Form 8879
(Rev. January 2021)
Department of the Treasury

IRS e-file Signature Authorization

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

T.....

Taxpaye	r's name	Social secu	rity numb	per
DINE	ESH CHANDRA DEVARAPALLY	643-37	7-407	9
Spouse's	s name	Spouse's so	cial secu	urity number
Part	Tax Return Information – Tax Year Ending December 31, 2022 (Enter	vear vou	are au	thorizing.)
Enter v	whole dollars only on lines 1 through 5.	, ,		0 /
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1	82,427.
2	Total tax		2	10,902.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	15,689.
4	Amount you want refunded to you		4	4,787.
5	Amount vou owe		5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

\mathbf{X}	Lauthorize	GLOBAL TAXES LLC	to enter or generate my PIN
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Ent don	er fiv 't en	ve di nter a	gits, all ze	but ros	as

my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signa	ature 🕨 🛛 Da	ate 🕨	•				 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Co	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2		 	3 all zei	 9	8	9

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

RO's signature ► Date ►								
Don	ERO Must Retain This Form — Se t Submit This Form to the IRS Unless?							
For Denominary Deduction Act Nation		DEV 02/22/22 DDO	Earm 8870 (Bay, 01 2021)					

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/22/23 PRO

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes Xe Standard Someone can claim: You as a dependent You repouse as a dependent Yes Xe Age/Blindness You: Were born before January 2, 1958 Are blind Spouse: Was born before January 2, 1958 Is blind Dependents (see instructions): (1) First name Last name (2) Social security (3) Relationship (4) Check the box if qualifies for (see instructions): If more than four dependents, see instructions (1) First name Last name Immetry to you Child tax credit Credit for other dependent in the paymetries or species is structions): If more than four dependents, see instructions Immetry is you Child tax credit Credit for other dependent is you Income 1a Total amount from Form(s) W-2, box 1 (see instructions) Immetry is you Immetry is you <td< th=""><th>E1040</th><th></th><th>Internal Revenue Servi S. Individual Income Ta</th><th></th><th>202</th><th>2</th><th>OMB No. 1545</th><th>-0074</th><th>IRS Use C</th><th>)nly—D</th><th>o not wr</th><th>ite or staple i</th><th>n this space.</th></td<>	E1040		Internal Revenue Servi S. Individual Income Ta		202	2	OMB No. 1545	-0074	IRS Use C)nly—D	o not wr	ite or staple i	n this space.
person is a child but not your dependent: Your social security number Your first name and middle initial Last name Your social security number If joint nume, spouse's first name and middle initial Last name Spouse's social security number Home address (number and street). Hyou have a P.0. box, see instructions. Apt no. Presidential Election Campaign 12340 ALARDDA TRACE_CITENCLE 2609 Creck, three if you, or your spouse fifting jointly, want 38 AUSTIN Foreign province/stateCounty Foreign province/stateCounty Foreign province/stateCounty Foreign province/stateCounty Tory appoint fifting ipintly, want 38 Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or service); or (b) soil. Tory appoint of the fund. Checking a box before January 2, 1958 In bind. Tory as a dependent Dependents Secure Cire Instructions; (a) Restatus allen (b) Pour (b) Pour Are President as a dependent (b) Pour (c) Check the out number fills instructions; (b) Pour If and anount from Form(s) W-2, box 1 (see instructions) (c) Pour the number fills instructions; (c) Pour the number fills instructions; (c) Pour the number fills instructions;	-					,				,	spou	se (QSS)	Ũ
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If joint return, spouse's first name and middle initial Last name Apt. no. 24340 ALAMEDA TRACE CIRCLE Apt. no. Presidential Election Campaign 12340 ALAMEDA TRACE CIRCLE 20 code TX 78 727 Check here if you, or your City, town, or post office. If you have a foreign address, aleao complete spaces below. State 20 code TX 78 727 No. below will not change Foreign country name Foreign province/state/county Foreign province/state/county Foreign province/state/county Foreign province/state/county Foreign province/state/county Foreign province/state/county You Spouse Digital At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, You Spouse No Standard Someone can claim: You sa a dependent You spouse as a dependent Out spouse as a dependent Gene terustructions); (f) First name Last name (g) Social security (g) Reatments (g) Check the box if qualities to: (see instructions); If more and check (g) First name Last name (g) Social security (g) Reatments (g) Social security (g) Reatments (g) Social security (g) Reatments (g) Social security (g) Social securi	Your first name	and mi	ddle initial	Last name						Y	our soo	cial securit	y number
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Standard Deduction for- 5a 5a b Taxable amount	if required.						2			•			
Deduction for- 6a Social security benefits 6a b Taxable amount 6b • Single or Married filing separately, \$12,950 c If you elect to use the lump-sum election method, check here (see instructions) . . 6b • Married filing jointly or Qualifying surviving spouse, \$25,900 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here . . 7 -3,000. • Married filing jointly or Qualifying surviving spouse, \$25,900 8 Other income from Schedule 1, line 10 . . . 9 82,427. • Mad lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 82,427. • Head of household, \$19,400 11 Subtract line 10 from line 9. This is your adjusted gross income 11 82,427. • Hyou checked any box under Standard 12 Subtract line 10 from line 9. This is your adjusted gross income 12 12,950. • If you checked any box under Standard 13 Qualified business income deduction from Form 8995 or Form 8995-A .										·			
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Jointly or Qualifying surviving spouse, \$25,9009Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income982, 427.10Adjustments to income from Schedule 1, line 2610• Head of household, \$19,40011Subtract line 10 from line 9. This is your adjusted gross income1182, 427.12Standard deduction or itemized deductions (from Schedule A)1212, 950.• If you checked any box under Standard13Qualified business income deduction from Form 8995 or Form 8995-A131412, 950.15Subtract line 14 from line 11. If zero or less enter -0-This is your taxable income15	\$12,950							• •			-		
auryling spouse, \$25,900 10 Adjustments to income from Schedule 1, line 26 10 • Head of household, \$19,400 12 Standard deduction or itemized deductions (from Schedule A) 11 82,427. • If you checked any box under Standard 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 12,950. • Head of household, \$19,400 • • • 14 12,950. • If you checked any box under Standard • • • 14 12,950. • If you checked any box under Standard • • • • 14 12,950. • If you checked any box under Standard • • • • • • 13 • • • • • • • • • • 14 12,950. • • • • • • • • • 15 6.9 4.77								• •		•	-		
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household, \$19,400 12 12,950. • If you checked any box under Standard Deduction, 13 Qualified business income deduction from Form 8995 or Form 8995-A 13 14 12,950. 15 Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income 15	\$25,900		-					• •		·			
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any box under Standard14Add lines 12 and 131412,950Deduction,15Subtract line 14 from line 11. If zero or less enter -0- This is your taxable income1569.477	\$19,400 r							• •		•		+ 1	2,950.
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	Standard				· · · · ·					•			
		15	Subtract line 14 from line 11. If Zel	o or less, ente	i -∪ i nis is y	our t		е.		•	15	6	9,4//.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2022)

