Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)	•
Taxpayer's name	Social security number
MOURYA GOUD VUYYALA	877-85-0040
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	, , , , , , , , , , , , , , , , , , ,
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	een a conv of your return)
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requebusiness days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment to receive confidential information necessary to answer inquiries and resolve issues related to the payment indication number (PIN) below is my signature for the income tax return (original or amended) I am Electronic Funds Withdrawal Consent.	S. Treasury and its designated Financial cated in the tax preparation software for n to debit the entry to this account. This the authorization. To revoke (cancel) a sets must be received no later than 2 processing of the electronic payment of ayment. I further acknowledge that the
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or generate m	5 0 0 4 0
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.	
Your signature ▶ Date ▶	
Spouse's PIN: check one box only	
I authorize to enter or generate n	ny PIN as my
ERO firm name	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	
Spouse's signature ▶ Date ▶	
Practitioner PIN Method Returns Only—continue below	
Part III Certification and Authentication — Practitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5 1	8 9 5 2 3 1 9 8 9
	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Indianal Pub. 1345, Handbook for Authorized IRS e-file Providers of Indianal Pub. 1345, Handbook for Authorized IRS e-file Providers of Indianal Pub.	tting this return in accordance with the
ERO's signature ▶ Date ▶	
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To D	2 50

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

OMB No. 1545-0074

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

Filing Status Check only	s 🗙 S	Single Married filing jointly	Marrie	ed filing separately (l	MFS)	☐ Head of	household	HOH) [ifying sur ise (QSS)			
one box.	•	u checked the MFS box, enter the n on is a child but not your dependent	•	our spouse. If you c	heck	ed the HOH or	QSS box,	enter the	e child's	name if t	he qual	lifying	
Your first name	and mi	ddle initial	Last na	me					Your so	cial secur	ty numb	ber	
MOURYA (GOUD		VUYY	ALA					877-8	35-004	0		
If joint return, s	pouse's	first name and middle initial	Last nai	me					Spouse's social security number				
	•	r and street). If you have a P.O. box, see	instruction	ons.			Apt. ne	э.		Presidential Election Campaign			
		VALLEY ROAD,					1138			ere if you if filing joi			
		ce. If you have a foreign address, also co	mplete s	paces below.	Sta		ZIP code			this fund.			
FARMERS		ICH			TX		75244			ow will no		е	
Foreign country	y name		F	Foreign province/state/	'count	у	Foreign pos	tal code	your tax	or refund		pouse	
Digital		ny time during 2022, did you: (a) rec	,				•	, .	, ,				
Assets		ange, gift, or otherwise dispose of a		<u></u>			asset)? (Se	e instru	ctions.)	Yes	×Ν	10	
Standard Deduction	_	eone can claim:	•	•		a dependent							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse	: Was bor	rn before Ja	anuary 2	, 1958	☐ Is b	lind		
Dependents	s (see	instructions):		(2) Social security	y	(3) Relationsh	nip (4) Che	ck the bo	x if qualit	ies for (see	instruct	tions):	
If more	(1) Fi	rst name Last name		number		to you	Ch	ild tax cre	edit	Credit for o	ther depe	endents	
than four													
dependents, see instruction	s ——												
and check													
here											Ш		
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a		82,1	<u>22.</u>	
	b	Household employee wages not re	eported	on Form(s) W-2 .					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)											
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26											
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29											
If you did not	g	Wages from Form 8919, line 6.							1g				
get a Form W-2, see	h	Other earned income (see instruct	,						1h			0.	
instructions.	i		Nontaxable combat pay election (see instructions)								00.1		
	Z	Add lines 1a through 1h							1z		82,1		
Attach Sch. B	2a	· –	2a			axable interes			2b			<u> </u>	
if required.	3a		3a	7.		rdinary divide			3b			7.	
	4a	-	4a			axable amoun			4b				
Standard Deduction for—	5a	-	5a			axable amoun			5b				
Single or	6a	,	6a			axable amoun	t		6b				
Married filing separately,	c	If you elect to use the lump-sum e		,	`	,] 		2 0	0.0	
\$12,950	7	Capital gain or (loss). Attach Sche						L	7		-3,00		
 Married filing jointly or 	8	Other income from Schedule 1, lin							8		-8,50		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•					9		70,6	<u> 3U.</u>	
\$25,900	10	Adjustments to income from Sche	•						10		70 6	20	
 Head of household, 	11	Subtract line 10 from line 9. This is	•						11		70,6		
\$19,400 If you checked	12	Standard deduction or itemized Qualified business income deduct		,	,				12		12,9	50.	
any box under	13	Add lines 12 and 13							13	+	12 0	<u> </u>	
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer							14 15		<u>12,9</u> 57,68		
see instructions.	15	Capitati inic 14 itolif ilile 11. Il 201	0 01 168	o, onto -o IIII5 15)	, oui t	anable HICUII			13		00,10	50.	

