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 secu	rity number
ROHITH BABU BABU BANDARI LAXMAN	193-29	9-1377
Spouse's name		ocial security number
Don't Toy Deturn Information Toy Very Finding Dec	ambay 24	
Part I Tax Return Information — Tax Year Ending Dec	ember 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 b	olank	
1 Adjusted gross income		1 132,049.
2 Total tax		2 22,419.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 109		3 25,785.
		4 3,366.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorizati	on (Be sure you get and keep a co	oy of your return)
Under penalties of perjury, I declare that I have examined a copy of the incommy knowledge and belief, it is true, correct, and complete. I further declare return (original or amended) I am now authorizing. I consent to allow my inter to send my return to the IRS and to receive from the IRS (a) an acknowledge for any delay in processing the return or refund, and (c) the date of any refund Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the payment of my federal taxes owed on this return and/or a payment of estimate authorization is to remain in full force and effect until I notify the U.S. Treaspayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-business days prior to the payment (settlement) date. I also authorize the fin taxes to receive confidential information necessary to answer inquiries and personal identification number (PIN) below is my signature for the income tax Electronic Funds Withdrawal Consent.	e that the amounts in Part I above are the an mediate service provider, transmitter, or electement of receipt or reason for rejection of the Id. If applicable, I authorize the U.S. Treasury e financial institution account indicated in the ted tax, and the financial institution to debit the sury Financial Agent to terminate the authority 4537. Payment cancellation requests must be ancial institutions involved in the processing of resolve issues related to the payment. I further than the transmitter of the payment.	nounts from the income tax ronic return originator (ERO) transmission, (b) the reason and its designated Financial tax preparation software for ee entry to this account. This zation. To revoke (cancel) a per received no later than 2 of the electronic payment of orther acknowledge that the
Taxpayer's PIN: check one box only	Г	
X I authorize GLOBAL TAXES LLC	to enter or generate my PIN	9 1 3 7 7 as my
ERO firm name signature on the income tax return (original or amended) I ar		nter five digits, but on't enter all zeros
I will enter my PIN as my signature on the income tax return if you are entering your own PIN and your return is filed us below.		
Your signature ▶	Date ▶	
Spouse's PIN: check one box only	_	
l authorize	to enter or generate my PIN	as my
ERO firm name		nter five digits, but
signature on the income tax return (original or amended) I ar	n now authorizing.	on't enter all zeros
I will enter my PIN as my signature on the income tax return if you are entering your own PIN and your return is filed us below.		
Spouse's signature ▶	Date ►	
Practitioner PIN Method Retu	urns 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		6 6 1 9 8 9 hter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the authorized to file for tax year indicated above for the taxpayer(s) indicated requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Au	above. I confirm that I am submitting this re	turn in accordance with the
ERO's signature ▶	Date ▶	
ERO Must Retain This Fo		
Don't Submit This Form to the IR	S Unless Requested To Do So	

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

2022

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 (,	spc	alifying su ouse (QSS	5)	
one box.	•	on is a child but not your dependen	•	rour opouse. It you t	Jilook		QUO DOX,	SITEOI	ino orma	o namo n	trio qualityirig	
Your first name	and mi	ddle initial	Last nar	me					Your s	ocial secu	rity number	
ROHITH I	BABU		BABU	BANDARI LA	XMAN	1			193-	29-13	77	
If joint return, s	pouse's	first name and middle initial	Last nar	me					Spouse	Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no).	Preside	ential Elec	tion Campaign	
1819 ARI	30R 1	JISTA DRIVE								here if you		
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete sp	paces below.	Sta	te	ZIP code				intly, want \$3 I. Checking a	
CHARLOT'	ГЕ				NC	!	28262		box be	low will no	ot change	
Foreign countr	y name		F	Foreign province/state	/count	у	Foreign post	al code	your ta	x or refund You		
Digital		ny time during 2022, did you: (a) rec	,				•	, .	. ,	_		
Assets	exch	ange, gift, or otherwise dispose of					asset)? (Se	e inst	ructions.)	_ ∐ Yes	⊠ No	
Standard Deduction	_	eone can claim:	•			a dependent						
Age/Blindnes:	s You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse	: Was bor	n before Ja	nuary	2, 1958	☐ Is I	blind	
Dependent	s (see	instructions):		(2) Social securit	у	(3) Relationsh	ip (4) Che	ck the	box if qua	lifies for (se	e instructions):	
If more	(1) Fi	irst name Last name		number		to you	Ch	ld tax	credit	Credit for o	other dependents	
than four												
dependents, see instruction	s											
and check _												
here												
Income	1a	Total amount from Form(s) W-2, b	`	,					. 1		L44,247.	
Attack Farms(a)	b	Household employee wages not re	•	` '					. 1			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	. 10									
attach Forms	d	Medicaid waiver payments not rep	. 10									
W-2G and 1099-R if tax	е	Taxable dependent care benefits	. 10									
was withheld.	f	Employer-provided adoption bene) .				. 1			
If you did not	g	Wages from Form 8919, line 6.							. 19			
get a Form W-2, see	h	Other earned income (see instruct	,				· · ·		. 11	h	0.	
instructions.	ı	Nontaxable combat pay election (see instr	fuctions)		<u>1i</u>					144 047	
		Add lines 1a through 1h		<u>.</u>	 				. 1		L44,247.	
Attach Sch. B if required.	2a	· -	2a	2.		axable interes			. 2			
	3a		3a	2.		rdinary divide			. 3	.	2.	
Non-doud	4a 5a		4a 5a			axable amoun axable amoun						
Standard Deduction for—	6a		6a			axable amoun			. 6			
Single or Married filing	C	If you elect to use the lump-sum e		method check here					-			
separately,	7	Capital gain or (loss). Attach Sche		,	`	,					-3,000.	
\$12,950 Married filing	8	Other income from Schedule 1, lin									-9,200.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							. 9	_	L32,049.	
Qualifying surviving spouse,	10	Adjustments to income from Sche		•					. 10		.527015.	
\$25,900 Head of	11	Subtract line 10 from line 9. This is							. 1		L32,049.	
household,	12	Standard deduction or itemized	-	-					1:		12,950.	
\$19,400 If you checked	13	Qualified business income deduct		•	,				. 1		,,	
any box under Standard	14	Add lines 12 and 13							. 1		12,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer									L19,099.	
JOE IIIOU UCUOIIS.	l											

