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

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OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separatel	y (MFS)	☐ Head of	household	(HOH	1)		ifying s		ing
one box.	-	u checked the MFS box, enter the n	-	our spouse. If yo	u check	ed the HOH or	QSS box,	ente	r the c	hild's	name	if the	qualifying
		on is a child but not your dependen	t:										
Your first name and middle initial Last name										Your social security number			
								81-4					
•		first name and middle initial	Last na										rity number
DEEKSHA				AMCHETTY			1			PPLI			
	,	er and street). If you have a P.O. box, see	instruction	ons.			Apt. n	0.	- 1				Campaign
609 LOU							710 1			heck h oouse i			, want \$3
City, town, or post office. If you have a foreign address, also complete spaces below.  State ZIP code								to	go to	this fu	nd. Ch	necking a	
CAMPBELL							95008	~		ox belo			iange
Foreign countr	y name			Foreign province/sta	ate/count	У	Foreign pos	stai co	ae y			Spouse	
Digital	At an	ny time during 2022, did you: (a) rec	eive (as	a reward. award.	or pavr	nent for prope	rtv or serv	ices):	or (b)	sell.			<del></del>
Assets		ange, gift, or otherwise dispose of					-				□ Ye	es [	⊠ No
Standard	Som	eone can claim:	pendent	t	ouse as	a dependent							
Deduction		Spouse itemizes on a separate retu	n or you	were a dual-stat	us alien								
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind	Spouse	: Was boi	rn before J	anua	ry 2, 1	958		s blind	b
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relationsh	1ip (4) Che	eck th	e box i	f qualifi	ies for (	see ins	structions):
If more		rst name Last name		number		to you	CI	Child tax c		it (	Credit fo	or other	dependents
than four													
dependents, see instruction	s												
and check													
here	]												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .						1a		142	791.
	b	Household employee wages not r	•	. ,						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)											
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		•						1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form W-2, see	h	,	ions)							1h			0.
instructions.	i	Nontaxable combat pay election (	see instr	ructions)		<u>1</u> i						1 4 0	7.01
	<u>z</u>	Add lines 1a through 1h	- i ·							1z		142	2,791.
Attach Sch. B if required.	2a		2a	20		axable interes				2b			
ii required.	3a		3a	32.		rdinary divide				3b			32.
	4a	IRA distributions	4a			axable amoun				4b			
Standard Deduction for—	5a 6a		5a 6a			axable amoun axable amoun				5b 6b			
Single or	C	Social security benefits If you elect to use the lump-sum e		mothod chock he					· ·	OD			
Married filing separately,	7	Capital gain or (loss). Attach Sche		*	`	,				7		_1	,774.
\$12,950 Married filing	8	Other income from Schedule 1, lir			•				. Ш	8			, / /4.
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							•	9		1/1	049
Qualifying surviving spouse,	10	Adjustments to income from Sche				 				10		+ <u>_</u>	,049.
\$25,900 Head of	11	Subtract line 10 from line 9. This is	-						•	11		1/1	,049.
household,	12	Standard deduction or itemized	•							12			,049. 5,900.
\$19,400 If you checked	13	Qualified business income deduct		•	,	5-A			•	13			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
any box under	14	Add lines 12 and 13							•	14		25	5 <b>,</b> 900.
Standard Deduction,	15	Subtract line 14 from line 11. If ze								15			5,149.
see instructions.	1			-, ,	. ,				•	.5			, _ 10.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	16,565.
Credits	17	Amount from Schedule 2, lin	ne 3					17	
	18	Add lines 16 and 17					[	18	16,565.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		[	19	
	20	Amount from Schedule 3, lin	ie 8				]	20	
	21	Add lines 19 and 20					[	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	16,565.
	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 <b>total tax</b>				[	24	16,565.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 24	1,487.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	24,487.
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return		[	26	
If you have a qualifying child,	27	Earned income credit (EIC)				27	Ì		
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin							
	32	Add lines 27, 28, 29, and 31				fundable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments			1	33	24,487.
Refund	34	If line 33 is more than line 24						34	7,922.
	35a	Amount of line 34 you want				•	1	35a	7,922.
Direct deposit?	b	Routing number 1 2 1			c Type:		Savings		
See instructions.	d	Account number 3 2 5							
	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, g						37	
	38	Estimated tax penalty (see in		-07					
Third Party		you want to allow another							
Designee		structions	•				omplete be	elow.	X No
	De	signee's		Phone		Pers	onal identific	cation ,	
	naı	me		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			, , ,		,		, ,
Here	Yo	ur signature	Date					nt you an Identity N, enter it here	
Joint return?			SOFTWARE ENGINEER			(see ir	ıst.)		
See instructions.	Sp	ouse's signature. If a joint return, <b>t</b>	Date	Spouse's occupa			nt your spouse an		
Keep a copy for your records.				110140 147170	Identif (see in	. ,	ection PIN, enter it here		
				Farall addisses	HOME MAKE		,		
		one no. (714) 319-594 eparer's name	Preparer's signat	Email address	VINODHALUR	KURU@GMAIL.CO	PTIN	$\overline{}$	Check if:
Paid		•			רווחחת חחוויי	Date		702	Self-employed
Preparer		SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/07/2023 P02082							
Use Only		m's name GLOBAL TAX	Phone		678) 965-9522				
			Y CT E BRU	NOWICK No			Firm's	EIN	84-3171965
Go to www.irs.g	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/24/23 PRO			Form 1040 (2022)

