Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number
SHOBHA RAO CHAVA	315-61-0587
Spouse's name	Spouse's social security number
SHASHANK KODEDHALA	174-61-1083
Part I Tax Return Information – Tax Year Ending December 31, 2021 ((Enter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	1 193,84
2 Total tax	2 28,40
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 31,61
4 Amount you want refunded to you	
5 Amount you owe	

Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN
			ERO firm name	

1	0	5	8	7	as my
Ent	er fiv	/e di	aits	but	
dor	n't er				

Enter five digits, but don't enter all zeros

as mv

1 1 0 8 3

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

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

Your signature

Spouse's PIN: check one box only

X lauthorize GLOBAL TAXES LLC ERO firm name

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

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

Spouse's signature 🕨	Date 🕨					
Practitioner PIN Method Returns Only—continue below						
Part III Certification and Authentication – Pract	tioner PIN Method Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your	five-digit self-selected PIN. <u>5</u> 8 7 2 7 8 6 1 9 8 9 Don't enter all zeros					

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

ERO's signature >	Date 🕨	
	in This Form — See Instructions 1 to the IRS Unless Requested To Do So	
E. B. J. B. J. K. A. D. H. K. L. K.		E 9970 (D 01 0001)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/19/22 PRO

Date

to enter or generate my PIN

1040		artment of the Treasury-Internal Revenue Services		(99) urn 2(021	OMB No.	1545-00	74 IRS Use Only-	Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single 🔀 Married filing jointly 🗌 u checked the MFS box, enter the na on is a child but not your dependent	ame of y					· · · · E		, ,	ow(er) (QW) ne qualifying
Your first name	and mi	ddle initial	Last nar	me					Your so	cial securi	ty number
SHOBHA I	RAO		CHAV	Ά					315-	61-058	7
		first name and middle initial	Last nar								curity number
SHASHAN	X		KODE	DHALA					174-	61-108	3
		r and street). If you have a P.O. box, see	instructio	ons.				1.			on Campaign
27422 S'	TRAW	BERRY LANE								here if you,	
		ce. If you have a foreign address, also co	mplete s	paces below.	5	State	ZIF	CODE	•		ntly, want \$3
FARMING						MI	4	0 2 2 4	0	o this fund. ow will not	Checking a change
Foreign countr	y name		F	oreign province	e/state/co	unty	Fo			k or refund.	•
										You	Spouse
At any time du	iring 20	021, did you receive, sell, exchange,	or othe	rwise dispose	e of any fi	inancial inter	est in a	ny virtual curren	cy?	Yes	X No
Standard Deduction		eone can claim: You as a dep Spouse itemizes on a separate return			•	as a depende ien	ent				
Age/Blindnes	You:	Were born before January 2, 19	957	Are blind	Spou	se: 🗌 Was	born b	efore January 2,	1957	🗌 ls bl	lind
Dependent	s (see	instructions):		(2) Social	securitv	(3) Relati	onship	(4) 🖌 if qua	alifies fo	r (see instru	ictions):
If more		rst name Last name		num	-		to you Child tax				
than four	-										
dependents,										[
see instruction and check	s —									[
here 🕨 🗌										[
	1	Wages, salaries, tips, etc. Attach F	orm(s) V	N-2					1	2	04,135.
Attach	2a	Tax-exempt interest	2a		b	Taxable inte	erest		2b)	11.
Sch. B if	3a	Qualified dividends	3a	11	· b	Ordinary div	/idends	8	3b)	11.
required.	4a	IRA distributions	4a			Taxable am			4b)	
	5a	Pensions and annuities	5a	2,015	j. b	b Taxable amount		t ROLLOVER)	0.
Standard	6a	Social security benefits	6a		b	Taxable am	ount .		6b)	
Deduction for -	7	Capital gain or (loss). Attach Scheo	dule D if	required. If n	ot require	ed, check he	re.	🕨 🗌	7		1,370.
 Single or Married filing 	8	Other income from Schedule 1, line	e10.						8		11,686.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, a	and 8. T	his is your to f	tal incon	ne		🕨	9	19	93,841.
 Married filing 	10	Adjustments to income from Schee	dule 1, li	ine 26 .					10		
jointly or Qualifying	11	Subtract line 10 from line 9. This is	your ac	djusted grose	s income	.		🕨	· 11	19	93,841.
widow(er), \$25,100	12a	Standard deduction or itemized	deducti	ons (from Sc	hedule A)	12a	25,100			
 Head of 	b	Charitable contributions if you take	the stan	dard deductio	on (see in	structions)	12b	600			
household, \$18,800	С	Add lines 12a and 12b							12	c :	25,700.
 If you checked 	13	Qualified business income deducti	on from	Form 8995 o	or Form 8	995-A			13	3	
any box under Standard	14	Add lines 12c and 13							14		25,700.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from line	e 11. If zero o	or less, er	nter -0			15	5 1 (68,141.