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	22,419.
Credits	17	Amount from Schedule 2, lir	ne 3					17	
	18	Add lines 16 and 17						18	22,419.
	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	22,419.
	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	22,419.
Payments	25	Federal income tax withheld							
-	а	Form(s) W-2				25a 2	5,785.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	25,785.
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	B, 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	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments	·			33	25,785.
Refund	34	If line 33 is more than line 24	34	3,366.					
neiuliu	35a	Amount of line 34 you want	35a	3,366.					
Direct deposit?	b	Routing number 0 8 1							
See instructions.	d	Account number 3 5 5	0 1 0 1	9 9 2 9	9 0				
	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	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 ²	ins	structions				. Yes. 0	Complete	below.	X No
		signee's		Phone			sonal ident	ification	
	na			no.			nber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature	,p. 6.6.1 2 66.14.14.16.11	Date	Your occupation		1		nt you an Identity
	10	ur signature		Date	Tour occupation				PIN, enter it here
Joint return?					SOFTWARE E	NGINEER		e inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.								ntity Prote e inst.)	ection PIN, enter it here
,		/ 44 0 \ 04 5 0 5 0				0.45 - 5			
		one no. (419)315-053 eparer's name	2 Preparer's signat	Email address	ROHITHMANJ2		Check if:		
Paid		•			Date PTIN				
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	02/15/2023	P0208		Self-employed
Use Only		m's name GLOBAL TA			T 00016				(678)965-9522
	Fin	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 088T0	n's EIN	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

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

ROHITH BABU BABU BANDARI LAXMAN

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

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

Your social security number
193-29-1377

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a			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	-9,200.
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		
- 1	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	l, or 1040-NR, line 8	10	-9,200.

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 governr			
	officials. Attach Form 2106	L	12	
13	Health savings account deduction. Attach Form 8889	[13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	[14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction	L	17	
18	Penalty on early withdrawal of savings	L	18	
19a	Alimony paid		I9a	
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	L	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)			
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	_		
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:24z			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	,		23	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	1 01111 1040 01 1040-011, IIIIE 10, 01 1 01111 1040-1110, IIIIE 10a		2 0	

SCHEDULE D (Form 1040)

Department of the Treasury

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 1h, 2, 3, 8h, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. 12

Intern	al Revenue Service Ose Form 6343 to list your train	isactions for lines	1b, 2, 3, 6b, 9, and 1	0.	- `	sequence No. 12
	(s) shown on return HITH BABU BABU BANDARI LAXMAN				social se	ecurity number
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	rt I Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (s	ee ins	tructions)
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) Adjustme to gain or los Form(s) 8949 line 2, colur	ss from , Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and 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.					(3)
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	1,459.	5,689.			-4,230.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	12.	11.			1.
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 (le	ooo) from Forms 1	E01 6701 and 00	224	4	
4 5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-4,229.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	Held More Than	One Year	(see	instructions)
See lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustme to gain or los		(h) Gain or (loss) Subtract column (e) from column (d) and
This whol	form may be easier to complete if you round off cents to le dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colur	, 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	355.	177.			178.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions				13	
	Long-term capital loss carryover. Enter the amount, if any			Carryover	10	
17	Long-term capital loss carryover. Either the amount, if ally	,, non mie io di y	our Capital LUSS	Janyover	1	I

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

178.

