(Rev. January 2021)

Department of the Treasury

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

OMB No. 1545-0074

Internal R	evenue Service		Go to www.irs.go	//FORMOO79 FOR LINE	e iatest inform	ation.				
Submis	sion Identifica	tion Number (SID)	•							
Taxpayer	's name						Social se	curity num	ber	
RITE	SH KUMAR '	VANGAPALLI					854-	57-791	.4	
Spouse's	name						Spouse's	social sec	urity numb	er
Part l	Tax Ret	turn Information	- Tax Year End	ling December	31, 202	1 (Enter	vear vo	u are au	ıthorizind	g.)
		nly on lines 1 throu		<u> </u>	,		<i>y y</i> -			<i>5</i> /
		•	ly. Leave lines 1, 2,	3, and 5 blank.						
								. 1	11	8,462
2	Total tax							. 2	1	9,368
3	Federal incom	e tax withheld from	Form(s) W-2 and F	orm(s) 1099				. 3		3,501
4	Amount you w	ant refunded to yo	ou					. 4		4,133
5	Amount you o	we						. 5		,
Part I	Taxpay		nd Signature Au						your ret	urn)
to send for any of Agent to payment authorized payment business taxes to persona	my return to the delay in process o initiate an ACH t of my federal t ation is to rema t, I must conta is days prior to t o receive confid	e IRS and to receive fing the return or refull electronic funds with axes owed on this real in full force and et the U.S. Treasury the payment (settlemential information neumber (PIN) below is	rizing. I consent to allofrom the IRS (a) an acount, and (c) the date of hdrawal (direct debit) turn and/or a payment of the control of the c	cknowledgement of of any refund. If app entry to the financi it of estimated tax, e.U.S. Treasury Fina 1-888-353-4537. Provide the financial in equiries and resolve	receipt or reasiblicable, I authoral institution acand the financi ancial Agent to ayment cancel istitutions involve issues relates	son for rejective the U.Secount indication in the lation required to the part of the part	ction of the S. Treasure ated in the to debit the authors or cessing ayment. I	ne transming and its ne tax prethe entry orization. It be receigned for the efforts and the transmission of the efforts and its second of the efforts and it	ission, (b) designated paration so to this according to the total paration in the total paraticle paration in the total paraticle	the reasond Financial oftware for count. The (cancel) of the cayment of that the cayment of that the cayment of that the cayment of that the cayment of the
Taxpay	er's PIN: che	ck one box only								1
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Your sig	gnature ►					Date ► _				
Spouse	e's PIN: checl	k one box only								7
	I authorize				to enter or	generate r	ny PIN			as m
			ERO firm name		`				digits, but	_
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			iture on the income IN and your return							
Spouse	e's signature ▶	•			1	Date ►				
			ctitioner PIN Met			e below				
Part II	Certific	ation and Authe	ntication - Prac	ctitioner PIN M	ethod Only					
ERO's	EFIN/PIN. En	ter your six-digit EF	FIN followed by you	r five-digit self-se	elected PIN.	5 8		7 8 enter all z	eros	
authoriz	ed to file for ta	x year indicated abov	PIN, which is my sigr ve for the taxpayer(s) and Pub. 1345, Hand	indicated above. I	I confirm that I	am submi	c return (c	original or return in	amended)	
ERO's	signature >				ļ	Date ►				
		Е	ERO Must Retair	This Form -	See Instruc	tions				
			bmit This Form				o So			

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

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

Filing Status Check only one box.	If yo	Single Married filing jointly uchecked the MFS box, enter the notes is a child but not your dependent	- ame of	ied filing separatel your spouse. If yo		_		, ,	_			
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securi	y number	
RITESH I	KUMAI	R	VAN	GAPALLI					854-	854-57-7914		
If joint return, s	pouse's	first name and middle initial	Last n	ame					Spouse'	's social se	curity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.				Apt. no.	Preside	ntial Election	on Campaign	
6700 W I	MEMOI	RIAL RD						923	Check here if you, or your			
											ntly, want \$3 Checking a	
OKLAHOM	A CI	ГҮ			OF	K	73	142	0	ow will not	0	
Foreign country	y name			Foreign province/sta	ate/coun	ty	Fore	ign postal code		or refund.		
At any time du	ring 20	021, did you receive, sell, exchange,	or oth	erwise dispose of	any fina	ancial interest i	in an	y virtual currer	ncy?	Yes	⊠ No	
Standard Deduction		eone can claim:				a dependent						
Age/Blindness	You:	Were born before January 2, 1	957	Are blind	Spouse	: Was bo	rn be	fore January 2	., 1957	☐ Is bl	ind	
Dependents				(2) Social secunumber	urity	(3) Relationsh	nip		1	r (see instru	*	
If more	(1) F	irst name Last name		Humber		to you		Child tax cr	eait	Credit for ot	her dependents	
than four dependents.											┽──	
see instruction	s —										┽──	
and check here ▶							-			l	╡──	
	. 1	Wages, salaries, tips, etc. Attach F	orm(a)	\\\ 2					. 1	1 1	<u> </u>	
Attach			2a	vv-2	 L T				2b		0.	
Sch. B if	2 <i>a</i> 3a	. –	2a 3a			axable interes			3b			
required.	4a		4a			Ordinary divide Taxable amoun			4b			
	- 1 -а 5а		т а 5а			axable amoun			5b			
Standard	6a		6a			axable amoun			6b			
Deduction for—	7	Capital gain or (loss). Attach Scheo		if required. If not re					7		-3,000.	
Single or Married filing	8	Other income from Schedule 1, line		ii required. Ii riot i	cquircu	, cricck fiere	•		8		-9,420.	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a		This is your total i	ncome		•		▶ 9		18,462.	
\$12,550 Married filing	10	Adjustments to income from Sche		•			•		10			
jointly or	11	Subtract line 10 from line 9. This is	-		ome		•		11		18,462.	
Qualifying widow(er),	12a	Standard deduction or itemized	•	•		12	a	12,550			10,102.	
\$25,100 Head of	b	Charitable contributions if you take		•	,			300				
household,	C	Add lines 12a and 12b				TEI		500	120		12,850.	
\$18,800 If you checked	13	Qualified business income deducti	on fror	n Form 8995 or Fo	 orm 899	 05-A			13		,	
any box under Standard	14	Add lines 12c and 13							14		12,850.	
Deduction,	15	Taxable income. Subtract line 14	from li	ne 11. If zero or les	ss. ente	er-0			15	_	05,612.	
see instructions.	-				,						,	

