(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

	1.07.07.00				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	per	
KART	THIK BABU SEELOJU	027-23	-358	1	
Spouse's	s name	Spouse's so	cial sec	urity numb	er
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	(Vear Voll (ro all	thorizing	, \
	whole dollars only on lines 1 through 5.	year you a	ue au	HIDHZIIIQ	J· <i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	130	0,791.
2	Total tax		2		2,117.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		8,041.
4	Amount you want refunded to you		4		5,924.
5	Amount you owe		5		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part		кеер а сор	y of y	our reti	urn)
my knoreturn (control to send for any Agent to paymer authorize paymer business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmy my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induction from the financial institution account induction is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requision days prior to the payment (settlement) date. I also authorize the financial institutions involved in the part of the payment (settlement) below is my signature for the income tax return (original or amended) I and identification number (PIN) below is my signature for the income tax return (original or amended) I and income tax return (original or	we are the am itter, or electrection of the tag. S. Treasury a icated in the tag to to debit the entry that the entry that the entry that the processing opayment. I fur	ounts for the counts of the co	from the inturn origin ssion, (b) the designated paration so to this according to revoke ved no la ectronic perhamments.	ncome ta ator (ERC the reaso d Financia oftware fo count. Thi (cancel) ter than ayment of e that th
	yer's PIN: check one box only				1
X		my PIN 3	3 !	5 8 1	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Er		digits, but er all zeros	as m
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Your s	ignature ▶ Date ▶				
Snous	e's PIN: check one box only				
Ороцо	I authorize to enter or generate	my PIN			as my
	ERO firm name	_	ter five	digits, but] 43 111)
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN metholow.				
Spous	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 en	6 6		8 9
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the 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.	ax return (orig nitting this ret	inal or urn in a	amended) accordanc	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To I	Do So			

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 one box.		Single Married filing jointly uchecked the MFS box, enter the n		ed filing separately	, ,	_	household	`	, _	spou	ifying surv ise (QSS)	Ü
one box.	•	on is a child but not your dependen	•	our spouse. If you	a Cricci		QOO DOX	, crite	TITIC	Cilia 3	name ii ur	o qualifyirig
Your first name	and mi	ddle initial	Last nar	ne					Y	our so	cial security	y number
KARTHIK	BABI	J	SEEL	OJU						27-2	23-3581	L
		first name and middle initial	Last nar						_			urity number
Home address	(numbe	r and street). If you have a P.O. box, see	 e instruction	ons.			Apt.	no.	F	Presider	ntial Electio	n Campaign
12001 DE	R MLI	C JR ST N					390	12			ere if you,	
		ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	ite	ZIP code					tly, want \$3 Checking a
SAINT P	ETERS	SBURG			FI	_	33716			_	w will not	_
Foreign country	y name		F	oreign province/sta	te/coun	ty	Foreign po	stal co	de y	our tax	or refund.	Ü
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	•				•	,	•	,	Yes	⊠ No
Standard		eone can claim: You as a de				a dependent	40001)1 (0		J 1. 0. 0 1			
Deduction Deduction	_	Spouse itemizes on a separate return	•			•						
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind	pouse	: Was bor	rn before				☐ Is bli	
Dependents	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	nip (4) Ch	eck th	e box	1		instructions):
If more	(1) Fi	rst name Last name		number		to you	С	hild ta	x cred	dit	Credit for oth	er dependents
than four dependents,									ᆜ		L	
see instruction	s ——								<u> </u>			
and check	, —								<u> </u>		<u>L</u>	
here]											
Income	1a	Total amount from Form(s) W-2, b	,	,				٠		1a	14	6,791.
Attach Form(s)	b	Household employee wages not r	•	()				٠		1b		
W-2 here. Also	С.	Tip income not reported on line 1a						٠		1c		
attach Forms	d	Medicaid waiver payments not rep		` ,	e ınstru	ictions)		٠		1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits		·				٠		1e		
was withheld.	f	Employer-provided adoption bene						٠		1f		
If you did not	g	Wages from Form 8919, line 6.						٠		1g		
get a Form W-2, see	h	Other earned income (see instruct	,					٠		1h		0.
instructions.	ı	Nontaxable combat pay election (see instr	uctions)		<u>li</u>					1.4	6 701
		Add lines 1a through 1h	· · ·							1z	14	6,791.
Attach Sch. B if required.	2a	'	2a			axable interes				2b	-	
ii required.	3a		3a			ordinary divide				3b		0.
	4a	_	4a			axable amoun				4b	+	
Standard Deduction for—	5a	_	5a			axable amoun				5b		
Single or	6a	,	6a			axable amoun			· .	6b		
Married filing separately,	c	If you elect to use the lump-sum e		•	•	,		•	. 📙	7		2 000
\$12,950	7	Capital gain or (loss). Attach Sche						•	. Ш	7		3,000.
Married filing jointly or	8	Other income from Schedule 1, lin						•		8		3,000.
Qualifying surviving spouse,	9 10	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 Adjustments to income from Sche	•	•				•		9	13	0,791.
\$25,900		•	•					•		10	1 2	0 701
Head of household,	11	Subtract line 10 from line 9. This is	•	-				•		11		30,791.
\$19,400 If you checked	12 13	Standard deduction or itemized Qualified business income deduct				 15_Δ		•		13	+	2,950.
any box under	14	Add lines 12 and 13								14	1	2 050
Standard Deduction,	15	Subtract line 14 from line 11. If ze								15		.2,950. .7,841.
see instructions.	10	Capitact into 14 Hoth line 11. II Ze	10 01 1033	5, OHIOL U HIIS I	o your	CANADIC IIICOII		•		13	1 11	7,0 1 1.