14

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -4,051.• 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

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

193-29-1377

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

ROHITH BABU BABU BANDARI LAXMAN

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No. 12A

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 instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra gregate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com (A) Short-term transactions	below. Chec page 1, for ea aplete as mar reported on	k only one kach applicable of the second of	pox. If more than le box. If you han the same box of 9-B showing bas	n one box applies ve more short-te checked as you r sis was reported	s for your s rm transacheed. to the IRS	hort-term transations than will fit	actions, on this page
☐ (B) Short-term transactions☐ (C) Short-term transactions	•	٠,	•	sis wasn't report	ted to the If	RS	
(a) Description of property (Example: 100 sh. XYZ Co.)	Description of property Date acquired disposed of dis						(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/22	1,459.	5,689.			-4,230.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 1h (if Rox A above	al here and inc	lude on your					

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.

-4,230.

above is checked), or line 3 (if Box C above is checked) .

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 ROHITH BABU BABU BANDARI LAXMAN

Social security number or taxpayer identification number

193-29-1377

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 transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on l	Form(s) 1099	-B showing bas				e)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d)	(e) Cost or other basis See the Note below	Adjustment, in If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/21	12/31/22	355.	177.			178.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	355.	177.			178.

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.

Sales and Other Dispositions of Capital Assets

Social security number or taxpayer identification number

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

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

OMB No. 1545-0074

ROHITH BABU BABU BANDA	RI LAXMAN	Г		193-29	-1377		
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 instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term tra gregate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com	below. Chec bage 1, for ea	k only one kach applicab	oox. If more than	one box applies	s for your s rm transac	hort-term transa	ctions,
☐ (A) Short-term transactions☒ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas			•	9)
(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 c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Crypto LLC	01/01/22	12/31/22	12.	11.			1.

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.

12.

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) .

11.

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.

OMB No. 1545-0074

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

Your social security number

ROH:	ITH BABU BABU BANDARI LAXMAN					1	93-2	9-1377		
Par									_	
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule	C . See	instru	ctions. If you are	an indiv	ridual, rep	ort farm	
Α	Did you make any payments in 2022 that would require you	to file	Form(s)	1099? 5	See ins	structions		. Ye	es 🛛 No	
1a	Physical address of each property (street, city, state, ZIF									
A B	PALAMANER HYDERABAD ANDHRA PRADESH IN	51/4	:08							
С										
1b	Type of Property 2 For each rental real estate prope	orty liet	ad		Fo	ir Rental	Doroon	onal Use		
110	Type of Property 2 For each rental real estate prope above, report the number of fair						Da		QJV	
Α	personal use days. Check the Qu	JV box	only	Α		365		0		
В	if you meet the requirements to f			В						
С	qualified joint venture. See instru	ictions	-	С						
Туре	of Property:					'				
	Single Family Residence 3 Vacation/Short-Term Rent	ital	5 Lanc	d	7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	e)			
						Properties				
Incor	no.	+		Α		B) .		С	
3	Rents received	3			00.	В				
4	Royalties received	4			00.					
	nses:	1								
5 5	Advertising	5								
6	Auto and travel (see instructions)	6		5	00.					
7	Cleaning and maintenance	7			00.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		9	00.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14	Repairs	14			00.					
15	Supplies	15		2,0	00.					
16	Taxes	16								
17	Utilities	17		4,0	00.					
18	Depreciation expense or depletion	18								
19	Other (list) Total expenses. Add lines 5 through 19	19		0 0	0.0					
20		20		9,8	00.					
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		-9,2	00.					
22	Deductible rental real estate loss after limitation, if any,			- ,						
	on Form 8582 (see instructions)	22	(9,20	0.)	()	()	
23a	Total of all amounts reported on line 3 for all rental prope	$\overline{}$			23a		500.	<u> </u>	,	
b	Total of all amounts reported on line 4 for all royalty properties				23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d					
е	Total of all amounts reported on line 20 for all properties				23e	9,	300.			
24	Income. Add positive amounts shown on line 21. Do no		-				24			
25	Losses. Add royalty losses from line 21 and rental real estat	te losse	es from li	ne 22. E	nter to	otal losses here	25	(9,200.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, IV, and line 40 on page 2 do not									
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount	in the to	taI on li	ne 41	on page 2 .	26		-9,200.	

