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

Submis	ssion Identification Number (SID)		•		
Taxpaye	r's name	Social securit	y numl	per	
SHOU	JRYA BADAM	293-97-	-984	6	
Spouse's	s name	Spouse's soc	ial sec	urity numb	er
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re au	thorizing	J.)
Enter v	whole dollars only on lines 1 through 5.	, ,			,
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			ı	
	Adjusted gross income		1		3,998.
	Total tax		2		2,343.
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 4		5,151.
	Amount you owe		5		2,808.
Part		ceep a cop	_	our ret	urn)
return (or to send for any Agent to payment authorize payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requise days prior to the payment (settlement) date. I also authorize the financial institutions involved in the particle receive confidential information necessary to answer inquiries and resolve issues related to the particle receive.	itter, or electro ection of the tr S. Treasury are cated in the tr in to debit the the authoriza- uests must be processing of ayment. I furt	onic reansmind its of an archiver archiverarchiver archiver archiverarchiver archiverarchiver archiverarchiver archiverarchiver archiverarchiver archiverarchiver archiverarchiver archiver archive	turn origin ssion, (b) designated paration so to this acc To revoke ved no la ectronic p knowledg	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of the that the
	nic Funds Withdrawal Consent.				1
	yer's PIN: check one box only I authorize GLOBAL TAXES LLC to enter or generate i	7 DIN	9 8	3 4 6	00 0001
×	ERO firm name	ř Ent		digits, but er all zeros	as my
	signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN methology.				
Your si	ignature ▶ Date ▶				
Snous	e's PIN: check one box only				
Ороцз	I authorize to enter or generate	my PIN			as my
	ERO firm name	Ent		digits, but	j ao 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 am notifyou are entering your own PIN and your return is filed using the Practitioner PIN methology.				
Spouse	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	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 Don't ente	6 6	-	8 9
		2311 (0110	un 20	50	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Inc.	itting this retu	rn in a	accordanc	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To D	o So			

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

2022

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the na	ame of y	ed filing separately (l	,	_		,	, _	spou	ifying surv use (QSS) name if th	Ü	
V		on is a child but not your dependent								· · · · · · · · · · · · · · · · · · ·	-1-1		
Your first name	and mi	ddie Initial	Last nar								cial securit	•	
SHOURYA	201100'0	first name and middle initial	BADA Last nar						-		97-984	o curity number	
ii joint return, s	Jouse s	s first name and middle initial	Lastriai	Tie						Spouse	s social sec	arity number	
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			1	Apt. no.		Preside	ntial Election	on Campaign	
5325 DON	· IEHO(COURT									ere if you,		
City, town, or post office. If you have a foreign address, also co			mplete s	paces below.	Sta	te	ZIP c	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a			
ALPHARET	TΑ				GA	Δ	300	05			tnis tuna. ow will not		
Foreign country			F	oreign province/state/	count/	у	_	gn postal c	_		or refund.	U	
											You	Spouse	
Digital Assets		ny time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a	,				•			,	Yes	X No	
Standard		eone can claim: You as a de		<u>_</u>		a dependent	abbot	7. (000 11	ioti ac	110110.)			
Deduction		Spouse itemizes on a separate return		•		а асренает							
		Were born before January 2, 1	958 _	Are blind Sp	ouse	: Was bor					Is bl		
Dependents				(2) Social security number	/	(3) Relationsh	nip (4	•			•	instructions):	
If more	(1) Fi	rst name Last name		number		to you		Child t	ax cre	dit	Credit for oth	her dependents	
than four dependents,								l			L	┽──	
see instructions	s ——							l	 		L		
and check here							_		<u> </u>				
nere	4.	Talalana al francis Esperis M.O. Is								4-			
Income	1a	Total amount from Form(s) W-2, bo	,	,						1a		97,440.	
Attach Form(s)	b	Household employee wages not re	•	, ,			٠.			1b			
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)							1c				
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d					
1099-R if tax	e	Taxable dependent care benefits from Form 2441, line 26							1e 1f				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29											
If you did not get a Form	g	Wages from Form 8919, line 6 .								1g		0.	
W-2, see	h i	Other earned income (see instruction (see instruction)	,	· · · · · ·			· ·			1h		<u> </u>	
instructions.	=	Nontaxable combat pay election (s Add lines 1a through 1h	see ii isti	uctions)						1z		97,440.	
Attach Cab D	z 2a	J	2a	· · · · · i	 Ь Т	axable interest				2b	-	<i>//,</i> 440.	
Attach Sch. B if required.	2a 3a	. –	3a	10.		rdinary divide				3b		10.	
	4a		4a	10.		axable amoun				4b			
Standard	-та 5а		5a			axable amoun				5b			
Deduction for—	6a		6a			axable amoun				6b			
Single or Married filing	С	If you elect to use the lump-sum el	_	nethod check here					_				
separately,	7	Capital gain or (loss). Attach Scheo		•	•	,				7		-227.	
\$12,950 Married filing	8	Other income from Schedule 1, line								8		-8 , 225.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								9		38,998.	
Qualifying spouse,	10	Adjustments to income from Sche		•						10		,0,000.	
\$25,900 • Head of	11	Subtract line 10 from line 9. This is	-							11	9	38 , 998.	
household,	12	Standard deduction or itemized	-							12		12,950.	
\$19,400 • If you checked	13	Qualified business income deducti		•	,					13	+ -	, JJU.	
any box under	14	Add lines 12 and 13								14	1	12,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If zer								15		76,048.	
see instructions.	. •		_ 0. 1000	-,o. o i iiio io j	,							0,010.	

