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

Submission Identification Number (SID)		-	
Taxpayer's name	Social security	number	
VENKATA SURYACHANDRA KALLEPALLI	840-38-	2179	
Spouse's name	Spouse's soci	al security number	er
HARITHA BHUVANESWARI ILLA	792-99-	-7734	
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	r year you ar	e 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			2,282.
2 Total tax		2 2	7 , 303.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			5,022.
4 Amount you want refunded to you			7 , 719.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	of your retu	urn)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transn to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejfor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the L Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account inc payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituti authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminat payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation recubisness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I at Electronic Funds Withdrawal Consent.	nitter, or electro ection of the tra J.S. Treasury are licated in the ta on to debit the e the authoriza uests must be processing of payment. I furth	nic return original ansmission, (b) to dissert designated a preparation so the properties. The control of the electronic per acknowledge.	ator (ERO) he reason I Financial oftware for ount. This (cancel) a ter than 2 ayment of e that the
Taxpayer's PIN: check one box only			
X I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	Ent	2 1 7 9 er five digits, but 't enter all zeros	as my
I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN methoelow.			
Your signature ► Date ► _			
Spouse's PIN: check one box only			ı
I authorize GLOBAL TAXES LLC ERO firm name signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am rif you are entering your own PIN and your return is filed using the Practitioner PIN methology.	Ente don now authorizin		
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below	1		
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	Don't ente		8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subrrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	n in accordanc	
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