	b	Form(s) 1099				 		_			
	a h	Form(s) W-2				25a 2:	3,501.				
	С	Other forms (see instructions				25c					
	d	Add lines 25a through 25c .	•					25d		23,5	01.
.,	26	2021 estimated tax payments						26			
If you have a lqualifying child,	27a	Earned income credit (EIC) .			Nο	27a					
attach Sch. EIC.		Check here if you were b January 2, 2004, and you taxpayers who are at least ag	orn after Janu satisfy all the	ary 1, 1998, e other requi	and before rements for						
	b	Nontaxable combat pay elec-	tion	. 27b							
	С	Prior year (2019) earned inco	me	. 27c							
	28	Refundable child tax credit or	additional child	tax credit from	Schedule 8812	28					
	29	American opportunity credit	from Form 8863	, line 8		29					
	30	Recovery rebate credit. See i	instructions .			30					
	31	Amount from Schedule 3, line	e 15			31					
	32	Add lines 27a and 28 through	n 31. These are	your total oth	er payments and	refundable cre	dits ►	32			
	33	Add lines 25d, 26, and 32. Th	nese are your to	tal payments			▶	33		23,5	01.
	34	If line 33 is more than line 24	, subtract line 24	4 from line 33.	This is the amou	nt you overpaid		34		4,1	33.
Refund	٠.			IC E 0000	No allerda de la	rk here	. ▶ □	35a		4,1	33.
Refund	35a	Amount of line 34 you want r	efunded to you	i. It form 8888	s is attached, ched			JJa			
Direct deposit?		Amount of line 34 you want r Routing number 1 0 3				Checking	Savings	33a			
	35a		0 0 0 6	4 8				33a		·	
Direct deposit?	35a ▶ b	Routing number 1 0 3	0 0 0 6 3 7 5 7	4 8 6 9	► c Type:			334		•	
Direct deposit?	35a ▶ b ▶ d	Account number 3 5 0 Amount of line 34 you want a	0 0 0 6 3 7 5 7 pplied to your 2	4 8 6 9 2022 estimate	► c Type: X	Checking 36		37			
Direct deposit? See instructions.	35a ▶ b ▶ d 36	Routing number 1 0 3 Account number 3 5 0	0 0 0 6 3 7 5 7 spplied to your 3 line 33 from line	4 8 6 9 2022 estimate 24. For details	ed tax >	Checking 36					
Direct deposit? See instructions.	35a ▶ b ▶ d 36 37 38	Account number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 2 line 33 from line structions) . person to disc	4 8 6 9 2022 estimate 24. For details	ed tax . • s on how to pay, s • m with the IRS?	Checking	Savings . ►	37 Delow.	× Ne		
Direct deposit? See instructions. Amount You Owe Third Party	35a ▶ b • d 36 37 38 Doo ins	Routing number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract I Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 2 line 33 from line structions) . person to disc	4 8 6 9 2022 estimate 24. For details	ed tax . • s on how to pay, s • m with the IRS?	Checking	Savings . ► Tomplete keep to the control of the co	37 Delow.	× No		
Direct deposit? See instructions. Amount You Owe Third Party Designee	35a ▶ b ▶ d 36 37 38 Doo ins Des nar	Routing number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 3 line 33 from line structions) person to disco	4 8 6 9 2022 estimate 24. For details	ed tax	Checking	Savings . • • complete & conal identification (PIN)	37 Delow. fication		0	
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign	35a	Routing number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract I Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 3 line 33 from line structions) person to disconnected to the structions of the struction of the stru	4 8 6 9 2022 estimate 24. For details uss this retur Phone no. ►	ed tax	Checking 36 See instructions 38 See Yes. C Personum edules and statemer	Savings . complete k sonal identificator (PIN) ents, and to	37 Delow. fication the bes	st of my	o L	dge and
Direct deposit? See instructions. Amount You Owe Third Party Designee	35a ▶ b ■ d 36 37 38 Do ins Des nar	Account number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract I Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 3 line 33 from line structions) person to disconnected to the structions of the struction of the stru	4 8 6 9 2022 estimate 24. For details Phone no. d this return and of preparer (other	ed tax	Checking 36 See instructions 38 See Yes. C Personum edules and statemer	Savings complete to the conal identification (PIN) pents, and to on of which	37 Delow. fication the best prepare	st of my ler has ar	o knowled	dge and
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Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return?	35a ▶ b ■ d 36 37 38 Doins Des	Account number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract I Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your 3 line 33 from line structions) person to disconnected to the structions of the struction of the stru	4 8 6 9 2022 estimate 24. For details Phone no. d this return and of preparer (other	ed tax	Checking 36 See instructions 38 See Yes. Contact the permitted of the	Savings complete to conal identification of which lift the Proteins.	37 Delow. fication the best prepare IRS see	st of my er has ar nt you ar	o knowled ny know	dge and
Direct deposit? See instructions. Amount You Owe Third Party Designee Sign Here Joint return? See instructions. Keep a copy for	35a	Account number 1 0 3 Account number 3 5 0 Amount of line 34 you want a Amount you owe. Subtract I Estimated tax penalty (see in you want to allow another tructions	0 0 0 6 3 7 5 7 pplied to your stine 33 from line structions) person to discount to the structions of the struction of	4 8 6 9 2022 estimate 24. For details Phone no. d this return and of preparer (other	ed tax	Checking 36 See instructions 38 See Yes. Control Ye	Savings complete becomes identified (PIN) ents, and to con of which (see If the lidentified (see	oelow. fication the best prepare RRS selection Prinst.) RRS selectity Proteins	st of my er has ar nt you ar	knowled hy known I Identiti ti there	dge and rledge. Ly
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Form 1040 (2021)

