Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

internal nevertue Service	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
SRIRAM BODAPATI	861-48-9825
Spouse's name	Spouse's social security number
VENKATA SATHYA A ALAMURU	339-75-2733
Part I Tax Return Information — Tax Year Ending December 31, 20	022 (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	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	, , , , , , , , , , , , , , , , , , , ,
4 Amount you want refunded to you	,
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you Under penalties of perjury, I declare that I have examined a copy of the income tax return (original	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I aud Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can business days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues relapersonal identification number (PIN) below is my signature for the income tax return (original or a Electronic Funds Withdrawal Consent.	thorize the U.S. Treasury and its designated Financial account indicated in the tax preparation software for ncial institution to debit the entry to this account. This is to terminate the authorization. To revoke (cancel) a cellation requests must be received no later than 2 volved in the processing of the electronic payment of ated to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	or generate my PIN 8 9 8 2 5 as my
ERO firm name	Enter five digits, but don't enter all zeros
signature on the income tax return (original or amended) I am now authorizing	
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitione below.	
Your signature ►	Date ►
Spouse's PIN: check one box only	
	or generate my PIN 5 2 7 3 3 as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitions below.	
Spouse's signature ▶	Date ►
Practitioner PIN Method Returns Only—conti	
Part III Certification and Authentication — Practitioner PIN Method On	ly
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Pinks of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Pinks of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Pinks of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Pinks of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Pinks of the	at I am submitting this return in accordance with the
ERO's signature ▶	Date ►
FRO Must Ratain This Form — See Instri	

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

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

2022)
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OMB No. 1545-0074

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

Filing Status Check only				ed filing separately (M					spo	use (QSS	5)
one box.	-	u checked the MFS box, enter the na on is a child but not your dependent	-	our spouse. If you ch	necke	ed the HOH or	QSS box,	enter tl	he child's	name if	the qualifying
Your first name	and mi	ddle initial	Last na	me					Your so	cial secu	rity number
SRIRAM BOI				PATI					861-48-9825		
If joint return, s	pouse's	first name and middle initial	Last na	me					Spouse	s social s	ecurity number
VENKATA			ALAM	URU						75-27	
		r and street). If you have a P.O. box, see					Apt. ne).			tion Campaign
15626 SZ	ND F	BLUESTEM DR							1		u, or your
		ce. If you have a foreign address, also co	mplete si	paces below.	State	е	ZIP code				intly, want \$3
CYPRESS					TX		77433				d. Checking a ot change
Foreign country	/ name		F	oreign province/state/o			Foreign pos	tal code	-	ow will no	•
				, , , , , , , , , , , , , , , , , , ,	,					You	Spouse
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward. award. or i	pavm	ent for prope	rtv or servi	ces): o	r (b) sell.		
Assets		ange, gift, or otherwise dispose of a			-		-			☐ Yes	s ⊠ No
Standard		eone can claim: You as a de					, (
Deduction		Spouse itemizes on a separate return	•								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Ja	anuary	2, 1958	☐ Is	blind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Che	ck the b	oox if quali	fies for (se	ee instructions):
If more	(1) Fi	rst name Last name		number		to you	Ch	ild tax o	credit	Credit for	other dependents
than four											
dependents, see instruction:											
and check	5 ——										
here											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)					. 1a	1 2	274,113.
moonic	b	Household employee wages not re	eported	on Form(s) W-2					. 1b)	
Attach Form(s)	С	Tip income not reported on line 1a (see instructions)						. 10	:		
W-2 here. Also attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						. 1d	ı		
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26						. 1e	,		
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29					. 1f		
If you did not	g	Wages from Form 8919, line 6 .							. 19	1	
get a Form	h	Other earned income (see instructi	ons) .						. 1h	1	0.
W-2, see	i	Nontaxable combat pay election (s				1i					
instructions.	z	Add lines 1a through 1h					.		. 1z	: 2	274,113.
Attach Sch. B	2a		2a		b Ta	xable interest	t		. 2b		•
if required.	3a	Qualified dividends	За		b Or	dinary divider	nds		. 3b	,	
	4a	IRA distributions	4a			xable amoun			. 4b	,	
Standard	5a		5а			xable amoun			. 5b	,	
Deduction for—	6a		6a			xable amoun			. 6b		
Single or Married filing	С	If you elect to use the lump-sum e	_								
separately,	7	Capital gain or (loss). Attach Sched		,	`	,					
\$12,950 Married filing	8	Other income from Schedule 1, lin							. 8	_	-13 , 095.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							. 9		261,018.
Qualifying surviving spouse,	10	Adjustments to income from Sche							. 10		
\$25,900 Head of	11	Subtract line 10 from line 9. This is	-						. 11		261,018.
Head of household,	12	Standard deduction or itemized	•	-					. 12		
\$19,400	13	Qualified business income deducti				 5_Δ			. 13		25,900.
If you checked any box under											25 000
Standard Deduction,	14	Add lines 12 and 13							. 14		25 , 900.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is yo	our ta	axable incom	ie		. 15) 2	235,118.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	44,099.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	44,099.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	44,099.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	217.
	24	Add lines 22 and 23. This is	your total tax					24	44,316.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 47	,252.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c	0.		
	d	Add lines 25a through 25c						25d	47,252.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	47,252.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	2,936.
riciana	35a	Amount of line 34 you want			is attached, chec	k here		35a	2,936.
Direct deposit?	b	Routing number 0 2 1			c Type: 🛛 🗙	Checking	Savings		
See instructions.	d	Account number 3 8 1	0 4 3 2	0 4 8 7	7 0				
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						0.7	
100 OWE	38		•	•		1 1		37	
The level December		Estimated tax penalty (see in				38			
Third Party Designee		you want to allow another	•		n with the IRS?		omnlete	helow	× No
Designee		signee's		Phone			onal identi		
		me		no.			ber (PIN)		
Sign		der penalties of perjury, I declare			1 , 0		,		, ,
Here		lief, they are true, correct, and com	ipiete. Declaration (sed on all informati			, ,
	Yo	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					CONSULTANT	1		inst.)	11, 61161 11 11 11
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati		If the	e IRS sei	nt your spouse an
Keep a copy for your records.							I .	,	ection PIN, enter it here
your records.					SOFTWARE E	NGINEER	(see	inst.)	
		one no. (732) 619-197		Email address	BODAPATISRI		1		T
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	1	RAM SAGAR	GUPTA TALLAM	03/15/2023	P0208		Self-employed
Use Only	Fir	m's name GLOBAL TA					Pho	ne no.	(678) 965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	i's EIN	84-3171965