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	12,343.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	12,343.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	12,343.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	12,343.
Payments	25	Federal income tax withheld from:		
•	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	15 , 151.
16	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	15,151.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	2,808.
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	2,808.
Direct deposit?	b	Routing number 0 5 3 0 0 0 1 9 6 c Type: X Checking Saving	s	
See instructions.	d	Account number 2 3 7 0 3 1 0 6 3 9 5 7		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the amount you owe .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee [*]		structions	e below.	X No
		signee's Phone Personal ide		
	nar	· ·	,	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of wh		
Here		21		nt you an Identity
		Pr		N, enter it here
Joint return?		LEAD CONSULTANT (Se	ee inst.)	
See instructions. Keep a copy for	Sp			nt your spouse an
your records.			entity Prote ee inst.)	ection PIN, enter it here
	— Dh		,	
		one no. (980) 339-1755 Email address SHOURYA.BADAM@GMAIL.COM paparer's name Preparer's signature Date PTIN		Check if:
Paid			82703	Self-employed
Preparer				
Use Only				678) 965-9522
0-1		'	rm's EIN	84-3171965
GO TO WWW.Irs.g	ov/Forn	n1040 for instructions and the latest information. BAA REV 02/10/23 PRO		Form 1040 (2022)

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

SHOURYA BADAM

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 social security number 293-97-9846

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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	-8,225.
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		
_	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	The second secon			
	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 three tables	8z		
9	Total other income. Add lines 8a through 8z		9	0 005
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	or 1040-INH, line 8	10	-8,225.

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 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 Sequence No. **12**

Department of the Treasury Internal Revenue Service

SHOURYA BADAM

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 293-97-9846

	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa					e ins	tructions)
lines This	See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (d) Proceeds (sales price) (or other basis) (g) Adjustments to gain or loss from (s) 8949, Pal line 2, column (s)					
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	7,255.	7,366.			-111.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	2,591.	2,650.			-59.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (l	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	•		usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	ny, from line 8 of y			6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis				7	-170.
Par	t II Long-Term Capital Gains and Losses—Ge	nerally Assets H	leld More Than	One Year	(see i	instructions)
	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
This whol	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, line 2, colum	Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	3,965.	4,097.		75.	-57.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	,				
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8a	a through 14 in co	lumn (h). Then, go	to Part III		

BAA

Schedule D (Form 1040) 2022 Page 2

Part III Summary -227. 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 227.) 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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X 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

Attachment

OMB No. 1545-0074

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. Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
SHOURYA BADAM	293-97-9846

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

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 broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	See the separate instructions.		enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.			from column (d) and combine the result with column (g).		
Robinhood Securities LLC	01/01/22	12/31/22	7,255.	7,366.			-111.		
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 ince is checked), lir	lude on your ne 2 (if Box B	7,255.	7,366.			-111.		

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 SHOURYA BADAM

(F) Long-term transactions not reported to you on Form 1099-B

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

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

Social security number or taxpayer identification number 293-97-9846

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.

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

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

_ , ,	•	•						
1 (a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(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	01/01/22	12/31/22	3,965.	4,097.	W	75.	-57.	

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.

75.

3,965.

4,097.

8949

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 Attachment Sequence No. 12A

Internal Revenue Service Name(s) shown on return SHOURYA BADAM

Department of the Treasury

Social security number or taxpayer identification number 293-97-9846

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)

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

(C) Short-term transactions	s not reported	d to you on F	orm 1099-B				
1 (a)	Description of property Date acquired Date Sold of		Proceeds S	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a co See the sep	(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	04/20/22	12/31/22	2,591.	2,650.			-59.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and ince is checked), lir	lude on your ne 2 (if Box B	2,591.	2,650.			-59.