Page **2**

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

RITESH KUMAR VANGAPALLI

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

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

Your social security number 854-57-7914

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes	S	1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)	•		
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, truschedule E		5	-9,420.
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	I	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10			
	1040-NR, line 8	•	10	_0 120

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

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-officials. Attach Form 2106			
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>	_	
С	Date of original divorce or separation agreement (see instructions)	-		
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
d	Reforestation amortization and expenses	24d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g	Contributions by certain chaplains to section 403(b) plans	24 g		
h	,	24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
j	Housing deduction from Form 2555	24 j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
z	Other adjustments. List type and amount ▶	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments there and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line			

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 854-57-7914 RITESH KUMAR VANGAPALLI 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) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 1,519,232. 1,414,477. -23,120. 81,635. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 12,927.) 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 -36,047. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 17,533. 7,635. 9,898. 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

9,898.

Schedule D (Form 1040) 2021 Page 2

Part III **Summary** -26,149.16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

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

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

Attachment

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

Sequence No. 12A

OMB No. 1545-0074

RITESH	KUMAR	VANGAPALL:

Social security number or taxpayer identification number 854-57-7914

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

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

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

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

✗ (A) Short-term transactions☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•	,		*)
(a) Description of property	(b) Date acquired	(c) Date sold or		(e) Cost or other basis. See the Note below	Adjustment, if If you enter an enter a co	(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	01/01/21	12/31/21	6,470.	6,012.			458.
ROBINHOOD SECURITIES LLC	01/01/21	12/31/21	664,241.	737,084.	W	51,315.	-21,528.
MORGAN STANLEY DOMESTIC HOLDINGS, INC	01/01/21	12/31/21	741,816.	775,136.	W	30,320.	-3,000.
COINBASE	01/01/21	12/31/21	1,950.	1,000.			950.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	1.414.477.	1.519.232.		81.635.	-23.120.

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

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side RITESH KUMAR VANGAPALLI

Social security number or taxpayer identification number 854-57-7914

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on I	Form(s) 1099	-B showing bas	•		•	9)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds	(e) Cost or other basis. See the Note below	Adjustment, it If you enter an enter a co	(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ROBINHOOD SECURITIES LLC	01/01/21	12/31/21	4.	4.			0.
MORGAN STANLEY DOMESTIC HOLDINGS, INC	01/01/20	12/31/21	17,529.	7,631.			9,898.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

above is checked), or line 10 (if Box F above is checked) ▶

9,898.

17,533.

7,635.

SCHEDULE E (Form 1040)

Department of the Treasury

Internal Revenue Service (99)

Supplemental Income and Loss

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

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

Attachment

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

Sequence No. 13

OMB No. 1545-0074

Your social security number Name(s) shown on return 854-57-7914 RITESH KUMAR VANGAPALLI 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 GAYATRI COLONY, KOTHAWADA WARANGAL TELANGANA IN 506002 В C 1b Fair Rental **Personal Use** Type of Property For each rental real estate property listed QJV above, report the number of fair rental and (from list below) **Days Days** personal use days. Check the **QJV** box only if you meet the requirements to file as a Α 365 0 Α qualified joint venture. See instructions. В В С С Type of Property: Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) Income: **Properties:** Α 3 Rents received . 3 600. 4 Royalties received 4 Expenses: Advertising 5 5 6 Auto and travel (see instructions) . . . 6 7 Cleaning and maintenance . . . 7 900. 8 8 Commissions. 9 9 Insurance 10 Legal and other professional fees . . . 10 11 11 1,300. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 Other interest. 13 3,400. 14 Repairs. 14 15 2,120. 15 Supplies . Taxes 16 16 17 2,300. 17 18 Depreciation expense or depletion . . 18 19 19 Total expenses. Add lines 5 through 19 20 20 10,020. 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 -9,420. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,420.) 600 23a Total of all amounts reported on line 3 for all rental properties 23a **b** Total of all amounts reported on line 4 for all royalty properties 23b 23c **c** Total of all amounts reported on line 12 for all properties d Total of all amounts reported on line 18 for all properties 23d 23e Total of all amounts reported on line 20 for all properties 10,020. 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 9,420. 26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

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

-9,420.

26

Passive Activity Loss Limitations

► See separate instructions.