Form 1040 (2022	2)									Page	2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	22,117.	_
Credits	17	Amount from Schedule 2, lir	ne 3						17		
	18	Add lines 16 and 17							18	22,117.	_
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19		_
	20	Amount from Schedule 3, lir	ne 8						20		_
	21	Add lines 19 and 20							21		_
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	22,117.	_
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21				23	0.	_
	24	Add lines 22 and 23. This is	your total tax						24	22,117.	_
Payments	25	Federal income tax withheld									_
-	а	Form(s) W-2				25a	28,	041.			
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c							25d	28,041.	
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return				26		_
qualifying child,	27	Earned income credit (EIC)				27					_
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	8, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lir	ne 15			31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ındable cr	edits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	28,041.	_
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you ove	rpaid		34	5,924.	_
nerana	35a	Amount of line 34 you want			is attached, chec	ck here .			35a	5,924.	_
Direct deposit?	b	Routing number 0 3 1	2 0 2 0	8 4	c Type: 🛛	Checking	☐ Sa	vings			_
See instructions.	d	Account number 3 8 3	0 1 1 3	4 2 6 '	7 8						
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36					
Amount	37	Subtract line 33 from line 24	. This is the amo	ount you owe	1						
You Owe		For details on how to pay, g	o to www.irs.go	//Payments or	see instructions .				37		
	38	Estimated tax penalty (see in	nstructions) .			38					
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See					
Designee [*]	ins	structions				. 🗆 🗅	es. Con	iplete b	elow.	X No	
	De nai	signee's		Phone no.			Person	al identifi	cation		\neg
<u> </u>			de et l'herre erreier		1			` '	41 1		_
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			, , ,			,		, ,	
Here		ur signature		Date	Your occupation					nt you an Identity	
		ar eignature			Tour occupation			Prote	ction P	IN, enter it here	
Joint return?					SOFTWARE E	INGINEE	R	(see i	nst.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on				nt your spouse an	
your records.								(see i		ection PIN, enter it he	Te
		000 00 (014) (77 240	1	Email address		13 TT CC	D.T.	(****	,		_
		one no. (214)675-348 eparer's name	4 Preparer's signat	Email address	SUSTHIK@GM	Date		PTIN		Check if:	_
Paid		•			מווטייא ייאדד איי			02082	202	Self-employed	
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPIA IALLAM	02/14/	∠∪∠3 P				_
Use Only		m's name GLOBAL TA		MCMTAV N	T 00016			Phon		(678)965-9522	
_	FIR	m's address 245 ROONE	Y CT E BRU	MONTCV N	7 00010			Firm's	SEIIN	84-3171965	,

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

REV 02/05/23 PRO

BAA

Form **1040** (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

KARTHIK BABU SEELOJU

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

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

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

Attachment Sequence No. 01 Your social security number

027-23-3581

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. Atta		5	-13,000.
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			
	'	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		
S	Nontaxable amount of Medicaid waiver payments included on Form	0 (
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or	0.1		
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:	0-		
0	Total other income. Add lines 8a through 8z	8z	0	
9 10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,		9	-13,000.
10	Outlibilite iiiles i tilliougil / aliu 3. Elitel Hele aliu oli i ollil 1040, 1040-30,	OI IO4O-ININ, IIIIE O	IU	-13,000.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governing			
	officials. Attach Form 2106	[12	1
13	Health savings account deduction. Attach Form 8889	[13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	[14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction	[17	
18	Penalty on early withdrawal of savings	[18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use	[22	
23	Archer MSA deduction	[23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
İ	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			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)			
Z	Other adjustments. List type and amount:			
25			OF.	
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 . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 of 1040-3n, lifte 10, of Form 1040-1nn, lifte 10a		20	

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

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 027-23-3581 KARTHIK BABU SEELOJU 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. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I 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 Form(s) 8949, Part I, combine the result (sales price) (or other basis) 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 -119,420. 1,685,437. 1,899,591. 94,734. Totals for all transactions reported on Form(s) 8949 with Box B checked 8,580. 9,000. -420. 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 3,969.) 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 -123,809. 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 (g) (h) Gain or (loss) 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 Form(s) 8949, Part II, (sales price) (or other basis) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked 6. 2. 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)

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

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

4.

