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

	5.5.1.05				
Submis	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
BABY	RAM SAROJA CHADALAVADA	815-16	-638	4	
Spouse's		Spouse's soo			r
Dout	Toy Datums Information Toy Voor Ending December 24			به مانات مانا	<u> </u>
Part		ter year you a	ire au	tnorizing.	.)
	whole dollars only on lines 1 through 5.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank. Adjusted gross income		1	1 102	,522.
	Total tax		2		,522. ,574.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		
	Amount you want refunded to you		4		,840. ,266.
	Amount you owe		5		,200.
Part		d keep a cop		our retu	rn)
Under pmy knoreturn (cto send for any Agent to paymen authoriz paymen busines taxes to persona Electror	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboriginal or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the foliation of the financial institution account in the financial institution account in the financial institution account in the financial institution in the financial institution in the financial institution in the financial institution accounts at the financial institution accounts a factor of the financial institution in	ed) I am now authorized and smitter, or electrejection of the transmitter, or electrejection of the transmitter, or electrejection of the transmitter of the transmitter of the electric equests must be processing of the processing of the processing of the electric equests must be payment. I further am now authorized the my PIN	thorizin ounts 1 onic refransmis nd its (aax preparation.) The receiff the elther actizing a fee of the entry attention. The receiff the elther actizing a fee of the entry attention o	g, and to the from the inturn original sision, (b) the designated or correction to this acctor or evoke (exed no late ectronic packnowledge and, if applied a late and the rall zeros areas and the sision or execution of the sision or execution of the sision or execution or execu	ne best of come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of e that the cable, my as my
0	ala DINI, alarah aya kasa ayin				
Spous	e's PIN: check one box only	DINI			
	I authorize to enter or general to enter or general	-	tor five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.			er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I amif you are entering your own PIN and your return is filed using the Practitioner PIN me below.				
Spouse	e's signature ▶ Date ▶				
<u> </u>	Practitioner PIN Method Returns Only—continue belo	w			
Part I					
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4 9	6 3	1 9 8	9
		Don't ent	- -		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income ed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am sulnents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	omitting this retu	urn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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