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

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

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

RITE	SH KUMAR VANGAPALLI				854	-57	-7914
Par	2021 Passive Activity Loss	S			•		
	Caution: Complete Parts IV ar	nd V before compl	eting Part I.				
	I Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, c ne amount from Pa	olumn (b)) art IV, column (c))	1b (0. 9,420.))	1d	-9,420.
	her Passive Activities						,
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (2c ()	2d	
3	Combine lines 1d and 2d. If this line is all losses are allowed, including any losses on the forms and schedules no	is zero or more, st prior year unallow	op here and inclu	de this form with y	our return;	3	-9,420.
	If line 3 is a loss and: • Line 1d is a l • Line 2d is a l on: If your filing status is married filing. Instead, go to line 10.	loss (and line 1d is	•			year,	do not complete
Par	Special Allowance for Rer Note: Enter all numbers in Par						
4	Enter the smaller of the loss on line 1	<u> </u>				4	9,420.
5	Enter \$150,000. If married filing separ			5 1	50,000.	-	,,1201
6	Enter modified adjusted gross income	-			27,882.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.				,		
7	Subtract line 6 from line 5			7	22,118.		
8	Multiply line 7 by 50% (0.50). Do not en			• .		8	11,059.
9	Enter the smaller of line 4 or line 8					9	9,420.
Part							
10	Add the income, if any, on lines 1a an					10	0.
11	Total losses allowed from all passiv out how to report the losses on your to	ax return				11	9,420.
Part	IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructions.			
	Name of activity	Currer	nt year	Prior years	Ove	rall ga	ain or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gair	1	(e) Loss
GAY	ATRI COLONY,KOTHAWADA	0.	9,420.				9,420.

9,420.

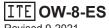
0.

BAA

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

Form 8582 (2021) Page **2**

Part V Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			•
Name of activity		Currer	nt year		Prior ye	ears	Overa	ll ga	ain or loss
Marile of activity	(a	Net income (line 2a)	(b) (li	Net loss ne 2b)	(c) Unall		(d) Gain		(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c ▶									
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.			
Name of activity	ar to	rm or schedule nd line number be reported on ee instructions)	(a) Loss	(b) Ra	tio	(c) Special allowance		(d) Subtract column (c) from column (a).
GAYATRI COLONY, KOTHAWADA		E Ln 22		9,420.	1.0000	0000	9,420.		0.
Total		🕨		9,420.	1.00)	9,42	0.	0.
Part VII Allocation of Unallowed L	oss	ses. See instr	uction	s.					
Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	((b) Ratio	(c) Unallowed loss
Total			. •				1.00		
Part VIII Allowed Losses. See instr	ucti	ons.							
Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_OSS	(b) Ur	nallowed loss	(c) Allowed loss
		I							
Total			. ▶						



Oklahoma Individual Estimated Tax

Revi	Sed 9-2021 Tax Year 2022 Works See the general instructions for								
1	Estimated total income for tax year (less income exempt by state	ute)		118462 00					
2	Estimated deductions (Oklahoma standard or itemized)		6350 00						
3	Exemptions (\$1000 for each exemption)		1000 00						
4	Total deductions and exemptions (add lines 2 and 3)			7350 00					
5	Estimated taxable income (subtract line 4 from line 1)			111112 00					
6	Estimated Oklahoma tax *		5368 00						
7	7 Estimated Oklahoma income tax credits								
8	Estimated Oklahoma income tax liability (subtract line 7 from 6).	5368 00							
9	A. Multiply line 8 by 70%	3758 00							
	B. Enter the tax liability shown on your previous year's tax return								
	C. Enter the smaller of line 9a or 9b.								
10	10 Estimated amount of withholding								
11	Subtract line 10 from line 9c			-712 00					
12	Amount to be paid with each coupon (if paid quarterly, 1/4 of line	e 11)		0 00					
	e following applies to <u>part-year and nonresident</u> taxpayers who	Record of	f Estimated Tax Pa	avments					
	be filing Form 511-NR. Lines 1 through 5 shall be calculated as income were earned in Oklahoma.	Quarter	Date Paid	Amount					
	sing the amount from line 5, calculate the tax; this is the base	Applied from 2021 Tax	Return						
	x and will be prorated for line 6.	1							
	o calculate line 6, first estimate your income from Oklahoma burces. Divide your income from Oklahoma sources by the	3							
-	mount on line 1.								
lir	3) Multiply this percentage by the base tax and enter the result on line 6. This is your estimated Oklahoma tax liability. Complete the remainder of the worksheet as directed.								
The	Oklahoma Tax Commission is not required to give actual notice	of change in any state	tax law.						
	After this estimated tax payment is processed, you			arter.					

Please use the pre-printed coupon to make further tax payments.

● Do not fold, staple, or paper clip
Detach Here and Return Coupon with Payment

Do not tear or cut below line

REV 02/16/22 PRO

ITE OW-8-ES Oklahoma Individual Estimated Tax Coupon

Mailing Address Change (Enter new mailing address below)

RITESH KUMAR VANGAP	ALLI	
Name		
6700 W MEMORIAL RD	, APT.	923
Address		
OKLAHOMA CITY	OK	73142
City	State	ZIP

Taxpayer SSN	854-57-7914					
Tax Year	2022					
Quarter	1					
Due Date	04/18/2022					
	Dollars	Cents				

Amount of Payment:

Please remit only **one** check per coupon.



OKLAHOMA CITY

#1555#

State

Oklahoma Individual Estimated Tax Tax Year 2022 Worksheet for Individuals

See the general instructions for additional filing information.