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.)

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

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

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

OMB No. 1545-0074
2022
Attachment Sequence No. 13

Your social security number

SHO	URYA BADAM						293-97	/-9846	
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 ar	re an indiv	idual, repo	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s) 1	099? 5	See ins	tructions .		. 🗌 Ye	s 🛚 No
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, ZIF								
Α	ADARSH NAGAR HYDERABAD TELANGANA IN 5	50006	53						
В									
С									
1b	Type of Property (from list below) 2 For each rental real estate prope above, report the number of fair in the state property above.	rental	and		Fa	ir Rental Days	Persona Day		QJV
Α	personal use days. Check the Quite second the contract th			Α		355		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С	qualified joint venture. See instru	action is	,.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Rent	ıtal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (descri	ibe)		
						Propertie			
lnaai	mai			Α		В	;s.		С
Incor		3			70.	В			
4	Rents received	4			70.				
	nses:	4							
=xpe 5	Advertising	5							
		6							
6	Auto and travel (see instructions)	7		7	10.				
7	Cleaning and maintenance			/	10.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10		1 0	1.0				
11	Management fees	11		1,2	40.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13		0 7	1.0				
14	Repairs	14			40.				
15	Supplies	15		2,4	50.				
16	Taxes	16		1 0					
17	Utilities	17		1,6	55.				
18	Depreciation expense or depletion	18							
19	Other (list)	19		0 7	0.5				
20	Total expenses. Add lines 5 through 19	20		8,/	95.				
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		-8,2	25.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(8,22	25.)	()()
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		570.		
b	Total of all amounts reported on line 4 for all royalty properties				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	8.	,795.		
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	otal losses her		:	8,225.)
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			-8,225.







Georgia Form 500 (Rev. 06/22/22) Individual Income Tax Return Georgia Department of Revenue 2022 (Approved software version)

	_									
	al Year inning	STATE GA								
	cal Year ding	YOUR DRIVER'S LICENSE/STATE ID		О	61816103					
1.	YOUR FIRST NAME SHOURYA		МІ	YOUR SOCIAL S	SECURITY NUMBE	ER				
	LAST NAME (For Name Change See IT-5 BADAM	11 Tax Booklet)		s	UFFIX					
	SPOUSE'S FIRST NAME		MI	SPOUSE'S SOC	CIAL SECURITY N	UMBER	DEPARTME	NT USE ONLY		
	LAST NAME			s	UFFIX					
2.	ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number) CHECK IF ADDRESS HAS CHANGED 2. 5325 DONEHOO COURT									
3.	CITY (Please insert a space if the city has multaLPHARETTA	tiple names)		STATE GA	ZIP CODE 30005					
(C	OUNTRY IF FOREIGN)						Residency Status			
4.	Enter your Residency Status with the ap	propriate number	· 				•	1		
1.	FULL- YEAR RESIDENT 2. PART- YEAR RESI	DENT		то)		3. NONRI	ESIDENT		
	Omit Lines 9 thru 14 and use Fo	orm 500 Schedu	ıle 3 if y	you are a pa	rt-year or no	nresident filer.	Filing Status			
5.	Enter Filing Status with appropriate le	etter (See IT-511	Тах Воо	klet)			Filing Status5.	A		
A. S	Single B. Married filing joint C. Married filing s	eparate (Spouse's soci	al security	number must be e	ntered above) D. H	ead of Household or Q	ualifying Surv	iving Spous		
6.	Number of exemptions (Check appro	priate box(es) and	d enter t	otal in 6c.)	6a. Yourself ×	6b. Spouse	6c.	1		
72	Number of Dependents (Enter details o	n line 7h and DO	NOT incl	ude vourself or	vour snouse)		72			



2300411524

7b. Dependents (If you have more than 4 dependents, attach a list of additional dependents)

