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

2022

OMB No. 1545-007

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

•		Single Married filing jointly	Marrie	d filing separate	ly (MFS)	☐ Head of	househo	old (HOH)		lifying sur			
Check only one box.	If vo	u checked the MFS box, enter the na	ame of v	our spouse If yo	u check	ed the HOH o	r OSS b	ny enter th		use (QSS) s name if th			
one box.		on is a child but not your dependent		EVANA TUNUC			I QOO D	ox, critci ti	ic crinc c	, name ii ti	ic qualitying		
Your first name	and mi	ddle initial	Last nar		7011111	1			Your so	cial securi	tv number		
SANDEEP			DUDD						064-06-6398				
	oouse's	first name and middle initial	Last nar						-		curity numbe		
,, -										192-94-6563			
Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Ap	t. no.			on Campaigi		
18627 ME							'		ł	heck here if you, or your			
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	ite	ZIP cod	le			ntly, want \$3		
BOTHELL					WA	A	9801	2		this fund. low will not	Checking a		
Foreign country	name		F	oreign province/st			Foreign	postal code	1	x or refund.			
										You	Spouse		
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a	a reward, award,	or payr	ment for prope	erty or se	ervices); or	(b) sell,				
Assets		ange, gift, or otherwise dispose of a	,				•			X Yes	☐ No		
Standard	Som	eone can claim:	pendent	Your spo	ouse as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-stat	tus alien								
Ago/Blindness	Valu	Were born before January 2, 1	050 [Are blind	Chauca	. Nas ba	rn hofor	a lanuan <i>i</i>	0 1050	☐ Is bl	lind		
			330 _		Spouse		(4)	e January 2			instructions):		
Dependents		rst name Last name		(2) Social sec number	urity	(3) Relationsh to you	nip (3)	Child tax c	•	ı `	ther dependent		
If more than four	(1)	Last name				,			icuit	Orealt for ot			
dependents,													
see instructions	s —												
and check here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	instructions)					. 1a	1			
Income	b	Household employee wages not re	,	,					. 1b				
Attach Form(s)	С	Tip income not reported on line 1a							. 10				
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	•	•					. 10	1			
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26					. 1e	,					
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line	29 .				. 1f				
If you did not	g	Wages from Form 8919, line 6 .							. 19	,			
get a Form	h	Other earned income (see instructi	ions) .						. 1h	1	0.		
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		1i	i						
THOU GOLIOTIS!	Z	Add lines 1a through 1h	. , .						. 1z	: 1:	28,500.		
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	st .		. 2b)			
if required.	3a	Qualified dividends	3a	5.	b C	ordinary divide	nds .		. 3b)	5.		
	4a	IRA distributions	4a		b T	axable amoun	nt		. 4b)			
Standard	5a	_	5a		b T	axable amoun	nt		. 5b)			
• Single or	6a	Social security benefits	6a		b T	axable amoun	nt		. 6b)			
Married filing	С	If you elect to use the lump-sum e			,	,		[_				
separately, \$12,950	7	Capital gain or (loss). Attach Sche							_		-4.		
 Married filing jointly or 	8	Other income from Schedule 1, lin							. 8		0.		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		-					. 9		28,501.		
surviving spouse, \$25,900	10	Adjustments to income from Sche							. 10				
 Head of household, 	11	Subtract line 10 from line 9. This is	,						. 11		28 , 501.		
\$19,400	12	Standard deduction or itemized							. 12		30 , 773.		
 If you checked any box under 	13	Qualified business income deducti							. 13				
Standard Deduction,	14	Add lines 12 and 13									30 , 773.		
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -U This	is your 1	axable incon	ne .		. 15	,	97 , 728.		