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

OMB No. 1545-0074

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

person is a child but not your dependent: Vour first name and middle initial VENKATA SURYACHANDRA KALLEPALLT Spouse's social security in Spouse's first name and middle initial Last name ARLTER BURYANSHART IF LIA Foreign country name RALLEPALLT TELLA Apt. no. Apt.	Check only				ed filing separately (N					spou	ise (QSS)	_
VENKATA SURYACHANDRA KALLEFALLT 840-38-2179	one box.	-		-	our spouse. It you cl	hecke	ed the HOH or	QSS box, en	ter th	e child's	name if th	e qualitying
It point naturn, spouser's fist name and middle initial List name Spouser's social security Home address (number and street), if you have a P.O. box, see instructions.	Your first name	and mi	ddle initial	Last nar	me					Your so	cial securit	y number
It point naturn, spouser's fist name and middle initial List name Spouser's social security Home address (number and street), if you have a P.O. box, see instructions.	VENKATA	SUR	YACHANDRA	KALL	EPALLI					840-3	38-217	9
HARTHHA BHUVANESWARI ILLA 792-9-7734 Home actifiers (number and streat). You have a P.O. box, see instructions. Apt. no. Preadental Election Chock Norm (Program Stream). The City, town, or post office. If you have a foreign address, also complete spaces below. TX 75068 TX												
City, town, or post office. If you have a foreign address, also complete spaces below. State	-			ILLA								
Spouse instructions Chief tax needs Chief								Apt. no.				
OAK POINT Foreign country name Foreign province/state/county Foreign postal code Dax below will not how will not ho	101 SAVA	ANNA	H LN									
Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or refund. your tax or refund. Pour Law refund. Your Shades to sexhange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions). Yes Standard Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindess You: Were born before January 2, 1958 Are blind Spouse: Was born before January 2, 1958 Is blind Spouse: (I) First name Last name Spouse: (I) First name Last name (I) (I) First name (I) First name (I) (I) First name (I) (I) Fir				mplete sp	paces below.	Stat	е	ZIP code				
Foreign country name	OAK POIN	JT				TX		75068				
Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes	Foreign country	/ name		F	Foreign province/state/	county	,	Foreign postal	code			•
Assets exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)											You	Spouse
Standard Deduction Spouse itemizes on a separate return or you were a dual-status alien Age/Blindness You: Were born before January 2, 1958 Are blind Spouse: Was born before January 2, 1958 Is blind Spouse itemizes on a separate return or you were a dual-status alien Dependents (see instructions): (1) First name Last name (2) Social security (3) Reliationship (4) Check the box if qualifies for (see instructions in four dependents, see instructions (2) Social security (3) Reliationship (4) Check the box if qualifies for (see instructions 10								-			□Yes	⊠ No
Age/Blindness You: Were born before January 2, 1958 Are blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Spouse: Was born before January 2, 1958 Is blind Child tax credit Credit for other Child tax credit Credit for othe								40001). (000	rioti a	01101101)		
Case instructions Case instructions Case instructions Case instructions Child tax credit Credit for other har four dependents, see instructions and check here Case							Саоронасті					
If more than four dependents, see instructions and check here	Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Janı	ary 2	, 1958	☐ Is bl	ind
Income Income	Dependents	s (see	instructions):			.	` '	ip (4) Check	the bo	x if qualif	ies for (see	instructions):
dependents, see instructions and check here . □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	If more	(1) Fi	rst name Last name		number		to you	Child	tax cr	edit	Credit for oth	ner dependents
see instructions and check here												<u> </u>
Income Income		s ——										
Income 1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 210 Attach Form(s) W-2 here. Also attach Forms W-2 here. Also attach Forms W-2 are Also attach Sch. B (are Also attach Forms Borns B												
Attach Form(s) W-2 here. Also attach Forms W-2 and W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. Z Add lines 1a through 1h Attach Sch. B 2a Tax-exempt interest 2b Taxable amount 4b Taxable amount 5b Taxable amount 5b Taxable amount 5b Taxable amount 6b	here										[<u> </u>
Attach Form(s) W-2 here. Also attach Forms W-2 here. Also attach Forms W-2 and 1099- Ri i tax was withheld. If you did not get a Form W-2, see instructions. Z hattach Sch. B at Frequired. Attach Sch. B asparately. Single or Married filing separately. \$12,950 Married filing plomby or Qualifying sunriving spouse. 198,260 Medicaid waiver payments not reported on Form(s) W-2 (see instructions) Lattach Sch. B asparately. 199- Residue to the frequired of the form the	Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)					1a	21	LO,398.
W-2 here. Also attach Forms W-2G and 1099-Ri f tax was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If was withheld. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you did not get a Form W-2, see instructions. If you decided dividends . 3a b D Taxable interest . 2b D Taxable amount . 5b D Taxable amount . 6b D Taxable amou		b	. ,	•	, ,				-	. 1b		
d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d Taxable dependent care benefits from Form 2441, line 26 1 Taxable dependent care benefits from Form 8839, line 29 1f Employer-provided adoption benefits from Form 8839, line 29 1f Use at Form 1f You did not get a Form 1g Wages from Form 8919, line 6 1g Other earned income (see instructions) 1h Other earned income (see instructions) 1 Tax - exempt interest 2 Tax-exempt i		С	Tip income not reported on line 1a (see instructions)							. 1c		
1099-R if tax was withheld. f Employer-provided adoption benefits from Form 8839, line 29 11f	attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d		
If Employer-provided adoption benefits from Form 8839, line 29 If		е	Taxable dependent care benefits from Form 2441, line 26									
h Other earned income (see instructions) i Nontaxable combat pay election (see instructions) i Data pa		f	Employer-provided adoption bene	fits from	Form 8839, line 29				-	. 1f		
instructions. i Nontaxable combat pay election (see instructions) add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1h b Taxable interest add lines 1a through 1h add lines 1a through 1b b Taxable amount	If you did not	g	Wages from Form 8919, line 6 .						-	. 1g		
Instructions. Instru		h	Other earned income (see instructi	ons) .						. 1h		0.
Attach Sch. B If required. Attach Sch. B If you allow a comparite of the supposition of the suppositio		i	Nontaxable combat pay election (s	see instr	uctions)		<u>li</u>					
If required. 3a Qualified dividends		Z	Add lines 1a through 1h							. 1z	21	LO,398.
4a IRA distributions		2a	Tax-exempt interest	2a		b Ta	xable interest	:	-	. 2b		123.
Standard beduction for—Single or Married filing separately, \$12,950 Married filing jointly or Qualifying surviving spouse, \$25,900 Head of household, \$19,400 If you checked any box under \$25,000 If you checked any box under \$25,000 If you checked any box under \$25,000 Add lines 12 and 13 Add lines 12 and 13 Pensions and annuities . 5a	if required.	3a	Qualified dividends	3a		b Or	dinary divider	nds	-	. 3b		
Single or Married filing separately, \$12,950 Married filing jointly or Qualifying surviving spouse, \$25,900 Head of household, \$19,400 If you checked any box under Standard Deduction, \$250 Add lines 12 and 13 Social security benefits 6a b Taxable amount 6b Taxable amount 7 25 6b Taxable amount 6b Taxable amount 7 25 6b Taxable amount 7 25 Taxable amount 10 Taxable amount 11 225 12 13 14 15 19 16 17 18 19 19 19 19 19 19 19 19 19		4a	IRA distributions	4a		b Ta	xable amoun	t	-	. 4b		
Single or Married filing separately, \$12,950		5a	_	5a		b Ta	xable amoun	t	-	. 5b		
Married filing separately, \$12,950		6a	· -					t		6b		
### Add lines 12, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 12, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income ### Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8.	Married filing	С	If you elect to use the lump-sum e	lection n	nethod, check here	(see i	nstructions)		. L	_		
jointly or Qualifying Surviving spouse, \$25,900 Head of household, \$19,400 If you checked any box under Standard Deduction, Deduction, Deduction, Deduction, Deduction, Deduction, Subtract line 14 from line 11 If zero or less enter -0- This is your total income		7	,		required. If not requ	ıired,	check here		. L	_ 7		25 , 202.
Qualifying surviving spouse, \$25,900 10 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 10 10 Head of household, \$19,400 12 Standard deduction or itemized deductions (from Schedule A) 12 222 If you checked any box under Standard Peduction, \$20 class or \$20 cl		8	,							. 8		L3,441.
Head of household, \$19,400 If you checked any box under Standard Deduction,	Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome				. 9	22	22,282.
Head of household, \$19,400 12 Standard deduction or itemized deductions (from Schedule A)		10	Adjustments to income from Sche	dule 1, li	ine 26					. 10	1	
Standard deduction or itemized deductions (from Schedule A)	Head of	11	Subtract line 10 from line 9. This is	your ac	djusted gross incor	ne				. 11	22	22,282.
any box under Standard 14 Add lines 12 and 13		12	Standard deduction or itemized	deducti	ons (from Schedule	A)				. 12	2	25 , 900.
Standard 14 Add lines 12 and 13		13	Qualified business income deducti	on from	Form 8995 or Form	8995	5-A			13		
	Standard	14								. 14		25 , 900.
See illustractions.	Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our t a	axable incom	e		15	19	96,382.