OMB No. 1545-007

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

Filing Status Check only one box.	If you	single Married filing jointly u checked the MFS box, enter the name on is a child but not your dependent	ame of y	ed filing separately (,	_	householo	,	_	spou	fying surv se (QSS) name if th	Ü	
Your first name		, ,	Last na	me					You	ur soc	ial securit	v number	
BABY RAM				ALAVADA							.6-6384	•	
		first name and middle initial	Last nai							Spouse's social security number			
•		r and street). If you have a P.O. box, see	instruction	ons.			Apt.	no.	- 1			on Campaign	
1718 RIV					1.						ere if you, f filing ioin	or your tly, want \$3	
	ost offic	e. If you have a foreign address, also co	mplete s _l	paces below.	Sta		ZIP code					Checking a	
SALEM					VA		24153				w will not	0	
Foreign country	name			Foreign province/state	/count	у	Foreign po	ostal cod	e you	ır tax	or refund.	Spouse	
Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward, award, or	payn	nent for prope	rty or ser	vices);	or (b) s	sell,			
Assets	exch	ange, gift, or otherwise dispose of a		<u>-</u> _	intere	est in a digital	asset)? (S	See inst	ructio	ns.)	∐ Yes	⊠ No	
Standard		eone can claim: You as a de		•		a dependent							
Deduction		Spouse itemizes on a separate return	n or you	were a dual-status	alien								
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse:	: Was bor	n before	Januar	/ 2, 19	58	☐ Is bli	nd	
Dependents	•	ŕ		(2) Social securit	у	(3) Relationsh	iib I.,				•	instructions):	
If more	(1) Fi	rst name Last name		number		to you		Child tax	credit	(Credit for oth	ner dependents	
than four dependents,										_	L	╡──	
see instructions										_	L	╡──	
and check here											L		
	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions)						1a	1 11	 L6,264.	
Income	b	Household employee wages not re	,	,					·	1b		.0/201.	
Attach Form(s)	С	Tip income not reported on line 1a		, ,						1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see	instru	ctions)				1d			
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, line 26						1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .								1g			
get a Form	h	Other earned income (see instructi	ons) .							1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		1i							
instructions.	z	Add lines 1a through 1h								1z	11	16,264.	
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	t			2b		358.	
if required.	3a	Qualified dividends	3a		b 0	rdinary divide	nds			3b			
	4a	IRA distributions	4a		b Ta	axable amoun	t			4b			
Standard	5a	Pensions and annuities	5а		b Ta	axable amoun	t			5b			
Deduction for— Single or	6a	Social security benefits	6a		b Ta	axable amoun	t			6b			
Married filing	С	If you elect to use the lump-sum e	lection r	method, check here	(see	instructions)							
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if	required. If not req	uired,	check here				7	-	-3 , 000.	
Married filing	8	Other income from Schedule 1, lin	e 10 .							8	-1	10,100.	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come					9	10)3 , 522.	
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, l	ine 26						10			
Head of	11	Subtract line 10 from line 9. This is	•	-						11)3 , 522.	
household, \$19,400	12	Standard deduction or itemized	deducti	ions (from Schedule	e A)					12	1 1	L2 , 950.	
If you checked any box under	13	Qualified business income deducti								13			
Standard	14	Add lines 12 and 13								14		L2 , 950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is	your t	axable incom	ie			15	<u> </u>	90,572.	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		16	15,574.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17						18	15 , 574.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	15 , 574.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	15 , 574.
Payments	25	Federal income tax withheld							
•	а	Form(s) W-2				25a 17	,840.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	17,840.
16	26	2022 estimated tax paymen	ts and amount a	pplied from 20)21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	17,840.
Refund	34	If line 33 is more than line 24						34	2,266.
neiuliu	35a	Amount of line 34 you want	refunded to you	u. If Form 8888	3 is attached, che	eck here		35a	2,266.
Direct deposit?	b	Routing number 0 1 1	9 0 0 2	5 4	c Type:	Checking	Savings		
See instructions.	d	Account number 0 0 3	8 5 2 4	3 6 8 6	6 1				
	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						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another structions	person to disc	cuss this retu	rn with the IRS		omplete b	elow.	X No
		signee's		Phone			onal identifi	cation [
	naı			no.			ber (PIN)		
Sign Here	bel	der penalties of perjury, I declare tief, they are true correct and com			r than taxpayer) is b		on of which	prepare	er has any knowledge.
	Yo	ur signature		Date	Your occupation		Prote	ction PII	nt you an Identity N, enter it here
Joint return?						SS ANALYST	(see ii	ist.)	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupa	tion		ty Prote	nt your spouse an ection PIN, enter it here
	——Ph	one no. (908) 200-683	8	Email address	ZARO.TACHADAT	LAVADA@GMAIL.C			
		eparer's name	Preparer's signat		DUITORCIIADAI	Date	PTIN		Check if:
Paid		I PRIYA RAM SAGAR GUPTA TALLAM			מווסיים יים דו זאת		P02082	703	Self-employed
Preparer		m's name GLOBAL TA		IMIN DAGAN	COLITY TAULAIN	1 01/00/2023	Phone		678) 965-9522
Use Only			Y CT E BRU	INSWICK N	J 08816		Firm's		84-3171965
0-1				7.1.0 VV I CIC IN			1 111113	, <u></u>	•
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/22/23 PRO			Form 1040 (202