YOUR SOCIAL SECURITY NUMBER 293-97-9846

2022

First Name, MI.	Last Name	
Social Security Number	Relationship to You	
First Name, MI.	Last Name	
Social Security Number	Relationship to You	
First Name, MI.	Last Name	
Social Security Number	Relationship to You	
First Name, MI.	Last Name	
Social Security Number	Relationship to You	
	Form 1040) 8. he amount on Line 8 is \$40,000 or more, or your gross in	88998 come is less than your
W-2s you must include a copy of your Federa9. Adjustments from Form 500 Schedule 1 (See I		
10. Georgia adjusted gross income (Net total of Lir	ne 8 and Line 9) 10.	88998
11. Standard Deduction (Do not use FEDERAL ST. (See IT-511 Tax Booklet)	ANDARD DEDUCTION) 11a.	5400
b. Self: 65 or over? Blind? Tot	al x 1,300= 11b.	
Spouse: 65 or over? Blind? c. Total Standard Deduction (Line 11a + Line 1: Use EITHER Line 11c OR Line 12c (Do not writ		5400
12. Total Itemized Deductions used in computing Fed	eral Taxable Income. If you use itemized deductions, you m	nust include Federal Schedule A
a. Federal Itemized Deductions (Schedule A-	Form 1040) 12a.	
b. Less adjustments: (See IT-511 Tax Booklet)	12b.	
c. Georgia Total Itemized Deductions	12c.	
13. Subtract either Line 11c or Line 12c from Line	10; enter balance 13.	83598



YOUR SOCIAL SECURITY NUMBER 293-97-9846

2700

2022

Page 3

14a. Enter the number from Line 6c. $\,1\,$ Multiply by \$2,700 for filing status A or D $\,$ 14a.

	or multiply by \$3,700	for filin	g status B or C	;								
14b.	Enter the number from	m Line	e7a. Mu	ıltiply b	y \$3,000			14b.				
14c.	Add Lines 14a. and	14b. E	nter total					14c.				2700
	Income before GA N Georgia NOL utilized applying the 80% lin	(Canı	not exceed L	ine 15a	a or the ar	nount	after	15a. 15b.				80898
15c.	Georgia Taxable Inco	ome (L	ine 15a less	Line 1	5b)			15c.				80898
16.	Tax (Use Tax Rate S	Schedu	ule in the IT-5	511 Ta	x Booklet)			16.				4479
17.	Low Income Credit	17	'a.	17b.				17c.				
18.	Other State(s) Tax C	redit (Include a co	oy of th	ne other st	tate(s)	return)	. 18.				
19.	Credits used from IN	D-CR	Summary W	orkshe	et			. 19.				
20.	Total Credits Used electronically)	from	Schedule 2 (Georgi	a Tax Cre	edits (must be file	ed 20.				
21.	Total Credits Used (sun	n of Lin	es 17-20) can	not exce	eed Line 16	S		21.				0
22.	Balance (Line 16 les	s Line	21) if zero or	less th	ıan zero, e	enter z	ero	22.				4479
GΑ	COME STATEMENT D Wages/Income. For o or for Form G2-FL er	ther ir	come statem									
	(INCOME STATEMENT	A)			(INCOME	STATE	EMENT B)			(INCOME STATE	MENT C)	
1.	WITHHOLDING TYPE:			1.	WITHHOL	DING 1			1.	WITHHOLDING		
	X W-2 G2-A 1099 G2-F	ı	G2-LP G2-RP		W-2 1099		G2-A G2-FL	G2-LP G2-RP		W-2 1099	G2-A G2-FL	G2-LP G2-RP
2.	1099 G2-FI EMPLOYER/PAYER FEI ID NUMBER (FEIN) X 223658826		G2-RP	2.		ER/PAY	ER FEDERAL		2.		ER FEDERA	L
3.	EMPLOYER/PAYER STA	ATE WI	THHOLDING II	3.	EMPLOYE	ER/PAY	ER STATE W	THHOLDING ID	3.	EMPLOYER/PAY	ER STATE V	VITHHOLDING ID

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 4.