### 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.

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** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

VINODH ALUKURU & DEEKSHA KRISHNA MUTTAMCHETTY

Your social security number 081-41-6906

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 . . . . . . . . . . . . . . 586. 1,320. -734. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . 9,382. 9,060. 322. 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 1,362. 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 -1,774.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 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 14

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

BAA

15

Schedule D (Form 1040) 2022 Page 2

## Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -1,774.• 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 1,774.) 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**

Social security number or taxpayer identification number

OMB No. 1545-0074

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

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

VINODH ALUKURU & DEEKSI	HA KRISHN	A MUTTAM	CHETTY	081-41	-6906		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form 1						
Part I Short-Term. Trans instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra gregate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or coo	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com	below. Chec page 1, for ea aplete as mar	k only one k ach applicabl ny forms with	pox. If more than be box. If you had the same box of	n one box applies ve more short-te checked as you r	s for your s rm transact need.	hort-term transa tions than will fit	ctions, on this page
<ul><li>☒ (A) Short-term transactions</li><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•			e)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	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).
E*TRADE SECURITIES LLC	01/01/22	12/31/22	586.	1,320.			-734.
2 Totals Add the amounts in columns	s (d) (e) (a) and	d (h) (subtract					

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.

586.

-734.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).

1,320.

# **Sales and Other Dispositions of Capital Assets**

Attachment

Social security number or taxpayer identification number

OMB No. 1545-0074

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

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

VINODH ALUKURU & DEEKS!	HA KRISHN	A MUTTAM	CHETTY	081-41	-6906		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form 1	er you receive 1099-B. Either	ed any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s	) from your broke ) was reported to	r. A substitute the IRS by your
Part I Short-Term. Trans- instructions). For lo				eld 1 year or le	ss are ger	nerally short-te	rm (see
Note: You may agg reported to the IRS Schedule D, line 1a	regate all s	hort-term tr ich no adjus	ansactions rep stments or coo	les are required	d. Enter th	e totals directly	y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  (A) Short-term transactions	page 1, for ea plete as mar	ach applicabl ny forms with	e box. If you ha	ve more short-te checked as you r	rm transact need.	tions than will fit	on this page
<ul><li>★ (B) Short-term transactions</li><li>← (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas				
1  (a)  Description of property	(a) (b) Det			(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a co	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	Date acquired (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).
E*TRADE SECURITIES LLC	01/01/22	12/31/22	9,382.	9,060.			322.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (h) (subtract					

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.