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

SRIRAM BODAPATI & VENKATA SATHYA A ALAMURU

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

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

	Sequence No. U1
Your soc	ial security number
861-48	-9825

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		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, trusts, etc. Atta		5	-13,095.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j	-	
k	Stock options	8k		
ı	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	81		
m	Olympic and Paralympic medals and USOC prize money (see	_		
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p	-	
q	Taxable distributions from an ABLE account (see instructions)	8q	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	0.		
	a nongovernmental section 457 plan	8t	-	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
•	Total ather income. Add lines On through On	8z		
9	Total other income. Add lines 8a through 8z		9	12 005
10	Combine lines i through / and 9. Enter here and on Form 1040, 1040-5K	or 1040-NR, III e 8	10	-13 , 095.

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	 11	
12	Certain business expenses of reservists, performing artists, and fee-basin		
	officials. Attach Form 2106	 12	
13	Health savings account deduction. Attach Form 8889	 13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	 14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	 16	
17	Self-employed health insurance deduction	 17	
18	Penalty on early withdrawal of savings	 18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	 22	
23	Archer MSA deduction	 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
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		
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)	-	
İ	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		
	zan		
j	Housing deduction from Form 2555	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
_	1041)	-	
Z	Other adjustments. List type and amount:		
25		25	
25 26	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Ent	00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 26	

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 02

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

SRIRAM RODAPATI & VENKATA SATHYA A ALAMIIRII

Sequence No. 02

Your social security number
861-48-9825

SRI	RAM BODAPATI & VENKATA SATHYA A ALAMURU	861-4	8-9825	
Pa	rt I Tax			
1	Alternative minimum tax. Attach Form 6251		1	
2	Excess advance premium tax credit repayment. Attach Form 8962		2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	· [3	
Par	t II Other Taxes			
4	Self-employment tax. Attach Schedule SE		4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137			
6	Uncollected social security and Medicare tax on wages. Attach Form 8919			
7	Total additional social security and Medicare tax. Add lines 5 and 6		7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if requ	iired.		
	If not required, check here		8	
9	Household employment taxes. Attach Schedule H		9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required		10	
11	Additional Medicare Tax. Attach Form 8959		11	217.
12	Net investment income tax. Attach Form 8960		12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-terr insurance from Form W-2, box 12		13	
14	Interest on tax due on installment income from the sale of certain residential and timeshares	l lots	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales over \$150,000		15	
16	Recapture of low-income housing credit. Attach Form 8611	[16	
		(co	ntinued	on page 2)

Schedule 2 (Form 1040) 2022 Page **2**

Part II Other Taxes (continued)

7	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home	476		
	see instructions	17b	-	
	Additional tax on HSA distributions. Attach Form 8889 Additional tax on an HSA because you didn't remain an eligible	17c	-	
u	individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k	-	
1	Tax on accumulation distribution of trusts	171	-	
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
Z	Any other taxes. List type and amount:			
		17z		
8	Total additional taxes. Add lines 17a through 17z		18	
9	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxe		0.1	
	on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . $$.		21	217.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number SRIRAM BODAPATI & VENKATA SATHYA A ALAMURU 861-48-9825 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. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . Yes 1a Physical address of each property (street, city, state, ZIP code) HYDERABAD TELANGANA IN 500097 HOUSE NO 13-31, PLOT NO 36 GOWTHAM NAGAR PHASE-2 TRR TOWNSHIP, MEERPET, SAROORNAGAR Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 687. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 2,974. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 2,798. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,810. 14 14 Repairs . . . 2,633. 15 Supplies 15 16 16 Taxes 17 Utilities 17 2,567. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 13,782. 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 -13,095. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 13,095.) 687. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 13,782. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 13,095. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

-13**,**095.