Form 1040 (2022	2)								Pag	ge 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	10,902	2.
Credits	17	Amount from Schedule 2, lir	ne3					17		
	18	Add lines 16 and 17						18	10,902	2.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,902	2.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	C).
	24	Add lines 22 and 23. This is	your total tax					24	10,902	2.
Payments	25	Federal income tax withheld								
	а	Form(s) W-2				25a 15	5,689.			
	b	Form(s) 1099				25b				
	с	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	15,689	۶.
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)			No	27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	8, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir				31				
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	undable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				33	15,689	, .
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you overpaid		34	4,787	· •
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here		35a	4,787	· •
Direct deposit?	b	Routing number 0 2 1	2 0 0 3	3 9	c Type: 🛛 🗙	Checking	Savings			
See instructions.	d	Account number 3 8 1	0 4 3 2	2 5 8 9	9 1		-			
	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.						
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//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 retur	n with the IRS?	See				
Designee	ins	tructions				🗌 Yes. C	omplete b	below.	🗙 No	
		signee's		Phone			onal identi	fication		
	na			no.			ber (PIN)			
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com			1 7 0		,		, 0	
Here		ur signature		Date	Your occupation				nt you an Identity	<i>.</i>
	10	ur signature		Date					IN, enter it here	
Joint return?					SOFTWARE H	ENGINEER	(see	inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion			nt your spouse an	
Keep a copy for your records.								tity Prote inst.)	ection PIN, enter it I	1ere
,			0	For all a status as				mony		
		one no. (551)241–182 eparer's name	2 Preparer's signat	Email address	DEVARAPALLYD	INESH@GMAIL.C Date	OM PTIN		Check if:	
Paid					איי דדגים גיםכווס			2202	Self-employe	Ы
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPIA TALLAM	04/08/2023				
Use Only		m's name GLOBAL TA			T 0001C				678)965-952	
			Y CT E BRU	INSWICK NO			Firm	's EIN	84-317196	
Lio to WWW ire a	OV/Forr	n1040 for instructions and the late	et intormation			DEV 02/22/22 DDO			Eorm 1(14() (1000

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

REV 03/22/23 PRO BAA

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2 2

Attachment

Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
DINESH CHANDRA	DEVARAPALLY	643-37	-4079

Par	t 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	ach Schedule E	5	-9,870.
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		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,870.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2022

Par	II Adjustments to Income					
1	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	-basi	s aov	rnmer	nt 🗌	
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889					
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE					
16	Self-employed SEP, SIMPLE, and qualified plans					
17	Self-employed health insurance deduction				17	
8	Penalty on early withdrawal of savings					
19a						
b	Recipient's SSN					
	Date of original divorce or separation agreement (see instructions):	• _			-	
20	IRA deduction					
21	Student loan interest deduction					
22	Reserved for future use					
23	Archer MSA deduction				23	
24	Other adjustments:	· ·	• •			
а		24a				
	Deductible expenses related to income reported on line 81 from the	2-70			_	
D		24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals	270			_	
C	and USOC prize money reported on line 8m	24c				
d		240 24d			-	
	Repayment of supplemental unemployment benefits under the Trade	24u			_	
е	Act of 1974	24e				
4	Contributions to section 501(c)(18)(D) pension plans	24e 24f			_	
					_	
g		24g			_	
h	Attorney fees and court costs for actions involving certain unlawful					
_		24h			_	
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	24i			_	
	Housing deduction from Form 2555	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	,	24k			_	
Ζ	Other adjustments. List type and amount:					
_		24z				
25	Total other adjustments. Add lines 24a through 24z					
26	Add lines 11 through 23 and 25. These are your adjustments to income					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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. 2022 Attachment Sequence No. 12