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

Form **1040** (2021)

	Firn	n's address 🕨 2530 Pebb	te creek h	n Cumming	g GA 30041		Firm	s EIN 🕨	30-10	017196
		· · · · · · · · · · · · · · · · · · ·	le Checkle T	<u>A</u>	ar 20041					010100
Use Only		n's name 🕨 GLOBAL TAX					Phor	ne no. (678)96	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	1 03/24/2022	P02083			employed
Paid			Preparer's signat			Date	PTIN		Check if:	mployed
		one no. (551)587-321 parer's name		Email address	SHOBHARAO	46@GMAIL.CO			Chack	
Keep a copy for your records.				Franklin I.I.	SYSTEMS E		(see	ity Prote inst.) ►	ection PIN,	enter it here
See instructions.	Spo	ouse's signature. If a joint return, t	ooth must sign.	Date	Spouse's occupa		If the	IRS ser	nt your spou	use an
Joint return?					SOFTWARE	DEVELOPER		ection Pl inst.) ►	N, enter it h	nere
Here		ef, they are true, correct, and com Ir signature	piete. Declaration (Date	Your occupation	aseu on all informatio	If the	IRS ser	nt you an Id	entity
Sign	Und	der penalties of perjury, I declare t		ed this return and		nedules and statemer	nts, and to	the bes		
		signee's ne ▶		Phone no.			onal identi ber (PIN) 🖡			
Third Party Designee		you want to allow another tructions	person to disc		n with the IRS'	? See . ► 🗌 Yes. Co	omplete b	oelow.	X No	
	38	Estimated tax penalty (see in				38				
X 0	37	Amount you owe. Subtract			1 2		. 🕨	37		
	36	Amount of line 34 you want a				36				
See instructions.	►d	Account number 8 7 2	0 5 9 9	98						
	►b	Routing number 0 2 1			_		Savings			
Refund	35a	Amount of line 34 you want				•		35a		,204.
	34	If line 33 is more than line 24						34		,204.
	33	Add lines 25d, 26, and 32. T						33	31	,613.
	32	Add lines 27a and 28 throug				-	lits 🕨	32		
	30 31	Recovery rebate credit. See Amount from Schedule 3, lin				30 31		-		
	29	American opportunity credit				29		-		
	28	Refundable child tax credit or				28		-		
	С	Prior year (2019) earned inco			<u></u>					
	b	Nontaxable combat pay elec				-				
		January 2, 2004, and you taxpayers who are at least a	u satisfy all the ge 18, to claim t	e other requi he EIC. See in	rements for					
attach Sch. EIC.		Check here if you were k				2.14				
If you have a	27a	Earned income credit (EIC)				27a		20		
	26	2021 estimated tax payment						26		,015.
	d	Add lines 25a through 25c						25d	31	,613.
	b c	Other forms (see instructions				250 25c		-		
	a h	Form(s) W-2				25a 31 25b	,613.	-		
	25	Federal income tax withheld				21	612			
	24	Add lines 22 and 23. This is					. 🕨	24	28	,409.
	23	Other taxes, including self-e						23	0.0	0.
	22	Subtract line 21 from line 18	-					22	28	,409.
	21	Add lines 19 and 20						21		2.
	20	Amount from Schedule 3, lin	ie8					20		2.
	19	Nonrefundable child tax cred	dit or credit for o	ther depender	nts from Schedul	e8812		19		
	18	Add lines 16 and 17						18	28	3,411.
	17	Amount from Schedule 2, lin	ie3					17		
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	28	,411.

SCHEDULE 1	
(Form 1040)	

Internal Revenue Service

Additional Income and Adjustments to Income

OMB No. 1545-0074 20 21

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

Attachment Sequence No. **01**

Name(s) s	hown	on Foi	rm 10	040,	1040-SR,	or 1040-NR	
SHOBHA	RAO	CHAV	VA 8	ε SI	ASHANK	KODEDHALA	7

Your social security number 315-61-0587

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxe	s		1	0.
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions)				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, tr Schedule E	usts, et	tc. Attach	5	-11,686.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8 a ()		
b	Gambling income	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Taxable Health Savings Account distribution	8e			
f	Alaska Permanent Fund dividends	8f			
g	Jury duty pay	8g			
h	Prizes and awards	8h			
i	Activity not engaged in for profit income	8i			
j	Stock options	8j			
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k			
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		-	
m	Section 951(a) inclusion (see instructions)	8m			
n	Section 951A(a) inclusion (see instructions)	8n			
0	Section 461(I) excess business loss adjustment	80			
р	Taxable distributions from an ABLE account (see instructions) .	8p			
z	Other income. List type and amount ►	8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1 1040-NR, line 8			10	-11,686.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basic officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	3	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) \blacktriangleright			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b			
С	Nontaxable amount of the value of Olympic and Paralympicmedals and USOC prize money reported on line 81 24c			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans 24f			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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			
j	Housing deduction from Form 2555			
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 to in here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