Form 1040 (202)	2)								Pa	age Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 16	34,80	3.
Credits	17	Amount from Schedule 2, lin	e3					. 17		
	18	Add lines 16 and 17						. 18	34,80	3.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 19		
	20	Amount from Schedule 3, lin	e8					. 20	7,50	0.
	21	Add lines 19 and 20						. 21	7,50	0.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				. 22	27,30	3.
	23	Other taxes, including self-en	mployment tax,	from Schedule	e 2, line 21			. 23		0.
	24	Add lines 22 and 23. This is	your total tax					. 24	27,30	3.
Payments	25	Federal income tax withheld	from:							
-	а	Form(s) W-2				25a	35 , 02	2.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions	s)			25c				
	d	Add lines 25a through 25c						. 25d	35,02	2.
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			. 26		
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	n 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, lin	e 15			31				
	32	Add lines 27, 28, 29, and 31.	. 32							
	33	Add lines 25d, 26, and 32. These are your total payments							35,02	2.
Refund	34	If line 33 is more than line 24							7,71	9.
nerana	35a	Amount of line 34 you want i	refunded to you	ı. If Form 8888	is attached, chec	ck here	[35a	7,71	9.
Direct deposit?	b	Routing number 1 0 1	1 0 0 0	4 5	c Type: 🛛	Checking [Savin	gs		
See instructions.	d	Account number 5 1 8	0 0 7 3	8 3 3 4	4 8					
	36	Amount of line 34 you want a	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go						. 37		
	38	Estimated tax penalty (see in	_	-		38				
Third Party Designee	Do	you want to allow another	person to disc	cuss this retu		See	Comple	ete below.	X No	
Ü		signee's		Phone				entification		_
	na	me		no.		nı	ımber (PI	N)		Ш
Sign Here		der penalties of perjury, I declare tief, they are true, correct, and com								
TICIC	Yo	ur signature		Date	Your occupation				nt you an Identity	
1					SOFTWARE E	'NIC TNIEED	I	see inst.)	IN, enter it here	\neg
Joint return? See instructions.	Sn	ouse's signature. If a joint return, b	oth must sign	Date	Spouse's occupati			•	nt your spouse an	
Keep a copy for your records.	Ор	ouse's signature. If a joint return, L	our must sign.	Date	SOFTWARE E		1		ection PIN, enter it	here
	Ph	one no. (682) 331-455)	Email address	VENKATAKALLEP		.COM			
D-1-I	Pre	eparer's name	Preparer's signat	ure		Date	PTIN	I	Check if:	
Paid	SYAN	 PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	04/05/202	3 P02	082703	Self-employ	ed
Preparer									(678) 965 - 95	
Use Only		m's address 245 ROONE		NSWICK N	J 08816			Firm's EIN	84-31719	
					-				4040	

