,570.	Current year (a) Net income (line 2a) (b) Net loss (line 2b) 0. 8,570. 1.00 8,570. (b) Ratio (c) Unallowed loss (line 2c) 8,570. (d) See instructions. Form or schedule and line number to be reported on (see instructions) Form or schedule and line number to be reported on (see instructions) (a) Loss (b) Ratio (a) Loss (a) Loss (b) Ratio (c) Unallowed loss (line 2c) (b) Ratio	Current year Prior years Overa (a) Net income (line 2a) (b) Net loss (line 2c) (c) Unallowed loss (line 2c) 0. 8,570. 1.00	(a) Net income (line 2a) (line 2b) (c) Unallowed loss (line 2c) (d) Gain 0. 8,570. 1.00 8,570. (c) Unallowed loss (line 2c) (d) Gain 1.00 8,570. (d) Gain 1.00 See instructions. Form or schedule and line number to be reported on (see instructions) E In 22 8,570. 1.00000000 E In 22 8,570. 1.000000000 See instructions. Form or schedule and line number to be reported on (see instructions) E In 22 8,570. 1.000000000 E In 22 8,570. 1.000000000 E In 22 8,570. 1.0000000000000000000000000000000000	

SRINADH REDDY CHITUKULA 027-93-2749 1

Additional information from your 2021 Federal Tax Return

Schedule C (SOFTWARE ENGINEER): Profit or Loss from Business

Ln 24b: 50% limit Itemization Statement

Description	Amount
M&E (240D*\$20P.D) AS PER IRS PUB 1542	4,800.
Total	4,800.

Schedule C (SOFTWARE ENGINEER): Profit or Loss from Business

Line 20b Itemization Statement

Description	Amount
RENT PAID (12M*1250 P.M)	15,000.
Total	15,000.

${\bf Schedule} \; {\bf C} \; ({\bf SOFTWARE} \; {\bf ENGINEER}) \hbox{: } {\bf Profit} \; {\bf or} \; {\bf Loss} \; {\bf from} \; {\bf Business}$

Line 25 Itemization Statement

Description	Amount
PHONE BILLS (12M*80 P.M)	960.
INTERNET BILLS (12M*75 P.M)	900.
Total	1,860.



218453 11555

DR 8453 (10/19/21)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0005
Tax.Colorado.gov
Page 1 of 1

State of Colorado Individual Income Tax Declaration for Electronic Filing Do not mail this form to the IRS or the Colorado Department of Revenue. Retain with your records.

Taxpay	er SSN or ITIN	Spouse SSN or ITIN (If Joint Return)			Submission I	D				
027-	93-2749									
Тахрау	ver Last Name			Taxpayer Fir	st Name			Middl	le Initial	
CHIT	UKULA			SRINADH	REDDY					
Spouse	e Last Name (If Joint Return)			Spouse First	Name (If Joint	t Return)				
Street	Address					Phor	e Number			
370	OAKLEY DR APT 711					(84	8) 666-269	93		
City						State	ZIP			
NASH	VILLE					TN	37211			
		Part I	— Tax Retu	ırn Informa	ition					
1. Tota	al Income, line 9 from your fe	ederal Form 104	10			1 \$		95	5169	
2. Tax	able Income, line 15 on fede	ral Form 1040				2 \$		82	2319	
3. Cold	orado Tax, line 17 on Colora	do Form 104				3 \$			3704	
4. Cold	orado Tax Withheld, line 18 o	on Colorado Fo	rm 104			4 \$			3421	
5. Ref	und, line 36 Colorado Form	104				5 \$				
	,								227	
6. Amo	ount You Owe, line 41 on Co					6 \$				
			— Declarat							
the amount true, co	penalties of perjury, I declare that bunts shown on my 2021 Federal rrect, and complete to the best of required to provide paper copie Colorado Department of Revenue	I/Colorado income my knowledge ar s of this declaration	e tax returns, and belief. I und on, my returns	and that said lerstand that l s, withholding	tax returns, st l (or my Electr statements,	atements, s onic Returr schedules,	schedules and Originator (Ef and attachme	attachme RO) if app	nts are licable)	
Signatu	ıre		Date	Spouse's S	ignature (If Joi	int Return, B	oth Must Sign)	Date		
			-	·		,	<u> </u>			
	F	Part III — Decla	ration of E	 RO/Prepare	er/Transmit	ter				
If the t	ransmitter did not prepare th]						
Colorad amount best of have pr	not the preparer, I declare only the do income tax returns. If I am the do income tax returns and that the shown on said tax returns, and my knowledge and belief. As preprovided the taxpayer with copies d by the Colorado statute of limital achments upon request by the Colorado.	preparer, under poe e information prov I that said tax retu parer, I further dec of all forms and in tions, and to prov	enalties of per vided to me by irns, statemen lare that I have information file ide paper copi	jury I declare the taxpayer ts, schedules to obtained the d. I also agrees of this dec	that I have re- r and the amo , and attachm e taxpayer's sign e to maintain claration, said	viewed the bunts shown eents are tru gnature on this signed returns, wit	above taxpayen in Part I above the correct, and this form at the Form (DR 845)	er's 2021 F we agree we d complete time of fili 53) for the	Federal/ with the e to the ing and e period	
ERO's Signature Prep					Preparer Id	entification Nun	nber or You	ur SSN		
SYAM	PRIYA RAM SAGAR GUPI	'A TALLAM				P02082	703			
						Date (MM/DI	D/YY)			
Check if also Preparer X					03/18/	03/18/22				