Page **2**

REV 03/19/22 PRO

Additional Credits and Payments

OMB No. 1545-0074

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

20 21 Attachment

	▶ Attach to Form 1040, 1040-SR, or 1040-NR. rnal Revenue Service ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.				A	ttachment equence No. 03
	. ,	rm 1040, 1040-SR, or 1040-NR AVA & SHASHANK KODEDHALA		Your so 315-6	cial s	ecurity number
Pa		fundable Credits		510-0	01-01	007
1	Foreign tax	credit. Attach Form 1116 if required			1	2.
2	•	child and dependent care expenses from Form 2441	, line 11. /	Attach	2	
3		redits from Form 8863, line 19		F	3	
4		savings contributions credit. Attach Form 8880		f	4	
5		energy credits. Attach Form 5695			5	
6		fundable credits:				
а			6a			
b			6b			
С		edit. Attach Form 8839	6c			
d	•	e elderly or disabled. Attach Schedule R	6d			
е			6e			
f	Qualified plu	ug-in motor vehicle credit. Attach Form 8936	6f			
g	•		6g			
h	00		6h			
i	Qualified ele	ectric vehicle credit. Attach Form 8834	6i			
j	Alternative f	uel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to ho	Iders of tax credit bonds. Attach Form 8912	6k			
Т	Amount on	Form 8978, line 14. See instructions	6I			
z	Other nonre	undable credits. List type and amount ▶	6z			
7	Total other	nonrefundable credits. Add lines 6a through 6z			7	
8		through 5 and 7. Enter here and on Form 1040, 1040-	SR, or 104	0-NR,		
	line 20			[8	2.
						ed on page 2)
For Pa	perwork Reduct	ion Act Notice, see your tax return instructions. BAA	REV 03/19/22	PRO S	schedul	e 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021

Par	II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b		
С	Health coverage tax credit from Form 8885	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h		
Z	Other payments or refundable credits. List type and amount	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	
	BAA REV	03/19/22 PRO	Schedu	le 3 (Form 1040) 2021

SCHEDULE D

(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

20Attachment Sequence No. 12

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

Department of the Treasury

SHOBHA RAO CHAVA & SHASHANK KODEDHALA

Your social security number

315-61-0587

× No

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

Yes If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	Form(s) 8949, I line 2, column	Part I,	combine the result with column (g)		
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	972.	908.			64.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked		223.			
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5			
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions		-	-	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	287.			

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

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	2,236.	1,153.			1,083.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
12				. ,	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions		-	-	14	()
15					14	()
CI	Net long-term capital gain or (loss). Combine lines 8a on the back				15	1,083.

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

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 1,370.
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17	Are lines 15 and 16 both gains? ⊠ Yes. Go to line 18.	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 ()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.	
	□ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 03/19/22 PRO

Schedule D (Form 1040) 2021

Form	8949	
FOIIII		

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

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

Attachment Sequence No. 12A

Name(s)	shown on	return	

Social security number or taxpayer identification number 315-61-0587

SHOBHA	RAO	CHAVA	&	SHASHANK	KODEDHA	LA			315-61-	-0587		
Before you	check	Box A, B,	or	C below, see w	vhether you i	received any l	Form(s) 109	99-B or	substitute s	statement(s) from	your
atatamant	will how	a the com	in in	aformation on E	orm 1000 D	Eithor will oh	ow whath	r vour l	andia (unual	hu vour oor	t) was	ono

r broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

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

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

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

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

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

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

1 (a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	Description of property Date acquired discussed of Carlos and an Octomer (in the separate	(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	781.	758.			23.	
APEX CLEARING	01/01/21	12/31/21	191.	150.			41.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►			972.	908.			64.	

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

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

Form 8949 (2021)		Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxpayer identification no, not required if shown on other side	Social security n	umber or taxpaver identification num	ber

SHOBHA RAO CHAVA & SHASHANK KODEDHALA

Social security number or taxpayer identification number 315-61-0587

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

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

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

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

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

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

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e) in the separate instructions			(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
Robinhood Securities LLC	01/01/19	12/31/21	508.	203.			305.
APEX CLEARING	01/01/19	12/31/21	1,728.	950.			778.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			2,236.	1,153.			1,083.

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.

REV 03/19/22 PRO

Form	8949	
FOIIII		

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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

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

2021 Attachment Sequence No. 12A

Social security number or taxpayer identification number

	Name(s)	shown	on	return	
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SHOBHA RAO CHAVA & SHASHANK KODEDHALA 315-61-0587

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

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

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

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

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

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

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below			t or other basis. enter a code in column (f). the Note below See the separate instructions. S		(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(see instructions) in the separate (f) (g instructions Code(s) from Amou		ions) in the separate (f) (g instructions Code(s) from Amou		from column (d) and combine the result with column (g)		
ROBINHOOD CRYPTO LLC	01/01/21	12/31/21	1,477.	1,254.			223.		
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	al here and inc is checked), lir	lude on your 1e 2 (if Box B	1,477.	1,254.			223.		