D-400 < Staple A		of Yo	ur	022			ina D	ncome Department			DOR Use Only			
			r fiscal year	beginning	1			ended Return and ending			Are you a ve	teran?	Yes No	<u>x</u>
ROHITH	-		-	BAND								se a veteran?	Yes No	
	RBOR V T NC 28		A DRIVE					Your SS Spouse's SS	SN: 19329 SN:	1377	, ,		tic extension to fil	, I
Filing Stat		1. Sing			2. Marri	ed Filing .	Jointly		ed Filing Sepa	arately	ZOZZ ICCCIAI		0 X	10:
10/			d of Househol			fying Wid					Year spou			
			C. for the entinent for the entinent for the entire	-		Yes X	No No		eturn for ded eturn for ded			Date of deaf		
N.C. Educ	cation End	owme	ent Fund: Yo	u may co	ntribute						ng a contribu	_	ating some or	
								NC-EDU and y See instruct)			0. about the Fi		your overpayr	ment
Select box if you, or if married filing jointly, your spouse were out of the country on April 15, 2023, and a U.S. citizen or resident.														
Select box if return is filed and signed by Executor, Administrator, or Court-Appointed Personal Representative.														
FS 1	PP	Y		DT	N	OC	N	TPRES	Y S	PRES	N	VT N	SVT	N
BABU	1819		28262	DS	N	EΑ	N	TD			SD		FDEXT	' N
ROHITH	BABU			BABU	BAN	DARI			19329	1377		MECKL		
											NC	28262		
1819 A	RBOR	VIS	STA DRI	VE					CHAR:	LOTT	E			
06	1	320	149		16			0		26C		0		.
07			0		18	Y		0		26E		0		7020
09			0		20A			6502	:	EU				500
10A			0		20B			0		27		0		# <u>2</u> 4
10B			0		21A			0		29		0		
11 S	Y	I	N		21B			0		30		0		
11		127	50		21C			0		31		0		
13		000	000		21D			0		32		0		
14	1	192	299		26A			0		34		549		
15		59	53		26B			0						
TN	41931	505	32		PN	6	789	559522	-	PP	P02	082703		
	eturn Be ertify that I ha knowledge an		X Remined this return f, they are true, o	and accomporrect, and co		hedules and	549 d statem		Check her to discuss	e if you a	uthorize the N	nents with the pa	epartment of Revaid preparer belo	venue w.
Your Signature	.				Date	Spou	se's Sigr	nature (If filing join	t return, both mu	ıst sign.)	Date	419315 Contact Phor	50532 ne No. <i>(Include area</i>	code)
PAID PREPAR	RER USE ONL	Y If	prepared by a pe	erson other ti	nan taxpay	er, this cert	tification	is based on all info	rmation of which	the prepa	rer has any kno	wledge.		
QVAM DI	ים מעדכ	\īvī ∩	SAGAR GU	ייים	2 15	22	6720	659522				P0208	2702	
Paid Preparer		מ ויוני	UD ARDAG	FI U.	Z IS Date			ntact Phone Numb	er (Include area	code)			EIN, SSN, or PTIN	
If	you ARE N	IOT du		-				F REVENUE, P. OV to: N.C. DE					27640-0640	

Name	(First 10 Characters) BABU BANDA Your Social Security Number	19329	91377
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	132049
7.	Additions to Federal Adjusted Gross Income	7.	13201.
8.	Add Lines 6 and 7	8.	13204
9.	Deductions From Federal Adjusted Gross Income	9.	13204
10.	Child Deduction	9.	
10.	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	
	b. Enter the amount of the child deduction	10b.	
11.	N.C. Standard Deduction	11.	
11.	N.C. Itemized Deduction	11.	
11.	Deduction amount	11.	1275
12.	a. Add Lines 9, 10b, and 11	12a.	1275
12.	b. Subtract Line 12a from Line 8	12b.	11929
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000
14.	N.C. Taxable Income	14.	11929
15.	N.C. Income Tax	15.	595
16.	Tax Credits	16.	393
17.	Subtract Line 16 from Line 15	17.	595
18.	Consumer Use Tax	17.	
10.		10.	
19.	You certify that no Consumer Use Tax is due Add Lines 17 and 18	19.	595
10.	Add Liftes I7 did 10	10.	373
Manth	Carolina Income Tax Withheld		
North			
20a.	Your tax withheld	20a.	650
20a. 20b.	Spouse's tax withheld	20a. 20b.	650
20a. 20b. Other	Spouse's tax withheld Tax Payments	20b.	
20a. 20b. Other 21a.	Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.	
20a. 20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	20b. 21a. 21b.	
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	20b. 21a. 21b. 21c.	
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	21a. 21b. 21c. 21d. 22.	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	21a. 21b. 21c. 21d. 22. 23.	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds	21a. 21b. 21c. 21d. 22. 23. 24.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23	21a. 21b. 21c. 21d. 22. 23. 24. 25.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment int of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 29.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment int of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26c. 26d. EU 26e. 27. 28. Amount 29. 30.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment and of Refund to Apply to: Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	650 650
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou 29. 30. 31.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment and of Refund to Apply to: Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	