	Oce the general mendenone to	additional ming informat		
1	Estimated total income for tax year (less income exempt by stat	ute)		00
2	Estimated deductions (Oklahoma standard or itemized)		00	
3	Exemptions (\$1000 for each exemption)		00	
4	Total deductions and exemptions (add lines 2 and 3)			00
5	Estimated taxable income (subtract line 4 from line 1)			00
6	Estimated Oklahoma tax *			00
7	Estimated Oklahoma income tax credits			00
8	Estimated Oklahoma income tax liability (subtract line 7 from 6)			00
9	A. Multiply line 8 by 70%		00	
	B. Enter the tax liability shown on your previous year's tax retur	n	00	
	C. Enter the smaller of line 9a or 9b			00
10	Estimated amount of withholding			00
11	Subtract line 10 from line 9c			00
_	(Note: If zero or less, or if line 8 minus line 10 is less than \$500, stop here. Yo	·	., , ,	
12	Amount to be paid with each coupon (if paid quarterly, 1/4 of line	e 11)		00
will	ne following applies to <u>part-year and nonresident</u> taxpayers who be filing Form 511-NR. Lines 1 through 5 shall be calculated as I income were earned in Oklahoma.	Record of E	Stimated Tax P	Payments Amount
	sing the amount from line 5, calculate the tax; this is the base	Applied from 2021 Tax Re	eturn	
	ax and will be prorated for line 6.	1		
S	o calculate line 6, first estimate your income from Oklahoma ources. Divide your income from Oklahoma sources by the mount on line 1.	3		
	fultiply this percentage by the base tax and enter the result on	4		
liı	ne 6. This is your estimated Oklahoma tax liability. Complete ne remainder of the worksheet as directed.		Total	
The	e Oklahoma Tax Commission is not required to give actual notice	of change in any state tax	k law.	
	After this estimated tax payment is processed, yo Please use the pre-printed coupo			ıarter.
• 0	oo not fold, staple, or paper clip Detach Here and Return	Coupon with Pay	rment ● Do no	t tear or cut below line
	REV 02/16/22 PRO ITE OW-8-ES Oklahoma Individual Estimated	d Tax Coupon		
	Mailing Address Change (Enter new mailing address below)			
		Taxpayer SSN	854-57-791	L4
RΤ	TESH KUMAR VANGAPALLI			
Nai		Tax Year	2022	
	00 W MEMORIAL RD , APT. 923 dress	Quarter	2	

Mail this coupon, along with payment, to:

06/15/2022

Please remit only one check per coupon.

225

- - Cents - -

Dollars - -

Due Date

Amount of Payment:



Oklahoma Individual Estimated Tax Tax Year 2022 Worksheet for Individuals

See the general instructions for additional filing information

	See the general instructions to	i additional lilling informa	ition.	
1	Estimated total income for tax year (less income exempt by stat	tute)		00
2	Estimated deductions (Oklahoma standard or itemized)		00	
3	Exemptions (\$1000 for each exemption)		00	
4	Total deductions and exemptions (add lines 2 and 3)			00
5	Estimated taxable income (subtract line 4 from line 1)			00
6	Estimated Oklahoma tax *			00
7	Estimated Oklahoma income tax credits			00
8	Estimated Oklahoma income tax liability (subtract line 7 from 6)			00
9	A. Multiply line 8 by 70%		00	
	B. Enter the tax liability shown on your previous year's tax return	n	00	
	C. Enter the smaller of line 9a or 9b			00
10	Estimated amount of withholding			00
11	Subtract line 10 from line 9c(Note: If zero or less, or if line 8 minus line 10 is less than \$500, stop here. Yo			00
12	Amount to be paid with each coupon (if paid quarterly, 1/4 of line	e 11)		00
will	ne following applies to <u>part-year and nonresident</u> taxpayers who be filing Form 511-NR. Lines 1 through 5 shall be calculated as I income were earned in Oklahoma.	Record of I	Estimated Tax Pa	yments Amount
	Using the amount from line 5, calculate the tax; this is the base ax and will be prorated for line 6.	Applied from 2021 Tax R	eturn	
	o calculate line 6, first estimate your income from Oklahoma	2		
	ources. Divide your income from Oklahoma sources by the mount on line 1.	3		
	Multiply this percentage by the base tax and enter the result on	4		
	ne 6. This is your estimated Oklahoma tax liability. Complete ne remainder of the worksheet as directed.		Total	
The	e Oklahoma Tax Commission is not required to give actual notice	of change in any state ta	x law.	
	After this estimated tax payment is processed, yo Please use the pre-printed coupo			rter.
• [Do not fold, staple, or paper clip Detach Here and Return	Coupon with Pa	yment • Do not	ear or cut below line
	REV 02/16/22 PRO ITE OW-8-ES Oklahoma Individual Estimated Mailing Address Change	d Tax Coupon		
	(Enter new mailing address below)			
		Taxpayer SSN	854-57-7914	l .
RI	TESH KUMAR VANGAPALLI			
	me	Tax Year	2022	
67	00 W MEMORIAL RD , APT. 923	Quarter	3	

Amount of Payment: 225

Please remit only one check per coupon.

09/15/2022

- - Cents - -

---- Dollars ---

73142

State

OKLAHOMA CITY

Address

Due Date



Address

OKLAHOMA CITY

#1555#

6700 W MEMORIAL RD , APT. 923

State

Oklahoma Individual Estimated Tax Tax Year 2022 Worksheet for Individuals

	See the general instructions for	r additional fili	ng informati	on.		
1	Estimated total income for tax year (less income exempt by state	ute)				00
2	Estimated deductions (Oklahoma standard or itemized)					
3	3 Exemptions (\$1000 for each exemption)					
4 Total deductions and exemptions (add lines 2 and 3)						00
5	Estimated taxable income (subtract line 4 from line 1)					00
6 Estimated Oklahoma tax *						00
7	Estimated Oklahoma income tax credits					00
8	Estimated Oklahoma income tax liability (subtract line 7 from 6).					00
9	A. Multiply line 8 by 70%			00		
	B. Enter the tax liability shown on your previous year's tax return	າ		00		
	C. Enter the smaller of line 9a or 9b.					00
10	Estimated amount of withholding					00
11	Subtract line 10 from line 9c					00
Amount to be paid with each coupon (if paid quarterly, 1/4 of line 11)						00
will if al	be following applies to <u>part-year and nonresident</u> taxpayers who be filing Form 511-NR. Lines 1 through 5 shall be calculated as I income were earned in Oklahoma. Sing the amount from line 5, calculate the tax; this is the base	Quarte	er	Stimated Tax P Date Paid	Amount Amount	
	x and will be prorated for line 6.	1				_
S	o calculate line 6, first estimate your income from Oklahoma ources. Divide your income from Oklahoma sources by the mount on line 1.	3				
	lultiply this percentage by the base tax and enter the result on	4				\dashv
	ne 6. This is your estimated Oklahoma tax liability. Complete the remainder of the worksheet as directed.			Total		
The	Oklahoma Tax Commission is not required to give actual notice	of change in a	ny state tax	law.		
	After this estimated tax payment is processed, you Please use the pre-printed coupo				arter.	
• D	o not fold, staple, or paper clip Detach Here and Return	Coupon	with Pay	ment • Do no	t tear or cut below li	ne
	REV 02/16/22 PRO ITE OW-8-ES Oklahoma Individual Estimated Mailing Address Change (Enter new mailing address below)	d Tax Coup	oon		回義(日 (355/H)) (日報公):	
		Tax	payer SSN	854-57-791	_4	
RI'	TESH KUMAR VANGAPALLI					
Nar		Tax	Year	2022		