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

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

	DULE E								OMB No. 1545-0074						
(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.							etc.)	9	021				
Departm	ent of the Treasury	► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.									hment				
	Revenue Service (99)		►G	o to www.	irs.gov/S	cheduleE fo	or inst	ructions	and the	latest	information.			Sequ	ence No. 13
										ty number					
	SHOBHA RAO CHAVA & SHASHANK KODEDHALA 315-61-0587														
Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.															
	d you make any	1 2						()							
	B If "Yes," did you or will you file required Form(s) 1099?														
<u>1a</u>								,							DECH TH 515001
 	7/254-1 BHAIRAN	VANAGAR E.	XTENSIC	N, BESIDE	AMARAVA'I'I	RESIDENCY	NEAR	PARASANI	NAYAPALLI	RAILWA	Y STATION , AP	NAN'I'AI	PUR AN	DHRA PRA	ADESH IN 515001
	C														
	1b Type of Property 2 For each rental real estate property listed Fair Rental Personal Use														
10	(from list be		- г а	bove, rep	ort the nu	umber of fai	ir renta	al and			Days	1 01	Days		QJV
Α	personal use days. Check the QJV box only					0									
B			q	ualified jo	int ventu	re. See inst	ructio	ns.	B		303			0	
С									C						
Туре	of Property:														
1 Sing	gle Family Resid	dence	3 V	acation/S	hort-Ter	m Rental	5 Lai	nd	7	7 Self-	Rental				
2 Mul	ti-Family Reside	ence	4 C	Commerci	al		6 Ro	yalties	8	3 Othe	r (describe)				
Incom	ie:				Pr	operties:			Α		В				С
3	Rents received						3			658.					
4	Royalties recei	ived .					4								
Expen															
5	-						5			420.					
6	Auto and trave						6								
7	Cleaning and r						7		2,	470.					
8	Commissions.						8								
9	Insurance						9								
10	Legal and othe Management f						10 11		0	211					
11 12	Mortgage inter						12		۷,۰	311.					
12	Other interest.	-					12								
14	Repairs						14		2	655.					
15	Supplies						15			442.					
16	Taxes						16		/						
17	Utilities						17		2,	046.					
18	Depreciation e	expense	or dep	letion .			18								
19	Other (list) 🕨						19								
20	Total expenses						20		12,	344.					
21	Subtract line 2	20 from li	line 3 (rents) and	l/or 4 (ro	yalties). If									
	result is a (loss														
	file Form 6198						21		-11,	686.					
22	Deductible ren														
	on Form 8582			,			22	(86.)	()	()
23a	Total of all amo							• •		23a		6	58.		
b	Total of all am		-							23b					
C C	Total of all am		-		-			• •		23c					
	dTotal of all amounts reported on line 18 for all properties.23deTotal of all amounts reported on line 20 for all properties.23e12,344.														
е 24	Income. Add		-		-					23e	L	4,34	⁴⁴ . 24		
24 25	Losses. Add ro	-						-		· ·		·	24 25	(11,686.)
												t	20	(··· , 000.)
26	Total rental re here. If Parts														
													26		-11,686.
For Pa											nedule E	(Form 1040) 2021			

For Paperwork	Reduction Ac	t Notice, see	the separate	instructions.
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Schedule E (Form 1040) 2021

Form	8889
Depar	tment of the Treasury

Health Savings Accounts (HSAs)

OMB No. 1545-0074 2021

Attachment Sequence No. **52**

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

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

Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Social security number of HSA
SHOBHA RAO CHAVA	beneficiary. If both spouses have HSAs, see instructions ► 315-61-0587

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

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.	_		
	See instructions	Sel	f-only	🗙 Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		0.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3		7,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		7,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		389.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		
8	Add lines 6 and 7	8		389.
9	Employer contributions made to your HSAs for 2021			
10	Qualified HSA funding distributions			
11	Add lines 9 and 10	11		389.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		0.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		0.
Part	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		10.4 a	o o vere la ta
	a separate Part II for each spouse.		15AS,	complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b		
С	Subtract line 14b from line 14a	14c		
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16		
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b		
Part	v			
	completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		HSAs	,
18	Last-month rule	18		
19	Qualified HSA funding distribution	19		
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form			
	1040), Part II, line 17d	21		

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

888 Form Department of the Treasury

Health Savings Accounts (HSAs)

OMB No. 1545-0074 2

(0)

Attachment

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

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

► Go to www.irs.gov/Form8889 for instructions and the latest information.				
Name(s) shown on Form 10	40, 1040-SR, or 1040-NR	Social security number of HSA beneficiary. If both spouses		
SHASHANK KODED	HALA	have HSAs, see instructions ► 174-	-61-1083	

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

Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for			
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.		-1	
-	See instructions	Sel	f-only	🗙 Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		0.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3		7,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5		7,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		6,811.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		
8	Add lines 6 and 7	8		6,811.
9	Employer contributions made to your HSAs for 2021			
10	Qualified HSA funding distributions			
11	Add lines 9 and 10	11		2,000.
12	Subtract line 11 from line 8. If zero or less, enter -0	12		4,811.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		0.
Dout	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		10.4 -	
Part	a separate Part II for each spouse.		15AS,	complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were			
	withdrawn by the due date of your return. See instructions	14b		
с	Subtract line 14b from line 14a	14c		
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e.	16		
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here			
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form			
	1040), Part II, line 17c	17b		
Part		ons b	efore	
	completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.	arate	HSAs	,
18	Last-month rule	18		
19	Qualified HSA funding distribution	19		
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20		
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form			
	1040), Part II, line 17d	21		

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

Important Information

If you are married and plan to file your annual return as "married filing separately," DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

Failure to provide a complete Social Security number on Form MI-1040ES will result in processing delays.

Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2022 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2022 withholding to be at least:

- 90 percent of your total 2022 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2021 tax, or
- 110 percent of your total 2021 tax if your 2021 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Total 2021 tax is the amount on your 2021 MI-1040, line 21 less the sum of your tax credits on lines 25, 26, 27b, and 28. Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

Do not submit this form for any quarter that you do not have estimated tax due.

Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2022. You may also pay in equal installments due on or before April 18, 2022, June 15, 2022, September 15, 2022, and January 17, 2023.

NOTE: You will not receive reminder notices; save this set of forms for all of your 2022 payments.

How to Pay Estimated Tax

e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit **www.michigan.gov/iit** for more information.

Mail Your Payment

If you choose to mail your payment, make your check payable to "State of Michigan." Print the last four digits of your SSN and "2022 MI-1040ES" on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

2022 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher See instructions for filing guidelines.		Due Date for Calendar Year Filers 04-18-2022
Filer's Name(s)	Filer's Full Social Security Number	Spouse's Full Social Security Number
SHOBHA RAO CHAVA & SHASHANK KODEDHALA	315-61-0587	174-61-1083
Address (Street, City, State, ZIP Code) 27422 STRAWBERRY LANE, APT. 102	WRITE PAYMENT AMOUNT HERE	\$ 545.00
FARMINGTON HILLS MI 48334	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Enclose check payable to "State of Michigan." Write last four digits of filer's SSN and "2022 MI-1040ES" on the front of your check. Do not fold or staple.

Important Information

If you are married and plan to file your annual return as "married filing separately," DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

Failure to provide a complete Social Security number on Form MI-1040ES will result in processing delays.

Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2022 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2022 withholding to be at least:

- 90 percent of your total 2022 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2021 tax, or
- 110 percent of your total 2021 tax if your 2021 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Total 2021 tax is the amount on your 2021 MI-1040, line 21 less the sum of your tax credits on lines 25, 26, 27b, and 28. Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

Do not submit this form for any quarter that you do not have estimated tax due.

Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2022. You may also pay in equal installments due on or before April 18, 2022, June 15, 2022, September 15, 2022, and January 17, 2023.

NOTE: You will not receive reminder notices; save this set of forms for all of your 2022 payments.

How to Pay Estimated Tax

e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit **www.michigan.gov/iit** for more information.

Mail Your Payment

If you choose to mail your payment, make your check payable to "State of Michigan." Print the last four digits of your SSN and "2022 MI-1040ES" on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

2022 MICHIGAN MI-1040ES Estimated Individual Income Tax Voucher See instructions for filing guidelines.		Due Date for Calendar Year Filers 06-15-2022
Filer's Name(s)	Filer's Full Social Security Number	Spouse's Full Social Security Number
SHOBHA RAO CHAVA & SHASHANK KODEDHALA	315-61-0587	174-61-1083
Address (Street, City, State, ZIP Code) 27422 STRAWBERRY LANE, APT. 102	WRITE PAYMENT AMOUNT HERE	\$ 545.00
FARMINGTON HILLS MI 48334	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Enclose check payable to " State of Michigan." Write last four digits of filer's SSN and " 2022 MI-1040ES " on the front of your check. Do not fold or staple.

Important Information

If you are married and plan to file your annual return as "married filing separately," DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

Failure to provide a complete Social Security number on Form MI-1040ES will result in processing delays.

Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2022 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2022 withholding to be at least:

- 90 percent of your total 2022 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2021 tax, or
- 110 percent of your total 2021 tax if your 2021 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Total 2021 tax is the amount on your 2021 MI-1040, line 21 less the sum of your tax credits on lines 25, 26, 27b, and 28. Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

Do not submit this form for any quarter that you do not have estimated tax due.

Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2022. You may also pay in equal installments due on or before April 18, 2022, June 15, 2022, September 15, 2022, and January 17, 2023.

NOTE: You will not receive reminder notices; save this set of forms for all of your 2022 payments.

How to Pay Estimated Tax

e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit **www.michigan.gov/iit** for more information.

Mail Your Payment

If you choose to mail your payment, make your check payable to "State of Michigan." Print the last four digits of your SSN and "2022 MI-1040ES" on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

2022 MICHIGAN MI-1040ES Estimated Individual Income Tax Vot	Issued under authority of Public Act 281 of 1967, as amended. See instructions for filing guidelines.	Due Date for Calendar Year Filers 09-15-2022
Filer's Name(s)	Filer's Full Social Security Number	Spouse's Full Social Security Number
SHOBHA RAO CHAVA & SHASHANK KODEDHALA	315-61-0587	174-61-1083
Address (Street, City, State, ZIP Code) 27422 STRAWBERRY LANE, APT. 102	WRITE PAYMENT AMOUNT HERE	\$ 545.00
FARMINGTON HILLS MI 48334	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Enclose check payable to "State of Michigan." Write last four digits of filer's SSN and "2022 MI-1040ES" on the front of your check. Do not fold or staple.