11

12

13

14

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -123,805.• 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 gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074

20 22
Attachment
Sequence No. 12A

Department of the Treasury File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Internal Revenue Service Social security number or taxpayer identification number Name(s) shown on return

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.

KARTHIK BABU SEELOJU 027-23-3581 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 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	enter a c	u enter an amount in column (g), enter a code in column (f). e the separate instructions. Gain of Subtract	
(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	1,685,437.	1,899,591.	W	94,734.	-119,420.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	1,685,437.	1,899,591.		94,734.	-119,420.

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 KARTHIK BABU SEELOJU

Social security number or taxpayer identification number 027-23-3581

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

Part II

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

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

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

(D) Long-term transac	tions reported on Form(s)	1099-B showing basi	is was reported to the IR	S (see Note above)
★ (E) Long-term transac	tions reported on Form(s)	1099-B showing basi	s wasn't reported to the	: IRS

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

(F) Long-term transactions	not reported	to you on Fo	1111 1099-0				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/21	12/31/22	6.	2.			4.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D	I here and inc is checked), lir	lude on your ne 9 (if Box E	6.	2.			4.

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.

Form **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

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

027-23-3581

KARTHIK BABU SEELOJU

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)

	3) Short-term transactions			_	sis wasn't report	ed to the IF	RS	
1	C) Short-term transactions	s not reported	to you on F	orm 1099-B	(e)	If you enter an	f any, to gain or loss amount in column (g),	(h)
	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions.	See the sep	ode in column (f). parate instructions. (g) Amount of adjustment	Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
Robin	nhood Crypto LLC	01/01/22	12/31/22	8,580.	9,000.			-420.
nega Sche	als. Add the amounts in column ative amounts). Enter each tot edule D, line 1b (if Box A above we is checked). or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	8.580.	9.000.			-420.

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,

Attachment

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number KARTHIK BABU SEELOJU 027-23-3581 Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . 1a Physical address of each property (street, city, state, ZIP code) HAYATH NAGAR HAYATH NAGAR TELANGANA IN 501505 Α В C **Fair Rental** 1b Type of Property **Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 600. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,500. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,300. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,300. 14 14 Repairs . . . 15 Supplies 15 3,000. 16 16 Taxes 17 17 4,500. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 13,600. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -13,000. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 13,000.) 600. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 13,600. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 13,000. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

-13,000.

Investment Interest Expense Deduction

Go to www.irs.gov/Form4952 for the latest information.

OMB No. 1545-0191 Attachment Sequence No. **51**

Identifying number

Department of the Treasury Attach to your tax return. Internal Revenue Service

KAR	THIK BABU SEELOJU 0	27-23	-3581
Par	Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2022 (see instructions)	1	40.
2	Disallowed investment interest expense from 2021 Form 4952, line 7	2	
3	Total investment interest expense. Add lines 1 and 2	3	40.
Part	II Net Investment Income		
4a	Gross income from property held for investment (excluding any net gain from		
	the disposition of property held for investment)	-	
b	Qualified dividends included on line 4a		
С	Subtract line 4b from line 4a	4c	0.
d	Net gain from the disposition of property held for investment		
е	Enter the smaller of line 4d or your net capital gain from the disposition		
	of property held for investment. See instructions		
f	Subtract line 4e from line 4d	4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions	4g	
h	Investment income. Add lines 4c, 4f, and 4g	4h	0.
5	Investment expenses (see instructions)	5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	6	0.
Part	III Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line		
	3. If zero or less, enter -0	7	40.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	0.
For Pa	pperwork Reduction Act Notice, see page 4. BAA REV 02/05/23 PRO		Form 4952 (2022)

Form **8889**

Department of the Treasury

Health Savings Accounts (HSAs)

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

Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment
Sequence No. 52

Internal Revenue Service Go to www
Name(s) shown on Form 1040, 1040-SR, or 1040-NR

KARTHIK BABU SEELOJU

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions. 027-23-3581

Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	f requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions	⊠ Se	lf-only 🗌 Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0.
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	3,650.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also include any amount contributed to your spouse's Archer MSAs	4	0.
5	Subtract line 4 from line 3. If zero or less, enter -0	5	3,650.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family		
	coverage under an HDHP at any time during 2022, see the instructions for the amount to enter	6	3,650.
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions.	7	0.
8	Add lines 6 and 7	8	3,650.
9	Employer contributions made to your HSAs for 2022		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	1,001.
12	Subtract line 11 from line 8. If zero or less, enter -0	12	2,649.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	0.
David	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		10.4
Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.			
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were		
	withdrawn by the due date of your return. See instructions	14b	
С	Subtract line 14b from line 14a	14c	
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructi completing this part. If you are filing jointly and both you and your spouse each have sep complete a separate Part III for each spouse.		
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f .	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 17d	21	-