9,382.

322.

negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

9,060.



# **Application for IRS Individual Taxpayer Identification Number**

For use by individuals who are not U.S. citizens or permanent residents. ► See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

OMB No. 1545-0074

An IRS individual	taxpayer identification n	umber (ITIN) is	for U.S. feder	al tax purposes	only.		ion type (check one box):				
Before you begin • Don't submit th	: is form if you have, or are e	ligible to get, a	U.S. social sec	urity number (SS	SN).		oply for a new ITIN enew an existing ITIN				
	ubmitting Form W-7. Read ederal tax return with Forn										
_	alien required to get an ITIN to			•	,		,				
<b>b</b> Nonresident	alien filing a U.S. federal tax re	eturn									
c U.S. residen	t alien (based on days presen	t in the United S	States) filing a U.	S. federal tax retur	n						
d Dependent	of U.S. citizen/resident alien	If <b>d</b> , enter relati	ionship to U.S. cit	izen/resident alien	(see insti	ructions) 🕨					
e 🗵 Spouse of U	I.S. citizen/resident alien	If d or e, enter VINODH AI		TN of U.S. citizen/							
f Nonresident	alien student, professor, or res	searcher filing a l									
g Dependent/s	spouse of a nonresident alien h	olding a U.S. vis	a								
h Other (see in	nstructions) ►										
Additional information	on for <b>a</b> and <b>f</b> : Enter treaty cour			and treaty art							
Name	1a First name		Middle name		Last n						
(see instructions)	DEEKSHA KRISHNA					TAMCHE!	ГТҮ 				
Name at birth if different ▶	<b>1b</b> First name		Middle name		Last n						
Applicant's	2 Street address, apartment	t number, or rura	l route number. <b>I</b> 1	you have a P.O.	box, see	separate i	nstructions.				
Mailing	609 LOUISE CT										
Address	City or town, state or prov	opropriate.									
	CAMPBELL			CA	USA		95008				
Foreign (non- U.S.) Address	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.										
(see instructions) City or town, state or province, and country. Include postal code where appropriate.											
Birth	4 Date of birth (month / day / y	ear) Country of b	oirth	City and state or	province	(optional)	5 Male				
Information	06/17/1995	INDIA					★ Female				
Other Information	<b>6a</b> Country(ies) of citizenship INDIA	<b>6b</b> Foreign t	tax I.D. number (it	fany) 6c Type	of U.S. vis	sa (if any), n	umber, and expiration date				
mormadon	6d Identification document(s) submitted (see instructions)   ☐ Passport ☐ Driver's license/State I.D.										
	USCIS documentation Other Date of entry into										
		the United	•								
	Issued by: INDIA No.: U2645814 Exp. date: 01/04/2031 (MM/DD/YYYY):										
	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?										
	No/Don't know. Skip line 6f.										
	Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).										
	6f Enter ITIN and/or IRSN ▶	ITIN		IF	RSN		and				
	name under which it was issued ▶										
	First name Middle name Last name										
	6g Name of college/university or company (see instructions) ▶										
	City and state ► Length of stay ►										
Sign Here	Under penalties of perjury, I (a documentation and statements, information with my acceptance a	and to the best of	of my knowledge a	nd belief, it is true,	correct, a	and complete	e. I authorize the IRS to share				
11616	information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.  Signature of applicant (if delegate, see instructions)  Date (month / day / year)  Phone number										
Keep a copy for your records.						Phone number					
	Name of delegate, if app	licable (type or p	rint) Delegate's relation to applicant				Court-appointed guardian fattorney				
Acceptance	Signature			Date (month / day /	/ year)	Phone					
Agent's	7				Fax						
Use ONLY	Name and title (type or p	rint)	Name of co	ompany	EIN	IN PTIN					
	<b>7</b>			Office			ce code				