Important Information

If you are married and plan to file your annual return as "married filing separately," DO NOT use preprinted vouchers containing the Social Security numbers (SSN) or correspondence identification numbers (CID) for both you and your spouse; separate vouchers and payments must be submitted for each filer.

Failure to provide a complete Social Security number on Form MI-1040ES will result in processing delays.

Who Must File Estimated Tax Payments

You must make estimated income tax payments if you expect to owe more than \$500 when you file your 2022 MI-1040 return. If you owe more than \$500, you may not have to make estimated payments if you expect your 2022 withholding to be at least:

- 90 percent of your total 2022 tax (qualified farmers, fishermen and seafarers use 66 and 2/3 percent),
- 100 percent of your 2021 tax, or
- 110 percent of your total 2021 tax if your 2021 adjusted gross income is more than \$150,000 (\$75,000 for married filing separately).

Total 2021 tax is the amount on your 2021 MI-1040, line 21 less the sum of your tax credits on lines 25, 26, 27b, and 28. Estimated tax payments are not needed if two-thirds of your gross income is from farming, fishing or seafaring and you meet the qualifications. Estimate filing requirements apply whether or not you are a Michigan resident.

Do not submit this form for any quarter that you do not have estimated tax due.

Payment Due Dates

You may pay in full with the first estimate voucher due April 18, 2022. You may also pay in equal installments due on or before April 18, 2022, June 15, 2022, September 15, 2022, and January 17, 2023.

NOTE: You will not receive reminder notices; save this set of forms for all of your 2022 payments.

How to Pay Estimated Tax

e-Payments

You may choose to make your estimated income tax payments electronically instead of mailing a payment with the personalized form provided. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card. If you choose to make your payment electronically, you do not need to mail the MI-1040ES form to Treasury. Visit **www.michigan.gov/iit** for more information.

Mail Your Payment

If you choose to mail your payment, make your check payable to "State of Michigan." Print the last four digits of your SSN and "2022 MI-1040ES" on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's SSN on the check. For accurate processing of your payment, do not combine this payment with any other payments. Send your check with the MI-1040ES voucher for that installment. Do not staple your check to the voucher.

Send your voucher and check to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

DETACH HERE AND MAIL THE RETURN WITH YOUR PAYMENT. DO NOT FOLD OR STAPLE THE RETURN.

2022 MICHIGAN MI-1040ES Estimated Individual Income Tax Vo	Issued under authority of Public Act 281 of 1967, as amended. See instructions for filing guidelines.	Due Date for Calendar Year Filers 01-17-2023
Filer's Name(s)	Filer's Full Social Security Number	Spouse's Full Social Security Number
SHOBHA RAO CHAVA & SHASHANK KODEDHALA	315-61-0587	174-61-1083
Address (Street, City, State, ZIP Code) 27422 STRAWBERRY LANE, APT. 102	WRITE PAYMENT AMOUNT HERE	\$ 545.00
FARMINGTON HILLS MI 48334	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Enclose check payable to "State of Michigan." Write last four digits of filer's SSN and "2022 MI-1040ES" on the front of your check. Do not fold or staple.

Important Information

Use this voucher only if making your payment after you file your MI-1040 return.

Do not use this voucher to do any of the following:

- Make any other payments to the State of Michigan
- Make estimated income tax payments. Estimated income tax payments should be made using the MI-1040ES
- Pay tax owed on your City of Detroit return. The City of Detroit tax due should be paid using the CITY-V.

Failure to provide a complete Social Security number on Form MI-1040-V will result in processing delays.

Enter on Form MI-1040-V below the tax due as shown on your *Individual Income Tax Return* (MI-1040), line 33.

Your payment and MI-1040-V are due April 18, 2022. If your payment is late, you will owe interest and penalty in addition to the tax due. The annual interest rate is 1 percent above the current prime rate. Penalty is 5 percent of the tax due for the first two months, then 5 percent for each month thereafter until the full payment is received, up to a maximum penalty of 25 percent. If you pay late, you may calculate and add interest and penalty to your payment or Treasury will send you a bill for any additional amount due. Interest rates are adjusted on July 1 and January 1. For current interest rates visit **www. michigan.gov/taxes.**

If you do not owe any tax on your MI-1040, do not file this form.

Electronic Payments

You may choose to make your Individual Income Tax payment electronically. Paying electronically is easy, fast and secure. Payment options include direct debit (eCheck) from your checking or savings account, or payment by credit or debit card. You can also make your Individual Income Tax payment using direct debit when supported by your e-file software provider.

If you choose to make your payment electronically, you do not need to mail the MI-1040-V to Treasury. Visit **www.michigan.gov/iit** for more information.

Mailing Instructions

- Make your check payable to the "State of Michigan." Print "2021 MI-1040-V" and the last four digits of your Social Security number on the check. If paying on behalf of another filer, write the filer's name and the last four digits of the filer's Social Security number on the check.
- Detach Form MI-1040-V along the dotted line.
- Do not attach your payment to Form MI-1040-V. Instead, place both items loose in the envelope and mail to:

Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909

- Do not attach a copy of your return to the MI-1040-V. Attaching a copy of your return will delay the application of payment to your account.
- Do not write notes on the MI-1040-V or submit the voucher without payment.
- If you mail your payment with your paper filed return, you do not need to mail the MI-1040-V to Treasury.