DR 0900 (06/03/21

COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0008
Tax. Colorado.gov
Page 1 of 1

(0011)

2021 Individual Income Tax Payment Form (Calendar year—Due April 15, 2022)

Caution!

This form **MUST** accompany your payment if you filed electronically and wish to pay by check. If you paid electronically or do not owe a payment do not file this form.

The Department strongly recommends that you file using Revenue Online (*Colorado.gov/RevenueOnline*) or another electronic filing method and remit your payment electronically or by EFT. Information on EFT can be found at *Tax.Colorado.gov/electronic-funds-transfer*

To pay by mail, make the check or money order payable to the "Colorado Department of Revenue." Be sure to round your payment to the nearest dollar. Clearly write your Social Security number or ITIN and "2021 DR 0104" on the memo line. Be sure to keep a copy of the money order or note the check number with your tax records.

Complete the form below. The amount on the check and the amount entered on the payment form must be the same. This will help maintain accuracy in your tax account. DO NOT submit the DR 0104 if you have already filed electronically.

DO NOT CUT - Return Full Page

DR 0900 (06/03/21)					
Return the DR 0900 with check or money order payable to the "Colo Department of Revenue, Denver, Colorado 80261-0008. These address of Revenue, so a street address is not required. Write your Social Seconomy order. Do not send cash. Enclose, but do not staple or attach, y	ses and zip codes are exclusive to urity number or ITIN and "2021 I	o the Co	olorado Dep	artment	
SSN or ITIN					
027-93-2749					
Your Last Name	First Name		Mi	ddle Initial	
CHITUKULA	SRINADH REDDY				
Spouse's SSN or ITIN					
Spouse's Last Name (if joint)	Spouse's First Name		Mi	ddle Initial	
Address					
370 OAKLEY DR APT 711					
City		State	ZIP Code		
NASHVILLE TN 37211					
Amount of Payment					
The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.					

DO NOT CUT – Return Full Page
IF NO PAYMENT IS DUE, DO NOT FILE THIS FORM





DR 0104 (12/07/21)
COLORADO DEPARTMENT OF REVENUE
Tax. Colorado.gov
Page 1 of 4

Page 1 of 4 (0013)