Mail this coupon, along with payment, to:

Quarter

Due Date

Amount of Payment:

01/17/2023

Please remit only one check per coupon.

225

- - Cents - -

- - - - - - Dollars - -



Oklahoma Individual Income Tax Declaration for Electronic Filing

NOTE: Do not mail Oklahoma Tax Return - Form 511 or Form 511-NR.

See instructions on Page 2 to determine if you are required to send Form 511-EF to the OTC

2021 Form 511-EF

Your first name and middle initial	Last name	Your social	010.						
RITESH KUMAR VAN	NGAPALLI	security number	8	5 4	5	7	7 9	1	4
If a joint return, spouse's first name and middle ini		Spouse's social security number							
Mailing address (number and street, including apa	artment number, rural route or PO Bo	(x)							
6700 W MEMORIAL RD	923					FII	ling st	atus	1
City, State, ZIP	ov. 50140		Total	numbe	r of	exem	ptions	;	1
OKLAHOMA CITY	OK 73142								
Part One - Tax Return Inform	•	only)							
Oklahoma Adjusted Gross Income (511 Adjusted Gross Income: All Sources	· · · · · · · · · · · · · · · · · · ·		1				11	.846	2 00
2 Oklahoma Income Tax and Use Tax (51	1, Line 21 or 511-NR, Line 25)		2						8 00
3 Oklahoma Income Tax Payments and C	Credits (511, Line 32 or 511-NR, I	ine 33)	3					447	
4 Refund (511, Line 37 or 511-NR, Line 3	8)		4						00 0
Balance Due (511, Line 42 or 511-NR, L	•								8 00
For a balance due return with an electron balance due return with a non-electronic Internal Revenue Code (IRC) of the IRS p timely. If the due date falls on a weekend	payment, enclose a payment with rovides for a later due date, your p	the 511-V and submit of payment may be made b	n or be y the la	fore the ater due	due date	date o	of April vill be c	15th.	If the
Part Two - Declaration of Tax	payer								
6a I consent that my refund be dire	ctly deposited as designated in the ess an irrevocable appointment of the						eturn.		
entry to the financial institution a and/or a payment of estimated to	Treasury and its designated Financia account indicated in the tax preparati ax. I also authorize the financial insti	on software for payment of tutions involved in the pro	of my C ocessin	Oklahoma g of the	a taxe	es owe	d on thi	is retu	ırn
receive confidential information of the line of the li					y payr	ment o	f my ta:	x liabil	lity, I
Under penalties of perjury, I declare I have comporting originator (ERO), and the amounts described in tax return. To the best of my knowledge and belipanying schedules and statements, be sent to the	pared the information contained on r Part One above, agree with the am ief, my return is true, correct, and co	ounts shown on the corre	spondi	ng lines	of my	2021	Oklaho	ma in	come
In addition, by using a computer system and sof Commission of all information pertaining to my u							Oklahoi	ma Ta	ıx
Sign Here:									
Your Signature	Date Spou	se's Signature (If joint r	eturn, l	both mu	ist siç	gn)	Date	ə	
Part Three - Declaration of E	lectronic Return Orio	inator (FRO) a	nd F	==== Paid∃	Pre	nar	====		
I declare I have reviewed the above taxpayer's re collectors are not responsible for reviewing the ta obtained the taxpayer's signature on Form 511-El followed all other requirements described in Pub. Preparer, under penalties of perjury I declare I ha knowledge and belief, they are true, correct, and	turn and the entries on Form 511-EF xpayer's return; however, they must of F and I have provided the taxpayer w 1345, Handbook for Electronic Filers ve examined the above taxpayer's re	are complete and correct insure Form 511-EF accur th a copy of all forms and of Individual Income Tax Fourn and accompanying so	to the bately reinformant the contract the c	est of my eflects the ation to b (Tax Yea s and sta	y knove e data be filed ar 202 ateme	wledge a on the d with the 21). If I ents, an	e. (ERO e return the OTC am also nd to the	.) I hav C, and o a Pa e best	ve have aid
ERO Use Only	02	/22/2022							
ERO or Paid Preparer's Signature	Dat	e PTI	N						
Paid Preparer Use Only	02	/22/2022 P02	0827	03					
Paid Preparer Signature	Dat	e PTI				_		_	
Firm name (or yours if self-employed), SYAM P	RIYA RAM SAGAR GUPTA :	CALLAM							
address and ZIP 2530 P	EBBLE CREEK LN CUMMING	G GA 30041							
Phone nu	mber (<u>678</u>) <u>965-9522</u>								

State of Oklahoma **Individual Income Tax Payment Voucher** Instructions

What is Form 511-V and Do You Have to Use It?