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

V KALLEPALLI & H ILLA

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

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

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

OII.		Sequence No. 01
	Your soc	al security number
	840-38	-2179

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. Att	ach S	Schedule E .	5	-13,491.
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		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	(1	
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:		F ^		
•	Other Income from box 3 of 1099-Misc 50.	8z	50.		
9	Total other income. Add lines 8a through 8z			10	50.
10	-Compine lines i infolion / and 9. Enter here and on Form 1040-1040-SE	iorl	U4U-IVK IIIIA X	1 70	1 3 _ 4 4 1

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

Par	II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b			
	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	, , , , , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	' ' '	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade			
		4e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	4g		
h	Attorney fees and court costs for actions involving certain unlawful			
	,	4h		
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			
		24i	_	
J		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	41-		
_	,	4k	_	
Z	Other adjustments. List type and amount:	4z		
25			05	
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 . E		26	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u> </u>		

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR V KALLEPALLI & H ILLA

Your social security number 840-38-2179

Par	Nonrelundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 244 Form 2441	•		2	
3	Education credits from Form 8863, line 19			3	
4	Retirement savings contributions credit. Attach Form 8880			4	
5	Residential energy credits. Attach Form 5695			5	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a			
b	Credit for prior year minimum tax. Attach Form 8801	6b			
С	Adoption credit. Attach Form 8839	6c			
d	Credit for the elderly or disabled. Attach Schedule R	6d			
е	Alternative motor vehicle credit. Attach Form 8910	6e			
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	7,500.		
g	Mortgage interest credit. Attach Form 8396	6g			
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h			
i	Qualified electric vehicle credit. Attach Form 8834	6i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j			
k	Credit to holders of tax credit bonds. Attach Form 8912	6k			
-1	Amount on Form 8978, line 14. See instructions	61			
Z	Other nonrefundable credits. List type and amount:				
		6z			
7	Total other nonrefundable credits. Add lines 6a through 6z $$. $$.			7	7,500.
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040 line 20	-SR, 	or 1040-NR,	8	7 , 500.

(continued on page 2)

Schedule 3 (Form 1040) 2022 Page **2**

Par	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	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	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	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 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	

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Internal Revenue Service Name(s) shown on return Your social security number 840-38-2179 V KALLEPALLI & H ILLA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 338,687. 325,428. 11,943. 25,202. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 25,202. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

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

BAA

14

15

Schedule D (Form 1040) 2022 Page 2

Part III Summary 25,202. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number
V KALLEPALLI & H ILLA	840-38-2179

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)

-	Short-term transactionsShort-term transactions			-	sis wasn't report	ed to the IF	RS		
1	(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
,	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
Robinh	ood Securities LLC	01/01/22	12/31/22	279,758.	270,570.	W	9,388.	18,576.	
Robinh	good Securities LLC	01/01/22	12/31/22	58,929.	54,858.	W	2,555.	6,626.	
nega Sche	s. Add the amounts in column ive amounts). Enter each tot dule D, line 1b (if Box A above a is checked) or line 3 (if Box	al here and inc e is checked), li i	lude on your ne 2 (if Box B	339 697	325 //28		11 9/13	25 202	

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.