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

Name	s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	ocial s	ecurity number
BABY	RAM SAROJA CHADALAVADA		815-1	L6-63	884
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. Attack			5	-10,100.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	· •	a (
b	Gambling			_	
С	Cancellation of debt	_	,	-	
d	<u> </u>	d (
е	Income from Form 8853	_		-	
f	Income from Form 8889				
g	Alaska Permanent Fund dividends				
h	Jury duty pay				
į.	Prizes and awards	_		-	
J.	Activity not engaged in for profit income			-	
	Stock options	K		-	
I	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 8				
	for profit but were not in the business of renting such property Olympic and Paralympic medals and USOC prize money (see	ol		-	
m	instructions)	m			
n	Section 951(a) inclusion (see instructions)	_		-	
0	Section 951A(a) inclusion (see instructions)			-	
р	Section 461(I) excess business loss adjustment	_		-	
q	• • • • • • • • • • • • • • • • • • • •	q			
r	Scholarship and fellowship grants not reported on Form W-2 8	•			
	Nontaxable amount of Medicaid waiver payments included on Form	•			
	1040, line 1a or 1d	s (,		
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan				
	Wages earned while incarcerated	u			
Z	Other income. List type and amount:				
	8	7			

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

10

-10**,**100.

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-basis gov			
	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 8l 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		-	
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)		-	
- 1	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			
	tax law violations			
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
k	1041)			
-	Other adjustments. List type and amount:			
Z	04-			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here		23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
		· · ·		

SCHEDULE D (Form 1040)

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.

OMB No. 1545-0074

Attachment

Department of the Treasury Internal Revenue Service

Sequence No. 12 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Name(s) shown on return Your social security number 815-16-6384 BABY RAM SAROJA CHADALAVADA 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 21,245. 26,465. -5,220.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 -5,220.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 0. 9 Totals for all transactions reported on Form(s) 8949 with 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 -5,220. 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 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.) • (\$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.

8949 Form

Sales and Other Dispositions of Capital Assets

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

815-16-6384

BABY RAM SAROJA CHADALAVADA

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.

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

(C) Short-term transactions	not reported	to you on F	orm 1099-B	·			
1 (a) Description of property	(b) Date acquired	(c) Date sold or		(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).
ROBINHOOD CRYPTO LLC	01/01/22	12/31/22	21,245.	26,465.			-5,220.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	21.245.	26.465.			-5.220.

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

Form 8949 (2022) 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 BABY RAM SAROJA CHADALAVADA

Social security number or taxpayer identification number 815-16-6384

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•)
(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 c See the sep	f any, to gain or loss amount in column (g), ode in column (f). parate 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).
ROBINHOOD SECURITIES LLC	01/01/21	12/31/22	4.	4.			0.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	4.	4.			0.

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.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

OMB No. 1545-0074

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

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

2022	
Attachment Sequence No. 13	

Your social security number

BAB:	RAM SAROJA CHADALAVADA						815-1	6-6384	i
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you a	re an indi	vidual, rep	oort farm
	Did you make any payments in 2022 that would require you								es 🔀 No
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, ZIF	code	e)						
Α	VENGAL RAO NAGAR HYDERABAD TELANGANA I	N 50	0038						
В	VENOLE TO MINING MEDITAL TELEVISION IN THE								
C									
1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair in the first propert in the number of fair in the first property above.	rental a	and		Fa	ir Rental Days		nal Use iys	QJV
Α	personal use days. Check the Qu			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	quaimed joint venture. Gee institu	ICTIONS	•	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Reni	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (descri	ibe)		
						Propertie			
Incor	ne.	+		Α		В			С
3	Rents received	3			50.				
4	Royalties received	4			30.				
	nses:	-							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		7	50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,3	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,9	50.				
15	Supplies	15		2,6	50.				
16	Taxes	16							
17	Utilities	17		1,9	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		10,6	50.				
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	_	-10,1	00				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22		10,10		()	(
23a	Total of all amounts reported on line 3 for all rental prope	-			23a	•	550.		
b	Total of all amounts reported on line 4 for all royalty properties				23b				
C	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	10	,650.		
24	Income. Add positive amounts shown on line 21. Do no						. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	tal losses her		(10,100.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not a Schedule 1 (Form 1040), line 5. Otherwise, include this ar	apply	to you, a	also er	nter th	is amount o			-10,100.