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any	y from Form	(s): 1 881	4 2 🗌 4972	3 🗌	10	6 8,306.
Credits	17	Amount from Schedule 2, line 3					1	7
	18	Add lines 16 and 17					1	8 8,306.
	19	Child tax credit or credit for other	r dependent	ts from Sched	ule 8812		19	9
	20	Amount from Schedule 3, line 8					2	0
	21	Add lines 19 and 20					2	1
	22	Subtract line 21 from line 18. If ze	ero or less,	enter -0			2	2 8,306.
	23	Other taxes, including self-emplo	yment tax,	from Schedule	2, line 21		2	
	24	Add lines 22 and 23. This is your	total tax				2	
Payments	25	Federal income tax withheld from						
,	а	Form(s) W-2				25a 13,	696.	
	b	Form(s) 1099				25b		
	С	Other forms (see instructions) .				25c		
	d	Add lines 25a through 25c					25	id 13,696.
.,	26	2022 estimated tax payments and					2	6
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27		
attach Sch. EIC.	28	Additional child tax credit from Scl	hedule 8812			28		
	29	American opportunity credit from	Form 8863	3, line 8		29		
	30	Reserved for future use				30		
	31	Amount from Schedule 3, line 15				31		
	32	Add lines 27, 28, 29, and 31. The				ndable credits	3	2
	33	Add lines 25d, 26, and 32. These	are your to	tal payments			3	3 13,696.
Refund	34	If line 33 is more than line 24, sub	otract line 2	4 from line 33.	This is the amour	nt you overpaid	3	5,390.
neiulia	35a	Amount of line 34 you want refur	nded to you	ı. If Form 8888	s is attached, chec	k here	. 🗆 35	5,390.
Direct deposit?	b	Routing number 0 6 1 0					avings	
See instructions.	d	Account number 3 3 4 0	4 9 6	6 6 8 6	5 0 7			
	36	Amount of line 34 you want appli	ed to your	2023 estimate	ed tax	36		
Amount You Owe	37	Subtract line 33 from line 24. This For details on how to pay, go to v					3	7
	38	Estimated tax penalty (see instruc				38		
Third Party Designee	Do	you want to allow another perstructions	son to disc	cuss this retur		See	mplete belov	w. 🗵 No
Designee		signee's		Phone			nal identificati	
	nar			no.			er (PIN)	
Sign		der penalties of perjury, I declare that I I ef, they are true, correct, and complete.						
Here	Yo	ur signature		Date	Your occupation		If the IRS	sent you an Identity
							Protection (see inst.)	n PIN, enter it here
Joint return? See instructions.				Data	SOFTWARE E			
Keep a copy for your records.	Sp	Spouse's signature. If a joint return, both must sign.		Date Spouse's occupation				sent your spouse an Protection PIN, enter it here
	———Ph	one no. (251)455-8115		Email address	MOIIRYAVIIYVA	LA@GMAIL.COM	1	
		, ,	parer's signat		MOUNTAVOITA		PTIN	Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM SYA			GUPTA TALLAM		20208270	
Preparer		n's name GLOBAL TAXES			COL III IIIDDINI	1 0 1 / 0 1 / 2 0 2 3 1		o. (678)965-9522
Use Only		n's address 245 ROONEY C'		NSWICK N	J 08816		Firm's Ell	<u> </u>
Go to www.irs.a		a1040 for instructions and the latest info			BAA	REV 03/22/23 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

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

Name	Your so	cial s	ecurity number		
MOUR	YA GOUD VUYYALA		877-8	5-00	140
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedul	eЕ.	5	-8,500.
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			
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	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			

8s

8t

8u

8z

u Wages earned while incarcerated

9

Other income. List type and amount:

s Nontaxable amount of Medicaid waiver payments included on Form

t Pension or annuity from a nonqualifed deferred compensation plan or

Total other income. Add lines 8a through 8z

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

-8,500.

9

10

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

Educator expenses 11	Par	Adjustments to Income			
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	11			11	
officials. Attach Form 2106 1 Health savings account deduction. Attach Form 8889 1 Health savings account deduction. Attach Form 8889 1 Deductible part of self-employment tax. Attach Schedule SE 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed SEP, SIMPLE, and qualified plans 1 Self-employed health insurance deduction 1 The Penalty on early withdrawal of savings 1 Ba Alimony paid 1 Ba Pecipient's SSN 1 C Date of original divorce or separation agreement (see instructions): 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA deduction 2 IFA desclustion 2 IFA desclustion 2 IFA desclustion 2 IFA description of future use 2 IFA desclustion 2 IFA description of future use 2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 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 24 Jeli 25 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions): IRA deduction	19a			19a	
20 Student loan interest deduction 21 22 23 24 22 24 24 24 24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m. Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974. Contributions to section 501(c)(18)(D) pension plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions). 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 Housing deduction from Form 2555. Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041). Total other adjustments. List type and amount: 25 Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments: Jury duty pay (see instructions) Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount: Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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 c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		la la		
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)				-	
discrimination claims (see instructions)	_		rg		
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 tax law violations	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				26	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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**