If you have already filed your return, either electronically or by paper, send this voucher with your check or money order for any balance due on your 2021 Form 511 or 511NR. Using Form 511-V allows us to process your payment more accurately and efficiently. We strongly encourage you to use Form 511-V, but there is no penalty if you do not.

Due Date

Generally, your Oklahoma income tax is due April 15th. However:

- If you electronically file your return and pay electronically, your due date is extended until April 20th. To make a payment online, visit **oktap.tax.ok.gov** and click on the "Make a Payment" link.
- If the Internal Revenue Code (IRC) of the IRS provides for a later due date, your payment may be made by the later due date and will be considered timely.
- If the due date falls on a weekend or legal holiday when the Oklahoma Tax Commission offices are closed, your payment is due the next business day.

How To Prepare Your Payment

- · Remit only one check or money order per voucher.
- Make your check or money order payable to the "Oklahoma Tax Commission". Do not send cash.
- Make sure your name and address appear on your check or money order.

How To Send In Your 2021 Tax Payment, and Form 511-V

- Cut Form 511-V along the dotted line and submit the bottom portion of the Individual Income Tax Payment Voucher.
- Do not staple or otherwise attach your payment to Form 511-V. Instead, just put them loose in the envelope.
- Do not include a copy of your income tax return. To use this form, your income tax return (either paper or electronic) should already be filed with the Oklahoma Tax Commission.
- Mail your 2021 tax payment and Form 511-V to:

Oklahoma Tax Commission PO Box 26890 Oklahoma City, OK 73126-0890

Do not fold, staple, or paper clip
 Detach Here and Return Voucher with Payment

Do not tear or cut below line

#1555#

ITI-I

State of Oklahoma **Individual Income Tax Payment Voucher**

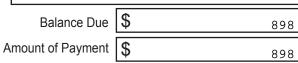


Reporting Period Due Date (Penalty and interest may be assessed if payment is not sent by the due date) 04-15-2022 01-01-2021 to 12-31-2021

Your first name, middle initial and last name RITESH KUMAR VANGAPALLI If joint return, spouse's first name, middle initial and last name Mailing address (number and street, including apartment number, rural route or PO Box) 6700 W MEMORIAL RD APT 923 City, State, ZIP OKLAHOMA CITY OK 73142

Your Social Security Number (if filing a joint return, enter the SSN shown first on your return) 854-57-7914 Spouse's Social Security Number (if filing a joint return) Daytime phone number (optional) Do **not** enclose a copy of your Oklahoma tax return.

Oklahoma Tax Commission PO Box 26890 Oklahoma City, OK 73126-0890



FAILURE TO SUBMIT THIS PAGE WILL DELAY PROCESSING OF YOUR RETURN











Oklahoma Resident Income Tax Return

Your	Social Security Number	(joint return		occurry in					AME	NDED RETU	RN!	
Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in this box if this taxpayer is deceased Place an 'X' in th						/er	this i	e an 'X' in this k s an amended dule 511-l.				
Nan	ne and Address - Please Print or Type											
Your f	irst name Middle initial Last name		I	f a joint return,	spouse's fi	rst name		Middle initi	al Last n	ame		
RIT	TESH KUMAR VANGAPAI	LLI										
Mailin	g address (number and street, including apartment number, rural route of	or PO Box)	City				State	ZIP or Pos	stal Code	Country		
670	00 W MEMORIAL RD , APT. 923		OKLA	HOMA CI	TTY		OK	73142	2			
	1 X Single			* Note: If	claiming S	pecial E	xempt	ion, see ins	struction	s on page 9 o	511 P	acket.
	- Cingle					Regu	ılar	* Special	Blind			
	2 Married filing joint return (even if only one h	nad incom	e)	SU	Yoursel		_ †				-_(a)
tatus	3 Married filing separate (If spouse is also filing, list name and SSN i	:	_	Exemptions	Spouse	C	+	+		0		0)
Filing Status	Name SSN	n the boxe	35	em		Nu	umbe	r of depe	ndents			C)
ĪĒ				Ш	Add the	Totals f		oxes (a), (b				
	4 Head of household with qualifying person								nt on an	other return,	enter	"0" in the
				lotal box	for your	regular	exemp	tion.				
	Qualifying widow(er) with dependent childPlease list the year spouse died in box at right	t:		Age 65	or Olde	r? (Ple	ase see	instructions)		Yourself		Spouse
PA	RT ONE: TO ARRIVE AT OKLAHOMA AL	DJUSTE	D GR	OSS INC	OME				Ro	ound to Near	est W	nole Dollar
1	Federal adjusted gross income (from Federal 1040 c	or 1040-SF	₹)						1		118	462.00
2	Oklahoma Subtractions (provide Schedule 511-A)								2			.00
3	Line 1 minus line 2								3		118	462.00
4	Out-of-state income, except wages. Describe (4a) (Provide Federal schedule with detailed description; see in	nstructions)						4b			.00
_	Line 3 minus line 4b	·	,						5		110	462.00
5									5		110	1402.00
6	Oklahoma Additions (provide Schedule 511-B)								6			.00
7	Oklahoma adjusted gross income (line 5 plus line (If line 7 is different than line 1, provide a copy	6) of your F	ederal ı	return.)					7		118	462.00
PA	RT TWO: OKLAHOMA TAXABLE INCOM	IE, TAX	AND (CREDITS	3							
8	Oklahoma Adjustments (provide Schedule 511-C)								8			.00
9	Oklahoma income after adjustments (line 7 minus lin	ne 8)							9		118	462.00
	AND READ: If line 4b is zero, complete lines 10-11. If line 4b is	more than	7010 C00	Schodulo 51	I1_E and d	o not cor	mnlete	lines 10-11				