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attachment Sequence No. **71**

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

Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8959 for instructions and the latest information.

SRIF	RAM BODAPATI & VENKATA SATHYA A ALAMURU	861-4	8-98	25
Part	Additional Medicare Tax on Medicare Wages			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one			
	Form W-2, enter the total of the amounts from box 5	274,113.		
2	Unreported tips from Form 4137, line 6			
3	Wages from Form 8919, line 6			
4	Add lines 1 through 3	274,113.		
5	Enter the following amount for your filing status:			
	Married filing jointly \$250,000			
	Married filing separately			
_	Single, Head of household, or Qualifying surviving spouse \$200,000 5	250,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	1	6	24,113.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here		_	217
Part	Part II		7	217.
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 8			
9	Enter the following amount for your filing status:			
Э	Married filing jointly			
	Married filing separately			
	Single, Head of household, or Qualifying surviving spouse \$200,000 9			
10	Enter the amount from line 4			
11	Subtract line 10 from line 9. If zero or less, enter -0			
12	Subtract line 11 from line 8. If zero or less, enter -0		12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Ent			
	go to Part III		13	
Part				
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14			
	(see instructions)			
15	Enter the following amount for your filing status:			
	Married filing jointly \$250,000			
	Married filing separately \$125,000			
	Single, Head of household, or Qualifying surviving spouse \$200,000			
16	Subtract line 15 from line 14. If zero or less, enter -0		16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.			
Dowl	Enter here and go to Part IV		17	
Part		1010 DD		
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (For or 1040-SS filers, see instructions), and go to Part V		18	017
Part			10	217.
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form			
19	W-2, enter the total of the amounts from box 6	3 , 975.		
20	Enter the amount from line 1	274,113.		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax	271,1101		
	withholding on Medicare wages	3 , 975.		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Me			
	withholding on Medicare wages	1	22	0.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from For			- · ·
	14 (see instructions)		23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this a	mount with		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form	1040-PR or		
	1040-SS filers, see instructions)		24	0.

BAA

OMB No. 1545-0074

Your social security number

Net Investment Income Tax— Individuals, Estates, and Trusts

Attach to your tax return. Attachment Sequence No. **72**

OMB No. 1545-2227

Your social security number or EIN

Department of the Treasury Internal Revenue Service

Name(s) shown on your tax return

Go to www.irs.gov/Form8960 for instructions and the latest information.

SRII	RAM BODAPATI & VENKATA SATHYA A ALAMURU		8	361-48-	9825
Part	I Investment Income ☐ Section 6013(g) election (see instructions)				
	Section 6013(h) election (see instructions)				
	☐ Regulations section 1.1411-10(g) election (see in	nstruct	tions)		
1	Taxable interest (see instructions)			. 1	
2	Ordinary dividends (see instructions)			. 2	
3	Annuities (see instructions)			. 3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see				
	instructions)	4a	-13,09	95.	
b	Adjustment for net income or loss derived in the ordinary course of a non-				
	section 1411 trade or business (see instructions)	4b			
С	Combine lines 4a and 4b			. 4c	-13,095.
5a	Net gain or loss from disposition of property (see instructions)	5a			
b	Net gain or loss from disposition of property that is not subject to net				
	investment income tax (see instructions)	5b			
С	Adjustment from disposition of partnership interest or S corporation stock (see				
	instructions)	5c			
d	Combine lines 5a through 5c			. 5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			. 6	
7	Other modifications to investment income (see instructions)				
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			. 8	-13,095.
Part	II Investment Expenses Allocable to Investment Income and Modif	icatio	ns		
9a	Investment interest expenses (see instructions)	9a			
b	State, local, and foreign income tax (see instructions)	9b			
С	Miscellaneous investment expenses (see instructions)	9с			
d	Add lines 9a, 9b, and 9c				
10	Additional modifications (see instructions)				
11	Total deductions and modifications. Add lines 9d and 10			. 11	
Part	III Tax Computation				
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals,				
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0			. 12	0.
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	261,0		
14	Threshold based on filing status (see instructions)	14	250,00		
15	Subtract line 14 from line 13. If zero or less, enter -0	15	11,0	18.	
16	Enter the smaller of line 12 or line 15			. 16	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En	ter he	ere and inclu		
	on your tax return (see instructions)			. 17	0.
	Estates and Trusts:				
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b			
С	Undistributed net investment income. Subtract line 18b from line 18a (see				
·	instructions). If zero or less, enter -0	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b			
C	Subtract line 19b from line 19a. If zero or less, enter -0	19c			
20	Enter the smaller of line 18c or line 19c			. 20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.				
	include on your tax return (see instructions)				
For Pa	perwork Reduction Act Notice, see your tax return instructions.		/ 03/02/23 PRO	'	Form 8960 (2022)