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

V K	ALLEPALLI & H ILLA						840-3	8-2179	
Par	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal property rental income or loss from Form 4835 on page 2, line 40.			C. See	instruc	ctions. If you a	are an indiv	vidual, rep	ort farm
	Did you make any payments in 2022 that would require you to								
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical address of each property (street, city, state, ZIP	code)							
Α	15-5-17C, BAPUJI NAGAR KOVVUR, WEST GODA	AVARI	ANDH	RA PI	RADES	SH IN 53	4350		
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate property above, report the number of fair re	ental and	d		Fa	ir Rental Days	Person Da		QJV
Α	personal use days. Check the QJV		nly [Α		365		0	
В	if you meet the requirements to file qualified joint venture. See instruct			В					
С				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Renta Multi-Family Residence 4 Commercial		Land Roya	lties		Self-Rental Other (desc	ribe)		
						Propert	es:		
Incor	ne:			Α		В			С
3	Rents received	3		6	57.				
4	Royalties received	4							
Expe	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		2,9	87.				
8	Commissions	8							
9	Insurance	9							
10	-9	10							
11		11		2,6	52.				
12	5.5	12							
13	_	13							
14		14			96.				
15		15		2,7	63.				
16		16			- 0				
17		17		2,8	50.				
18		18							
19		19		1 1 1	4.0				
20		20		14,1	48.				
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 , 4	91.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (-	13,49	91.)	′)	()
23a	Total of all amounts reported on line 3 for all rental properti	ties .			23a		657.		
b	Total of all amounts reported on line 4 for all royalty proper	rties .			23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	14	,148.		
24	Income. Add positive amounts shown on line 21. Do not it	include	any lo	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate	losses f	from lin	e 22. E	nter to	tal losses he	re 25	(13,491.)
26	Total rental real estate and royalty income or (loss). Cohere. If Parts II, III, IV, and line 40 on page 2 do not ap Schedule 1 (Form 1040), line 5. Otherwise, include this amount	pply to	you, a	also er	nter th	is amount o			-13,491.

Form **8936** (Rev. January 2023)

Department of the Treasury

Internal Revenue Service

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles and New Clean Vehicles)

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Note: This credit is for qualified plug-in electric drive motor vehicles placed in service before 2023, qualified two-wheeled plug-in electric vehicles acquired before but placed in service in 2022, and new clean vehicles placed in service after 2022. See separate

OMB No. 1545-2137

Attachment Sequence No. **69**

%

Name(s) shown on return

V KALLEPALLI & H ILLA

Identifying number 840-38-2179

100.00 %

7,500.

instructions for vehicle definitions and other requirements. **Tentative Credit** Use a separate column for each vehicle. If you need more columns, (a) Vehicle 1 (b) Vehicle 2 use additional Forms 8936 and include the totals on lines 12 and 19. TESLA 1 Year, make, and model of vehicle . . . 1 Υ 2 Vehicle identification number (see instructions) 2 7SAYGDEE9NF385550 3 Enter date vehicle was placed in service (MM/DD/YYYY) 3 04/28/2022 If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see instructions 4a 7,500.

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

4b

4c

Part II Credit for Business/Investment Use Part of Vehicle					
5	Business/investment use percentage (see instructions)	5		%	%
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6			
7	Section 179 expense deduction (see instructions) .	7			
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 10% (0.10)	9			
10	Maximum credit per vehicle	10	2	2,500	2,500
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11			
12	Add columns (a) and (b) on line 11			12	
13	Qualified plug-in electric drive motor vehicle credit from partnerships and S corporations (see instructions)			13	
14	Business/investment use part of credit. Add lines 12 and 13. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y				

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

Phase-out percentage (see instructions)

c Tentative credit. Multiply line 4a by line 4b

Form 8936 (Rev. 1-2023) Page **2**

Part III **Credit for Personal Use Part of Vehicle** (a) Vehicle 1 (b) Vehicle 2 15 If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 7,500. blank and go to line 18 15 16 Multiply line 15 by 10% (0.10) 16 17 Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10 17 18 For vehicles with four or more wheels placed in service before 2023, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17. For vehicles placed in service after 7,500. 2022, see instructions 18 19 Add columns (a) and (b) on line 18 19 7,500. 20 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 . . . 20 34,803. 21 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 21 22 Subtract line 21 from line 20. If zero or less, enter -0- and stop here. You cannot claim 22 34,803. 23 Personal use part of credit. Enter the smaller of line 19 or line 22 here and on Schedule 3 (Form 1040), line 6f. If line 22 is smaller than line 19, see instructions . . . 7,500. 23

REV 03/22/23 PRO Form **8936** (Rev. 1-2023)