2021 Colorado Individual Income Tax Return

x Full-		r or Nonresident (or dent combination)				0104	1PN		Mark see i			d on due	date	e –	
Your Last N	Name			Your Fir	st Nam	е								Middle	Initial
CHITUK	KULA			SRIN	ADH I	RED:	DY								
Date of Birt	th (MM/DD/YYYY)	SSN or ITIN		Deceas	ed								•		
04/18/	1993	027-93-2749										refund, yo rtificate w			
Enter th	ne following information	n from vour current	t	State of	f Issue		Last 4	charac	ters of II	D nun	nber	Date of Iss	uance	9	
	cense or state identific		•	СО			7376	6				11/13/	20		
If Joint, Sp	ouse's Last Name			Spouse	's First N	Name	Э							Middle	Initial
Spouse's D	Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITI	IN	Deceas	ed								,		
												refund, yo rtificate w			
Enter th	ne following information	n from vour enque	2'6	State of	f Issue		Last 4	charac	ters of II	D nun	nber	Date of Iss	uance		
current	driver license or state	identification card.													
Mailing Ad	dress										Phor	ne Number			
370 OA	AKLEY DR APT 711										(84	18) 666-2	2693	3	
City					State	ZIP	Code			Fore	eign C	Country (if a	pplica	ıble)	
NASHVI	LLE				TN	37	7211								
	To see if you or men	•										•			
		rado resident and	at leas	st one p	erson	in y	our h	ousel	nold do	es n	ot h	ave healt	th co	verag	е
	AND You give permi	ssion for the Color	ado D	epartm	ent of	Rev	enue	to sh	are the	e info	orma	ition on F	orm		
	DR 0104EE with Connect for Health Colorado (the Colorado Health Benefit Exchange) and the														
Department of Health Care Policy & Financing.															
Round To The Nearest Dollar 1. Enter Federal Taxable Income from your federal income tax form:															
	1040, 1040 SR, or 1040 SP line 15.														
	Include W-2s and 1099s with CO withholding.														
		Additio													
	Addback, enter the s					ede	ral for	m 10							
1040	SR, or 1040 SP sche	edule A, line 5a (se	e instr	ructions	S)				• 2						0 0
3	Qualified Business I	ncome Deduction	Addha	ack (see	≥ instri	uctio	nns)	• 3						0.0	



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	210104 21555		
Nar	ne	SSN or ITIN	
SF	RINADH REDDY CHITUKULA	027-93-2749	
	Other Additions evaluin (e.g. instructions)		
	Other Additions, explain (see instructions) • 4		0 0
⊏xp	ani.		
5	Subtotal, sum of lines 1 through 4 5	82319	0 0
<u>J.</u>	Colorado Subtractions		00
6.	Subtractions from the DR 0104AD Schedule, line 20, you must submit the		
•	DR 0104AD schedule with your return.		0 0
7.	Colorado Taxable Income, subtract line 6 from line 5 • 7	82319	00
	Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-ye	ar DR 0104PN Schedule	'
8.	Colorado Tax from tax table or the DR 0104PN line 36, you must submit the	3704	
	DR 0104PN with your return if applicable. • 8	3/04	0 0
9.	Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the		
	DR 0104AMT with your return. • 9		0 0
<u> 10.</u>	Recapture of prior year credits • 10		0 0
		3704	
	Subtotal, sum of lines 8 through 10		00
12.	Nonrefundable Credits from the DR 0104CR line 43, the sum of lines 12, 13, and 14		
	cannot exceed line 11, you must submit the DR 0104CR with your return. • 12		0 0
13.	Total Nonrefundable Enterprise Zone credits used – as calculated, or from the		
	DR 1366 line 84, the sum of lines 12, 13, and 14 cannot exceed line 11, you must		0 0
4 4	submit the DR 1366 with your return. • 13		00
14.	Strategic Capital Tax Credit from DR 1330, the sum of lines 12, 13, and 14 cannot exceed line 11, your must submit the DR 1330 with your return		0 0
	exceed line 11, you must submit the DR 1330 with your return. • 14		00
15	Net Income Tax, sum of lines 12, 13, and 14. Subtract that sum from line 11.	3704	0 0
	Use Tax reported on the DR 0104US schedule line 7, you must submit the		00
	DR 0104US with your return.		0 0
	Enterior loc with your rotain.		
17.	Net Colorado Tax, sum of lines 15 and 16	3704	0 0
	CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or	2401	
	1099s claiming Colorado withholding with your return. • 18	3421	0 0
	Prior-year Estimated Tax Carryforward • 19		0 0
	Estimated Tax Payments, enter the sum of the quarterly payments remitted for		
	this tax year • 20		0 0
21.	Extension Payment remitted with the DR 0158-I • 21		0 0
22.	Other Prepayments:		
00	O O		0 0
23.	Gross Conservation Easement Credit from the DR 1305G line 33, you must submit		
24	the DR 1305G with your return. • 23		0 0
4 4.	Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617	0	0 0
	with your return. • 24		UU