Department of the Treasury

Passive Activity Loss Limitations

See separate instructions.

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

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

Identifying number

Internal Revenue Service Name(s) shown on return

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

BABY	RAM SAROJA CHADALAVADA				815	-16-	-6384
Par	t I 2022 Passive Activity Loss	S					
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
	Real Estate Activities With Active Parance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amorprior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, c ne amount from Pa	olumn (b)) art IV, column (c))	1b (0. 10,100.))	1d	-10,100.
All Otl	her Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amorprior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (2c () 	2d	
3	Combine lines 1d and 2d. If this line i all losses are allowed, including any losses on the forms and schedules no	s zero or more, sto prior year unallow	op here and inclu	de this form with y on line 1c or 2c.	our return;	3	-10,100.
	If line 3 is a loss and: • Line 1d is a l • Line 2d is a l on: If your filing status is married filing. Instead, go to line 10.	loss (and line 1d is	,,			year,	do not complete
Part		ntal Real Estate	Activities With	Active Participa	ation		
· ai	Note: Enter all numbers in Par			-			
4	Enter the smaller of the loss on line 1	·				4	10,100.
5	Enter \$150,000. If married filing separ	ately, see instructi	ons	5 1	50,000.		, , , , , , , , , , , , , , , , , , , ,
6	Enter modified adjusted gross income	•			13,622.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.				•		
7	Subtract line 6 from line 5			7	36,378.		
8	Multiply line 7 by 50% (0.50). Do not en					8	18,189.
9	Enter the smaller of line 4 or line 8					9	10,100.
Part							
10	Add the income, if any, on lines 1a an					10	0.
11	Total losses allowed from all passiv						10 100
Dout	out how to report the losses on your t			· · · · · · ·		11	10,100.
Part	IV Complete This Part Before	e Part I, Lines I	a, ib, and ic. S	tee instructions.			
	Name of activity		nt year	Prior years	Ove	rall ga	ain or loss
		(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gair	1	(e) Loss
VENC	GAL RAO NAGAR	0.	10,100.				10,100.
				I			

10,100.

0.

BAA

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

Form 8582 (2022) Page **2**

,									. 490 🗕	
Part V Complete This Part Befor	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instrud	ctions.				
N		Currer	nt year		Prior y	ears	Overa	II gain or loss		
Name of activity	(a	Net income (line 2a)	(b) (li	Net loss ne 2b)	(c) Unall loss (lin	owed e 2c)	(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c										
Part VI Use This Part if an Amour			Part II,	, Line 9. S	ee instrud	tions.				
Name of activity	an to	Form or schedule and line number to be reported on (see instructions)) Loss (b) Rati		atio	(c) Special allowance		(d) Subtract column (c) from column (a).	
VENGAL RAO NAGAR		E Ln 22		10,100.	1.0000	0000	10,100.		0.	
Total				10,100.	1.0	0	10,10	0.	0.	
Part VII Allocation of Unallowed L	.089			S.						
Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	(b) Ratio		(с	(c) Unallowed loss	
Total							1.00			
Part VIII Allowed Losses. See instr	ucti	ons.								
Name of activity	Form or sched and line numb to be reported (see instructio		nber ed on	(a) Loss		(b) Unallowed loss		(c) Allowed loss		
Total		. <u></u>								