If you have questions, you may call 517-636-4486. Assistance is available using TTY through the Michigan Relay Service by calling 711.

Visit www.michigan.gov/taxes for additional information.

Mail this form with payment for your MI-1040 return. Do not file with your paper return.

Detach here and mail with your payment. Do not fold or staple the voucher.

Michigan Department of Treasury (Rev. 03-21)

2021 MICHIGAN Individual Income Tax Payment Voucher

Issued under authority of Public Act 281 of 1967, as amended. See instructions for filing guidelines.

Mail Form MI-1040-V with your payment after you file your MI-1040 return. Do not use this form to make any other payments to the State of Michigan.

Home Address (Street, City, State, ZIP Code) SHOBHA RAO CHAVA	Filer's Full Social Security Number 315-61-0587	Spouse's Full Social Security Number 174-61-1083	
	WRITE PAYMENT	\$ 1397.00	
	MAIL TO: Michigan Department of Treasury P.O. Box 30774 Lansing, MI 48909	Make check payable to "State of Michigan." Write the last four digits of filer's Social Security number and "2021 MI-1040-V" on the check. Do not fold or staple.	

MI-1040-V

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-	1 MICHIGAN Indiv rn is due April 18, 2022. 1				'n MI-10₄	40			ended Return	
	r's First Name	M.I.				2. Filer's Fi	Ill Social Se	curity	No. (Example: 123-45-67	89)
	OBHA RAO		CHAVA			211	5	61	0587	
	int Return, Spouse's First Name	M.I.	Last Name							
	ASHANK Address (Number, Street, or P.O. Box		KODEDHALA			3. Spouse's	Full Social	Secu	rity No. (Example: 123-45	-6789)
	122 STRAWBERRY LA		ג סדי 102			174	1 —	61	<u> </u>	
	r Town		State	ZIP Code		4. School E	istrict Code	(5 dig	jits – see page 60)	
FAI	RMINGTON HILLS		MI	48334	1		53200			
5.	STATE CAMPAIGN FUND			<u> </u>	6. FARME	RS, FISHE	RMEN, OI	R SE/	AFARERS	
	Check if you (and/or your spouse filing a joint return) want \$3 of you to go to this fund. This will not inc your tax or reduce your refund.	ur taxes	a. Filer			eck this bo ning, or sea		/our ii	ncome is from farming,	,
7.	2021 FILING STATUS. Check on	e.					STATUS.	Chec	k all that apply.	
a.	Single		ou check box "c," comple		a. X Re	esident			* 16	
b.	V Morried filing jointly	line : belo	3 and enter spouse's full	name		onresident	*		* If you check box "b" "c," you must complete	
	X Married filing jointly			·]	b. No	onresident			and include Schedule	
c.	Married filing separately*				c. 📃 Pa	art-Year Re	sident *		NR.	
9.	EXEMPTIONS. NOTE: If some	one els	e can claim you as a der	bendent, che	ck box 9e, ente	er 0 on line	9a and er	nter \$	1,500 on line 9e (see ii	nstr.).
					Γ					
	a. Number of exemptions (see in	nstructi	ons)		9a.	2 x	\$4,900	9a.	9800	00
	b. Number of individuals who qua		0,							
	blind, hemiplegic, paraplegic,			-		×	. ,			00
	c. Number of qualified disabledd. Number of Certificates of Still					×		9c. 9d.		00
		Dirut ite		10115)		^	φ 4 ,900	au.		
	e. Claimed as dependent, see li	ne 9 N	OTE above					9e.		00
	f. Add lines 9a, 9b, 9c, 9d and 9	9e. En	er here and on line 15				r	9f.	9800	00
10.	Adjusted Gross Income from y	our U.S	S. Form 1040 (see instruc	ctions)			10.		193841	1 00
11.	Additions from Schedule 1, line 9	9. Incl u	Ide Schedule 1				11.			00
							Γ			
12.	Total. Add lines 10 and 11						12.		193841	<u>1 00</u>
40	Culture etiene from Colordule 4 li		In aluda Cabadula 4				10			00
13.	Subtractions from Schedule 1, li	ne 29.	Include Schedule 1				13.			100
14.	Income subject to tax. Subtrac	t line 1	3 from line 12. If line 13	is greater that	an line 12, ente	er "O"	14.		193841	1 00
	•			0	,		ľ			
15.	Exemption allowance. Enter an	nount f	rom line 9f or Schedule N	√R, line 19			15.		9800	00 (
16.	Taxable income. Subtract line 1	5 from	line 14. If line 15 is grea	iter than line	14, enter "0"		16.		184041	L 00
	Tax. Multiply line 16 by 4.25% (0 REFUNDABLE CREDITS	0.0425)			AMOUNT		17. [7822	2 00
			14				л г			Τ-
	Income Tax Imposed by governm Include a copy of the return (see	e instruc	ctions) 1	8a.		0) 18b.			00
	Michigan Historic Preservation T instructions)			9a.		00) 19b.			00
20.	Income Tax. Subtract the sum of lines 18b and 19b i						20.		7822	2 00