Your social security number

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

DINESH CHANDRA DEVARAPALLY

643-37-4079

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
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)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustment		(h) Gain or (loss) Subtract column (e) from column (d) and	
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	to gain or loss from Form(s) 8949, Part I, line 2, column (g)		combine the result with column (g)	
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	114,277.	138,741.	8,8	8,88715		
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 (I	324	4				
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1		5				
6	Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions					(27,442.)	
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					-43,019.	

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, F line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
	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	4 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions					()
15	Net long-term capital gain or (loss). Combine lines 8a on the back .		15			

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -43,019.
	• 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 line 22.	
	• 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?	
	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. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ 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.	
	REV 03/22/23 PRO	Schedule D (Form 1040) 2022

Form **8949**

Department of the Treasury

Internal Revenue Service

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.



number

Name(s) shown on return	Social security number or taxpayer identification
DINESH CHANDRA DEVARAPALLY	643-37-4079

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.

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

1 (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) from column (d) and	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	(sales price) and see <i>Column (e)</i> in the separate instructions.		(f) (g) Code(s) from instructions Amount of adjustment		
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	114,277.	138,741.	W	8,887.	-15,577.	
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).			114,277.	138,741.		8,887.	-15,577.	

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

SCHEDULE E			Supplemental Income and Loss ate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								OMB No. 1545-0074			
(Form 1040) (From rental real esta				-			trusts, REMI	Cs, etc.)	20)22	2			
Department of the Treasury Attach to Form 1040, Internal Revenue Service Go to www.irs.gov/ScheduleE for						Attachment Sequence No. 13								
								Your socia	ocial security number					
								7-4079	lumber					
	Part I Income or Loss From Rental Real Estate and Royalties							045 5						
T are	Note: If yo	ou are in t	he business o	f renting personal proper 4835 on page 2, line 40.	ty, use	Schedul	e C. See	e instru	ctions. If you	are an indiv	vidual, rep	ort farm	n	
Α	Did you make an	iy payme	ents in 2022	that would require you	to file	Form(s)	1099? 5	See in	structions .		. 🗌 Ye	s X	No	
B	f "Yes," did you	or will y	ou file requii	red Form(s) 1099? .							. 🗌 Ye	s 🗌	No	
1a	Physical address of each property (street, city, state, ZIP code)													
Α	BYPASS RO	ар кна	MMAM TEL	ANGANA IN 50700)2									
B														
 1b	Type of Prope	rty 2	For each r	ental real estate prope	ntv liet	ted		Fa	ir Rental	Person	al I Ise			
10	(from list below			ort the number of fair					Days	Da		QJV		
Α	3	<u> </u>	personal u	se days. Check the Qu	JV box	k only	Α		365		0			
В				t the requirements to f			В]	
С			qualified jo	pint venture. See instru	ICTIONS	5.	С]	
Туре	of Property:	•												
1	Single Family R	esidence	e 3 Vac	ation/Short-Term Ren	tal	5 Land	b	7	Self-Rental					
2	Multi-Family Re	sidence	4 Cor	nmercial		6 Roy	alties	8	Other (desc	ribe)				
									Propert					
Incom							Α		B	103.		С		
3		4			3			U U	<u> </u>		<u> </u>			
4					4		0	00.						
Exper														
5					5									
6					6									
7		-			7		1.0	00.						
8	-				8									
9					9									
10					10									
11	-	-			11		8	00.						
12				tc. (see instructions)	12									
13	Other interest				13							-		
14	Repairs				14		3,0	05.						
15	Supplies				15		3,1	25.						
16	Taxes				16									
17					17		2,5	40.						
18		xpense	or depletion		18									
19	Other (list)				19									
20			0	h19	20		10,4	70.						
21	result is a (loss	s), see in	structions to	and/or 4 (royalties). If o find out if you must	21		-9,8	70.						
22		rental real estate loss after limitation, if any, 582 (see instructions)				(70.)	()	()	
23a		otal of all amounts reported on line 3 for all rental prope						23a		600.			í í	
b				e 4 for all royalty prop				23b						
С		otal of all amounts reported on line 12 for all properties						23c						
d								23d						
е	• Total of all amounts reported on line 20 for all properties							23e	1(),470.				
24				own on line 21. Do no						. 24				
25	Losses. Add ro	oyalty los	ses from line	e 21 and rental real estat	te loss	es from li	ine 22. E	Enter to	otal losses he	ere 25	(9,87	70.)	

20	Losses. Add toyally losses from the 21 and rental real estate losses from the 22. Enter total losses here
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result
	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 .

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-9,870.