2022 VA760CG Page 1





Page 1 of 2

BABY RAM SAR CHADALAVADA

1718 RIVERVIEW DR

SALEM	VA 24153

SSN-You CHAD		815166384	Vendor ID	1555	2	xxxxx
SSN - Spouse						
Fed Adj Gross Income (FAGI)	1.	103522.	Withholding (VA) - Yo	ou	19A.	6001.
Additions	2.		Withholding (VA) - Sp	oouse	19B.	
Subtotal	3.	103522.	Estimated Payments		20.	
Age Deduction - You	4A.		2021 Overpayment		21.	
Age Deduction - Spouse	4B.		Extension Payments		22.	
Soc Sec & Tier 1 Railroad	5.		Credit - Low-Income	or EIC	23.	
State Income Tax Overpayment	6.		Credit - Schedule OS	С	24.	
Subtractions	7.		Credits - Schedule CF	₹	25.	
Subtotal Subtractions	8.		Total Payments / Cre	dits	26.	6001.
Total VA Adj Gross Income (VAGI)	9.	103522.	Tax You Owe		27.	
Itemized Deductions - VA Sch A	10.		Tax Overpayment		28.	819.
Standard Deduction	11.	8000.	Overpayment Credite	d to Next Year	29.	
Exemptions	12.	930.	VAC - Virginia 529 / A	ABLE	30.	
Deductions	13.		VAC - Other Contribu	tions	31.	
Subtotal (Deductions & Exemptions)) 14.	8930.	Addition to Tax, Pena	Ity & Interest	32.	
VA Taxable Income	15.	94592.	Sales and Use Tax		33.	
Amount of Tax	16.	5182.	Amount You Owe			
Spouse Tax Adjustment (STA)	17.		Will Pay by Credit/Debit Your Refund	Card N	1	819.
VAGI - Spouse	17A.		David Davidson #			011000254
Net Amount of Tax	18.	5182.	Bank Routing # Bank Account #	(C 003852	011900254 2436861

__LAR __DLAR __DTD __LTD \$_____





ı			
Filing Status, Age &	& License Infor	mation	Additional Filing Information
Filing Status		1	Locality 161
Federal Head of H	ousehold		Uninsured & Authorize DMAS
DOB - You		03141992	Name or Filing Status Change
VA Driver's Licens	e ID - You	В69769222	Address Change
VA Driver's Licens	e - Iss. Date - You	08182022	VA Return Not Filed Last Year
Spouse Name (Fil	ing Status 3 Only)		Dependent on Another's Return
DOD 0			Farmer / Fisherman / Merchant Seaman
DOB - Spouse	- ID Consum		Amended
VA Driver's Licens			Reason Code
VA Driver's Licens			Overseas on Due Date
Exemptions (A) You	Ex 1	emptions (B) 65 & Over - You	Federal EIC & Amount
Spouse		65 & Over - Spouse	Deceased Indicator
Dependents		Blind - You	Form 760C or 760F
Total (A)	1	Blind - Spouse	No Sales & Use Tax Due Indicator X
		Total (B)	Obtain Electronic 1099G
	Cor	ntact Information	ID Theft PIN
	declare under penalt	y of law that I (we) have examined this re	eturn & to the best of my (our) knowledge, it is a true, correct & complete return. If you are requesting direct that the information provided is for a domestic account within the territorial jurisdiction of the United States.
Signature - You		Date	9082006838 Phone - You
Signature - Spouse			Phone - Spouse
Signature - Preparer <u>S</u>	YAM PRIYA RAM S	AGAR GUPTA TALLAM Date	040823 6789659522 Phone - Preparer
The Tay Department may discuss my/our return with my/our preparer			7 P02082703

Preparer Information

NJ 08816

Page 2 of 2

GLOBAL TAXES LLC

245 ROONEY CT

E BRUNSWICK

1555 REV 02/17/23 PRO

The Tax Department may discuss my/our return with my/our preparer.

File by May 1, 2023 Include Page 1, Page 2 and all

supporting 760CG documents.

2022 Schedule INC/CG

815166384

Report all W-2s, 1099s & VK-1s with VA Withholding

BABY RAM SAR CHADALAVADA



Your/ Spouse SSN	Withholding Type			VA Wages, tips, other comp.	
Γ					コ
815166384	W	2355.	461025710	30461025710F001	45474.
815166384	W	3646.	363478837	30363478837F001	70790.