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Name SSN or ITIN 027-93-2749 SRINADH REDDY CHITUKULA 25. Refundable Credits from the DR 0104CR line 9, you must submit the DR 0104CR 00 • 25 with your retu 3421 **26.** Subtotal, sum of lines 18 through 25 00 26 Modified AGI for TABO Lines 28 through 30 are only used to calculate your TABOR Credit, they do not affect your Colorado tax liability. 27. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, 95169 1040 SR line 11, or 1040 SP line 11 • 27 00 28. Nontaxable Social Security Income 00 28 29. Nontaxable Lump-sum Distribution from pension and profit sharing plans. 29 00 30. Nontaxable interest income from state and local bonds • 30 00 95169 00 **31.** Sum of lines 27 through 30: Modified AGI for TABOR 31 Modified AGI Tiers for State Sales Tax Refund \$44,000 \$44,001 -\$88,001 -\$139,001 -\$193,001 -\$246,001 -If line 31 is: or less \$88,000 \$139,000 \$193,000 \$246,000 or more Single Filers Enter \$37 \$49 \$56 \$68 \$74 \$117 Joint Filers Enter \$74 \$98 \$112 \$136 \$148 \$234 32. State Sales Tax Refund: For full-year Colorado residents, born before 2003, or full-year Colorado residents who are under the age of eighteen but are required 56 to file a return. Use the amount on line 31 and reference the table above. See instructions if you are filing an extension. • 32 00 3477 **33.** Sum of lines 26 and 32 33 00 34 00 34. Overpayment, if line 33 is greater than line 17 then subtract line 17 from line 33 00 **35.** Estimated Tax Credit Carryforward to 2022 first guarter, if any. • 35 If you have an overpayment on line 36 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute. 00 Refund, subtract line 35 from line 34 (see instructions) 36 Checking Savings CollegeInvest 529 Routing Number Type: **Direct Deposit** Account Number For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.



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Name			SSN or ITIN	
SRINADH REDDY CHITUKULA			027-93-2749)
37. Net Tax Due, subtract line 33 from line 17	;	37	,	227 00
38. Delinquent Payment Penalty (see instruction	ns) • S	38		0 0
39. Delinquent Payment Interest (see instruction	,	39		0 0
40. Estimated Tax Penalty, you must submit the (see instructions)	DR 0204 with your return.	10		0 0
41. Amount You Owe, sum of lines 37 through 4	0	и	2:	27.00
The State may convert your check to a one-time electronic banking tra your check will not be returned. If your check is rejected due to insufficie account electronically.	· · · · · · · · · · · · · · · · · · ·		•	
	Third Party Designee			
Do you want to allow another person to discuss this return and any related information with the Colorado Department of Revenue? See the instructions.	• X No • Yes. Com	olete the f	ollowing:	
Designee's Name		Phone N	Number	
•		•		
Sign Below Under penalties of perjury, I declare that to the	he best of my knowledge and belief, this return is	true, correc	t and complete.	
Your Signature			Date (MM/DD/YY)	
Spouse's Signature. If joint return, BOTH must sign.			Date (MM/DD/YY)	
Paid Preparer's Name		Paid Pre	parer's Phone	
GLOBAL TAXES LLC		(678)	965-9522	
Paid Preparer's Address	City	State	ZIP Code	
2530 PEBBLE CREEK LN	CUMMING	GA	30041	

File and pay at: Colorado.gov/RevenueOnline

If you are filing this return with a check or payment, please mail the return to:	If you are filing this return without a check or payment, please mail the return to:					
COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000 6	COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000 5					
These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.						