Snouse's Social Security Number

Name(s) shown





Your Social

2021 Form 511 - Resident Income Tax Return - Page 2
The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.

on F	orm 511: RITESH KUMAR VANGAPALLI	Number: 854-57-7914		
PA	RT TWO: OKLAHOMA TAXABLE INCOME, TAX AND CREDITS contin			
10	Oklahoma itemized deductions (from Schedule 511-D, line 11) or Oklahoma standard deductions (Single or Married Filing Separate: \$6,350 • Married Filing Joint or Qualifying Widov Head of Household: \$9,350)	00 •	10 6350.00	
11	Exemptions: Enter the total number of exemptions claimed on page 1	X \$1,000		11 1000.00
12	Total deductions and exemptions (add lines 10 and 11 or amount from Sch. 511-E, line 5)			7350 .00
13	Oklahoma Taxable Income (line 9 minus line 12)			13 111112 .00
14	(a) Oklahoma Income Tax from Tax Table (see pages 28-39 of instructions) or if using Farm Income Averaging, enter tax from Form 573, line 22 and enter a "1" in box on line 14	5:	368.00	14a
	(b) If paying the Health Savings Account additional 10% tax, add additional tax here and enter a "2" in box on line 14. If recapturing the Oklahoma Affordable Housing Tax Credit, add recaptured credit here and enter a "3" in box on line 14. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K), add the installment payment here and enter a "4" in the box on line 14.		.00	14b
	Oklahoma Income Tax (line 14a plus line 14b)			14 5368.00
STOP	AND READ: If line 7 is equal to or larger than line 1, complete lines 15 and 16. If line 7 is smaller than line 1, complete S		and 511-G.	
15	Oklahoma child care/child tax credit (see instructions)			.00
16	Oklahoma earned income credit (see instructions)			.00
17	Credit for taxes paid to another state (provide Form 511TX)		.00	
18	Form 511CR - Other Credits Form. List 511CR line number claimed here:	.00		
19	Income Tax (line 14 minus lines 15-18) Do not enter less than zero DO NOT PAY THIS AMOUNT. PAYMENT IS FIGURED ON LINE 42.		19 5368.00	
DA	DT TUDES, TAY CREDITS AND DAYMENTS			1
PA	RT THREE: TAX, CREDITS AND PAYMENTS			
20	Use tax due on Internet, mail order, or other out-of-state purchases			.00
21	Balance (add lines 19 and 20)			21 5368.00
22	Oklahoma withholding (provide all W-2s, 1099s or other withholding statements) 22	4	170.00	
23	2021 estimated tax payments (qualified farmer)		.00	
24	2021 payment with extension		.00	
25	Low Income Property Tax Credit (provide Form 538-H)		.00	
26	Sales Tax Relief Credit (provide Form 538-S)		.00	
27	Natural Disaster Tax Credit (provide Form 576)		.00	
28	Credits from Form		.00	
29	Amount paid with original return plus additional paid after it was filed (amended return only)		.00	

2021 Form 511 - Resident Income Tax Return - Page 3



The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.

Name(s) shown on Form 511: RITESH KUMAR VANG	APALLI		Your Social Security Nu	mber: 854-57-7914
PART THREE: TAX, CREDITS AND PART				
30 Payments and credits (add lines 22-29	from page 2)		3	4470.00
31 Overpayment, if any, as shown on origin				4170.00
as previously adjusted by Oklahoma (al			3	.00
32 Total payments and credits (line 30 m	inus 31)		3	4470.00
PART FOUR: REFUND				
33 If line 32 is more than line 21, subtract I	ine 21 from line 32. This is your ov	erpayment	3	0.00
Amount of line 33 to be applied to 2022 e (For further information regarding estimat	(0	t.) 34	.00	
Schedule 511-H provides you with the op organizations. Please place the line num more than one organization, put a "99" in	portunity to make a financial gift frober of the organization from Schedu	om your refund to a varieule 511-H in the box belo		
Donations from your refund (total from	Schedule 511-H)	35	.00	
Total deductions from refund (add lines	34 and 35)		3	.00
Amount to be refunded to you (line 33 r	ninus line 36)		3	0.00
are correct. If your direct deposit fails to process or you do not choose direct deposit, you will receive a <u>debit card</u> . See the 511 Packet for direct deposit and debit card information.	checking account Routi Numb savings account Acco	unt		
PART FIVE: AMOUNT YOU OWE				
If line 21 is more than line 32, subtract I	ine 32 from line 21. This is your ta	x due	3	898.00
39 Donation: Public School Classroom Sup	oport Fund (original return only).		3	.00
Underpayment of estimated tax interest (If you have an underpayment of estimated)				.00.
41 For delinquent payment add penalty of	5%\$	i		
plus interest of 1.25% per month	\$	i	4	.00
Total tax, donation, penalty and interest	(add lines 38-41)		4	2 898.00
Under penalty of perjury, I declare the information contained attachments and schedules, is true and correct to the best o		in this box if the Oklahoma Tax s s this return with your tax prepar		
Taxpayer's signature Date	Spouse's signature	Date	Paid Preparer's signatu	
Taxpayer's	Spouse's occupation		SYAM PRIYA RAM SAGAR G Paid Preparer's addres:	UPTA TALLAM 02/22/2022 s and phone number (678) 965-9522
occupation DATA SCIENTIST	- Space of Goodpallori		2530 PEBBLE	
Daytime Phone (optional)	Daytime Phone (optional)		CUMMING	GA 30041
V-1	()		Paid Preparer's PTIN	P02082703

<u>Do not staple</u> documentation to this form. To attach items, please use a paper clip. Mailing Address for this form: PO Box 26800, Oklahoma City, OK 73126-0800