Total VA Withholding	SSN	VA Withholding
You	815166384	6001.
Spouse		
Total # of W-2s,1099s & VK-1s	02	

VA-8879 Virginia Department of Taxation

Virginia Individual Income Tax e-File Signature Authorization

Tax Year 2022

DO NOT SEND THIS VA-8879 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

Virgi	nia Submission Identification Number (SID)					
Your	Name	B Your Social Sec	curity Number			
BAB	Y RAM SAROJA CHADALAVADA	815-16-63	84			
	ise's Name	A Spouse's Socia				
Part	I Tax Return Information	A Spouse	B Yourself			
1.	Federal Adjusted Gross Income (Form 760CG, Line 1; 760PY, Line 1, columns A & B; Form 763, Line 1)		103522.			
2.	Virginia Adjusted Gross Income (Form 760CG, Line 9; 760PY, Line 10, columns A & B; Form 763, Line 9)		103522.			
3.	Taxable Income (Form 760CG, Line 15; 760PY, Line 16, columns A & B; Form 763, Line 17)		94592.			
4.	Virginia Income Tax (Form 760CG, Line 18; 760PY, Line 17, columns A & B; Form 763 Line 18)		5182.			
5.	Withholding (Form 760CG, Line 19a & 19b; 760PY, Lines 19a & 19b; Form 763, Lines 19a & 19b)		6001.			
6.	Amount you Owe (Form 760CG, Line 35; Form 760PY, Line 35; Form 763, Line 35)					
7.	Refund (Form 760CG, Line 36; 760PY, Line 36; Form 763, Line 36)		819.			
Part	II Declaration of Taxpayer and Signature Authorization r penalties of perjury, I declare that I have examined a copy of my individual income tax return and accompanying so					
Returnumb filling liable Virgir refund of the	December 31, 2022, and to the best of my knowledge and belief, it is true, correct and complete. I further declare that the information I provided to my Electronic Return Originator (ERO), Transmitter, or Intermediate Service Provider (including my name, address and social security number or individual tax identification number) and the amount shown in Part I above agree with the information and amounts shown on the corresponding lines of my electronic income tax return. If I am filing a balance due return, I understand that if the Virginia Department of Taxation (Virginia Tax) does not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and penalties. I authorize my ERO, Transmitter or Intermediate Service Provider to transmit my complete return to Virginia Tax. I have selected a personal identification number (PIN) as my signature for my electronic income tax return and, if applicable, the direct deposit of my refund or direct debit of my tax due. In choosing either direct deposit or direct debit, I certify that the transaction does not directly involve a financial institution outside of the territorial jurisdiction of the United States at any point in the process. Taxpayers may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.					
	ayer's e-File PIN: check one box only					
I authorize the ERO named below to enter my e-File PIN 6 6 3 8 4 as my signature on my 2022 e-filed Virginia individual income tax return.						
	Do not enter all zeros					
	GLOBAL TAXES LLC					
	ERO Firm Name I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this box	only if you are entering	vour own a File DIN			
	and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	only if you are entering	your own e-rile rill			
Your	Signature Date					
1	ise's e-File PIN: check one box only					
I authorize the ERO named below to enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Do not enter all zeros						
	ERO Firm Name					
I will enter my e-File PIN as my signature on my 2022 e-filed Virginia individual income tax return. Check this box only if you are entering your own e-File PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.						
	Spouse's Signature Date					
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. 2 2 2 4 9 6 3 1 9 8 9						
Do not enter all zeros I certify that the above numeric entry is my ERO EFIN/PIN, which is my signature for the 2022 Virginia individual income tax return 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 Virginia's publication Handbook for Electronic Filers of Individual Income Tax Returns (Tax Year 2022). EROs may sign the form using a rubber stamp, mechanical device, such as a signature pen, or computer software program.						
ERO'	s Signature Date04-08	8-23				