Your social security number

MO	URYA GOUD VUYYALA			877-	-85-	0040		
-	you dispose of any investment(s) in a qualified opportunity	_	•	_				
	es," attach Form 8949 and see its instructions for additiona	•						
Pa	Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year (or Less (se	e ins	tructions)		
lines This	See instructions for how to figure the amounts to enter on the ines 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, Parl line 2, column (g)							
	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. Totals for all transactions reported on Form(s) 8949 with Box A checked	0.	1,195.			-1,195.		
2	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							
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4			
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5			
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions							
7	7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back							
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see	instructions)		
	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen		(h) Gain or (loss) Subtract column (e) from column (d) and		
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum	Part II,	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							
	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							
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11			
12 13	Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions	12 13						
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	, from line 13 of y	our Capital Loss	Carryover	14	(
15	Net long-term capital gain or (loss). Combine lines 8a on the back	through 14 in co	lumn (h). Then, go	o to Part III	15			

BAA

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -23,634. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 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 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

877-85-0040

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

MOURYA GOUD VUYYALA

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

OMB No. 1545-0074

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									
Part I Short-Term. Trans				eld 1 year or le	ess are ger	nerally short-te	rm (see			
Note: You may agg reported to the IRS	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 I complete a separate Form 8949, p for one or more of the boxes, com	page 1, for ea	ach applicab	e box. If you have	ve more short-te	rm transac					
★ (A) Short-term transactions□ (B) Short-term transactions□ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas			•	e)			
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e)	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e) from column (d) and			
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g).			
Robinhood Securities LLC	01/01/22	12/31/22	0.	1,195.			-1,195.			

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.

-1,195.

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 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

1,195.

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.

Your social security number

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

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

Attachment Sequence No. **13**

OMB No. 1545-0074

MOUF	RYA GOUD VUYY	ALA						877-8	5-0040	
Part		Loss From Rental Real Estate an								
	Note: If you a	re in the business of renting personal proper	ty, use	Schedule	C . See	instru	ctions. If you	are an indi	vidual, rep	ort farm
Λ [or loss from Form 4835 on page 2, line 40. payments in 2022 that would require you	to file	Form(a)	10002 6	oo ino	tructions			o V No
		will you file required Form(s) 1099?								
						• •		· · ·	! •	.5 <u> 110</u>
1a	-	s of each property (street, city, state, ZIF								
Α	SINGARAYAKO	NDA MANDALAM PRAKASAM DISTR	RICT	ANDHR <i>A</i>	A PRAI	DESH	IN 5231	01		
В										
С								1		I
1b	Type of Property								al Use	QJV
	(from list below)	above, report the number of fair personal use days. Check the Qu			_		Days	Da		
A	3	if you meet the requirements to f			A		365		0	
B C		qualified joint venture. See instru			B					
	of Property:									
	Single Family Resid	dence 3 Vacation/Short-Term Ren	tal	5 Lanc	1	7	Self-Rental			
	Multi-Family Resid		tai	6 Roya	-	-	Other (desc	rihe)		
	Walti Tarriily 1103id	- Commercial		- O HOYE	11103					
							Propert	ies:		
Incon					Α		В			С
3			3		6	00.				
4_		d	4							
Expe			_							
5 6		ee instructions)	5 6							
7	·	ntenance		1,3	00					
8	-	· · · · · · · · · · · · · · · · · · ·	7		1,5	00.				
9			9							
10		rofessional fees	10							
11		S	11		1,0	00.				
12		paid to banks, etc. (see instructions)	12							
13	Other interest .		13							
14	Repairs		14		2,5	00.				
15	Supplies		15		1,800.					
16			16	0.500						
17			17	2,500.						
18		ense or depletion	18							
19	Other (list)	dd Barr 5 thannaf 40	19		0 1	0.0				
20	•	Add lines 5 through 19	20		9,1	00.				
21		rom line 3 (rents) and/or 4 (royalties). If								
	file Form 6198 .	see instructions to find out if you must	21		-8,5	00.				
22		real estate loss after limitation, if any,			0,5					
		ee instructions)	22	(8,50	0.)	()	(
23a	•	nts reported on line 3 for all rental prope				23a	1	600.		
b		nts reported on line 4 for all royalty property				23b				
С		nts reported on line 12 for all properties				23c				
d	Total of all amoun	nts reported on line 18 for all properties				23d				
е	Total of all amoun	nts reported on line 20 for all properties				23e	9	,100.		
24	-	sitive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royal	Ity losses from line 21 and rental real estat	te loss	es from li	ne 22. E	nter to	otal losses he	ere 25	(8,500.
26		estate and royalty income or (loss).								
		III, IV, and line 40 on page 2 do not a 1040), line 5. Otherwise, include this ar								0 500
	achequie i (Form	L 1040). IIDE 5. OTDERWISE. INCIUGE THIS AR	าเดเมาใ	in the to	ıaı on II	ne 41	on page 2	. 26		-8.500