4. GA WAGES / INCOME

5. GA TAX WITHHELD

This Page (3) is required for processing

REV 01/03/23 PRO

1555 115 2022 GA 004 22

4. GA WAGES / INCOME

5. GA TAX WITHHELD

4. GA WAGES / INCOME

5. GA TAX WITHHELD

97440

4964



2300411544

YOUR SOCIAL SECURITY NUMBER 293-97-9846

ID

	(INCOME STATEMENT D)	(INCOME STATEMENT E)						(INCOME STATEMENT F)				
1.	WITHHOLDING TYPE:	1.	WITHHOLDING	TYPE:			1.	WITHHOLDING T	YPE:			
	W-2 G2-A G2-LP		W-2	G2-A		G2-LP		W-2	G2-A	G2-LP		
	1099 G2-FL G2-RP		1099	G2-FL	-	G2-RP		1099	G2-FL	G2-RP		
2.	EMPLOYER/PAYER FEDERAL	2.	EMPLOYER/PA	YER FE	DERAL		2.	EMPLOYER/PAY	ER FEDERAL	-		
	ID NUMBER (FEIN) SSN		ID NUMBER (FE	IN)	SSN			ID NUMBER (FEI	N) SSN	I		
		_										
3.	EMPLOYER/PAYER STATE WITHHOLDING ID	3.	EMPLOYER/PA	YER ST	ATE WI	THHOLDING ID	3.	EMPLOYER/PA	YER STATE V	VITHHOLDING I		
4	GA WAGES / INCOME	4	GA WAGES / IN	ICOME			1	GA WAGES / INC	COME			
٠.	CA WAGEO/ INCOME	٠.	OA WAGEG7	IOOIIIL			٦.	OA WAGES / III	JOINE			
5.	GA TAX WITHHELD	5.	GA TAX WITH	IELD			5.	GA TAX WITHHI	ELD			
23.	Georgia Income Tax Withheld on Wage					23.				4964		
	(Enter Tax Withheld Only and include W-2s	and	or 1099s)									
24.	Other Georgia Income Tax Withheld					24.						
	(Must include G2-A, G2-FL, G2-LP and/or G	G2-R	P)									
25.	Estimated Tax paid for 2022 and Form I	T-56	O			25.						
26.	Schedule 2B Refundable Tax Credits					. 26.						
	(Cannot be claimed unless filed electron	-	•							4064		
27.	Total prepayment credits (Add Lines 23, 2	24, 2	5 and 26)			27.				4964		
20	If Line 22 exceeds Line 27, subtract Line	. 27 1	rom Lino 22 o	ad anta	r							
20.	balance due					28.						
20						20.						
29.	If Line 27 exceeds Line 22, subtract Line overpayment					. 29.				485		
						0.				100		
30.	Amount to be credited to 2023 ESTIMA	TEL) TAX			30.				0		
31.	Georgia Wildlife Conservation Fund (No	gift	of less than \$1	.00)		31.						
32.	Georgia Fund for Children and Elderly (I	No g	ift of less than	\$1.00)		32.						
33.	Georgia Cancer Research Fund (No gift	of le	ess than \$1.00)		33.						
34.	Georgia Land Conservation Program (No	gift	of less than \$	51.00)		34.						
	0			0.01								
35.	Georgia National Guard Foundation (No	gift	of less than \$1	.00)		35.						
26	Dog & Cat Storilization Fund (No -: 4 - 5)	000	than ¢4 00\			26						
36.	Dog & Cat Sterilization Fund (No gift of I	ess	uian \$1.00)		•••••	36.						
37.	Saving the Cure Fund (No gift of less th	ıan ¢	1.00)			37.						
51.	Caving the Outer and (No girt of less th	4				51.						
38.	Realizing Educational Achievement Can Hap	pen	(REACH) Progr	am		38.						
	(No gift of less than \$1.00)		, ,									
	T	\	- /4\!			C						



YOUR SOCIAL SECURITY NUMBER 293-97-9846

2022

39. Public Safety Memorial Grant (No	o gift of less than \$1.00)	39.		
40. Form 500 UET (Estimated tax pe	enalty) 500 UET exception	on attached 40.		
41. Penalty: Late Payment and/or La	te Filing	41.		
42. Interest		42.		
43. (If you owe) Add Lines 28, 31 MAKE CHECK PAYABLE TO GE Mail To: GEORGIA DEPARTMEN PO BOX 740399 ATLANTA, GA 3	ORGIA DEPARTMENT OF RI	EVENUE,		
44. (If you are due a refund) Subtract THIS IS YOUR REFUND Refund Due Mail To: GEORGIA DE	EPARTMENT OF REVENUE P	44.		485
PO BOX 740380 ATLANTA, GA 303 If you do not enter Direct Depo		re a first time filer vou will	be issued a paper check.	
	Type: Checking X Savings	io a mot amo moi you am	zo locaca a paper ellecti	
Routing Number 053000196	_	Account Number 2370310	63957	
Taxpayer's Signature (Cher	ck box if deceased)	Spouse's Signature	(Check box if deceased)	
Taxpayer's Date of Death		Spouse's Date of Death		
Taxpayer's Signature Date	Taxpayer's Phone 980-339-1		Spouse's Signature Date	
By providing my e-mail address I am autho my account(s).	rizing the Georgia Department of F	Revenue to electronically notify me a	t the below e-mail address regarding	any updates to
Taxpayer's E-mail Address			I authorize DOR to o with the named prep	
SYAM PRIYA RAM SAGAR G	UPTA TALLAM		s Phone Number 965–9522	
Signature of Preparer Name of Preparer Other Than Tax	maver	Preparer	'e FFIN	
SYAM PRIYA RAM SAGA		-	171965	
Preparer's Firm Name GLOBAL TAXES LLC			's SSN/PTIN/SIDN 82703	