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2021 N	II-1040, Page 2 of 2		Filer's	Full Social S	ecurity Numbe	r 315	5	61 —	0587	
21.	Enter amount of Income Tax from lin	e 20				·····	21.		782	2 00
22.	Voluntary Contributions from Form 4	642, line 6.	Include Fo	orm 4642			22.			00
23.	USE TAX. Use tax due on Internet, n Worksheet 1 (see instructions)						<u>23</u> .			0 00
04	Total Tax Link little Add lines 04, 00	and 00							782	2 00
	Total Tax Liability. Add lines 21, 22 JNDABLE CREDITS AND PAYM						24.		702	2 100
25.	Property Tax Credit. Include MI-10	40CR or MI	-1040CR-2	2			25.			00
26.	Farmland Preservation Tax Credit	. Include MI	l-1040CR-	5		DERAL	26. _	мі	CHIGAN	00
27.	Earned Income Tax Credit. Multiply I enter result on line 27b					oc	27b.			00
28.	Michigan Historic Preservation Tax 0	Credit (refund	dable). Inc	3581					00	
29.	Credit for allocated share of tax paid	l by an electi	ing flow-th	ough entity	(see instruc	tions)	29.			00
30.	Michigan tax withheld from Schedule	e W, line 6. I	nclude Sc	hedule W (do not subr	nit W-2s)	30.		642	5 00
31.	Estimated tax, extension payments a	and 2020 cr	adit forwar	4			31.			00
32.	2021 AMENDED RETURNS ONLY. Amended returns must include Sch	Taxpayers c	ompleting	an original :						
	32a. If you had a refund and/or of negative number on line 32		on the origin	al return, che	eck box 32a ar	nd enter this amount	as a			
	32b. If you paid with the original any additional tax paid after									00
33.	Total refundable credits and paymen	nts. Add lines	s 25, 26, 27	7b, 28, 29, 3	30, 31 and 32	2c 3	3.		642	5 00
REFL	JND OR TAX DUE									
34.	If line 33 is less than line 24, subtrac	t line 33 fror	m line 24. I	f applicable	, see instruc	tions.				
	Include interest 00 a	nd penalty		00		YOU OWE			139	7 00
35.	Overpayment. If line 33 is greater the	nan line 24, s	subtract lin	e 24 from li	ne 33	3	5	I		00
36.	Credit Forward. Amount of line 35 t	o be credite	d to your 2	022 estimat	ted tax for yo	our 2022 tax retur	1 <u>36.</u>			00
37	Subtract line 36 from line 35					REFUND	37.			00
	ECT DEPOSIT		ng Transit N			Account Number	<u>,,,,</u>	с. Туре о	f Account	100
	it your refund directly to your financial ion! See instructions and complete a, b						1.	Checking	2. 🔄 Sa	vings
	eased Taxpayer. If Filer and/or Spouse R DATE OF DEATH ONLY. Example:				dates below.	Preparer Certi this return is based	on all inforn	nation of which I h		
Filer		Spouse				Preparer's PTIN, F P0208270				
	ayer Certification. I declare under p tachments is true and complete to the best			information in	this return	Preparer's Name (SYAM PRI			GUPTA	TA
	s Signature	,		Date		Preparer's Signatu SYAM PRI	re			
Spous	se's Signature			Date		Preparer's Busines	s Name, Ad	dress and Teleph		-11
	By checking this box, I authorize Tre	asury to disc	cuss my re	turn with my	y preparer.	2530 PEB CUMMING 678-965-	BLE C GA 30	REEK LN		

Refund, credit, or zero returns. Mail your return to:Michigan Department of Treasury, Lansing, MI48956Pay amount on line 34 (see instructions). Mail your check and return to:Michigan Department of Treasury, Lansing, MI48929

2021 MICHIGAN Withholding Tax Schedule

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

Type or print in blue or black ink.

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

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
SHOBHA RAO		CHAVA	315 — 61 — 0587
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)
SHASHANK		KODEDHALA	174 — 61 — 1083

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

A B		В	B C D		E
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation	Box 17 — Michigan income tax withheld
x		38-0549190	FORD MOTOR COMPA	60486 ₀	0 2380 ₀₀
	Х	38-0549190	FORD MOTOR COMPA	100067 ₀	0 4045 ₀₀
				0	0 00
				0	0 00
				0	0 00
Enter	Table	1 Subtotal from additional Sche	00		
4.	SUB	TOTAL. Enter total of Table 1, c	6425 00		

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

A	В	С	D	E	
Enter "X" for: Filer or Spouse	Payer's federal identification number (Example: 38-1234567)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld	
			00		00
			00		00
			00		00
			00)	00
			00)	00
Enter Table	2 Subtotal from additional Sche	dule W forms (if applicable)			00
5. SUB	TOTAL. Enter total of Table 2, c	olumn E			00
6. TOT /	AL. Add lines 4 and 5. Enter her	. 6425	00		

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Attachment 13