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): 1 🗌 881	4 2 🗌 4972	3 🗌		16	17,290.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	17,290.
	19	Child tax credit or credit for other depender	nts from Sched	ule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0				22	17,290.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21 .			23	105.
	24	Add lines 22 and 23. This is your total tax					24	17,395.
Payments	25	Federal income tax withheld from:			1 1			
	а	Form(s) W-2			25a	23 , 031.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c	0.		
	d	Add lines 25a through 25c					25d	23,031.
If you have a	26	2022 estimated tax payments and amount a					26	
qualifying child, attach Sch. EIC. [27	Earned income credit (EIC)			27			
attach Sch. Elc.	28	Additional child tax credit from Schedule 881	2		28			
	29	American opportunity credit from Form 886	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are you	•	-			32	
	33	Add lines 25d, 26, and 32. These are your to	otal payments				33	23,031.
Refund	34	If line 33 is more than line 24, subtract line 2	24 from line 33.	This is the amou	nt you overpai	d . <u>.</u>	34	5,636.
	35a	Amount of line 34 you want refunded to yo		3 is attached, che	ck here	🗆	35a	5,636.
Direct deposit? See instructions.	b	Routing number 0 2 1 0 0 0 3			Checking [Savings		
See mstructions.	d	Account number 4 8 3 0 4 5 3						
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the am For details on how to pay, go to <i>www.irs.go</i>	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to dis				Complete	halow	X No
Designee		signee's	Phone		_	ersonal ident		
	na		no.			ımber (PIN)		
Sign		der penalties of perjury, I declare that I have examin ief, they are true, correct, and complete. Declaration						
Here	Yo	ur signature	Date	Your occupation		If th	e IRS se	nt you an Identity
	1	andeep duddela	03/24/2023				ection P	IN, enter it here
Joint return? See instructions.				PROGRAMME!				nt vo. m en el lee en
Keep a copy for your records.	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat	ion	Ider		nt your spouse an ection PIN, enter it here
	——Ph	one no. (848) 667-5703	Email address	SANDEEPDUDE	DETAGGMATT.	COM	<u> </u>	
		eparer's name Preparer's signa		21117222112000	Date	PTIN		Check if:
Paid		·		GUPTA TALLAM			2703	Self-employed
Preparer		m's name GLOBAL TAXES LLC			1 4 4 7 2 4 7 2 6 2			(678) 965-9522
Use Only			JNSWICK N	J 08816			ı's EIN	84-3171965
						1		01 01,1000

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

SANDEEP DUDDELA

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.

Your social security number 064-06-6398

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	0.
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		
	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
	T. I. I. I. A. I. I. I. A. I. I. I. A. I.	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-SF	k, or 1040-NR, l ine 8	10	0.

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis govern	ment		
	officials. Attach Form 2106		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		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	1	21	
22	Reserved for future use	1	22	
23	Archer MSA deduction		23	
24	Other adjustments:			
a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I 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)			
	· · · · · · · · · · · · · · · · · · ·			
'	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			
i	Housing deduction from Form 2555			
, k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
K	1041)			
Z	Other adjustments. List type and amount:			
-	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
2 6	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here ar			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

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SCHEDULE 2 (Form 1040)

16

Department of the Treasury Internal Revenue Service

Additional Taxes

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

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



Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number SANDEEP DUDDELA 064-06-6398 Part I Tax 1 2 2 Excess advance premium tax credit repayment. Attach Form 8962 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17. 3 Part II **Other Taxes** Self-employment tax. Attach Schedule SE 4 Social security and Medicare tax on unreported tip income. 5 Uncollected social security and Medicare tax on wages. Attach 6 7 Total additional social security and Medicare tax, Add lines 5 and 6 Additional tax on IRAs or other tax-favored accounts, Attach Form 5329 if required, 8 9 Household employment taxes. Attach Schedule H 9 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 11 11 105. 12 12 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 14 Interest on tax due on installment income from the sale of certain residential lots 14 Interest on the deferred tax on gain from certain installment sales with a sales price 15 15

Recapture of low-income housing credit. Attach Form 8611

(continued on page 2)

16

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

Schedule 2 (Form 1040) 2022

Schedule 2 (Form 1040) 2022

Part II Other Taxes (continued)

17	Other additional taxes:			
а	Recapture of other credits. List type, form number, and amount:			
		17a		
b	Recapture of federal mortgage subsidy, if you sold your home			
	see instructions	17b	-	
С	Additional tax on HSA distributions. Attach Form 8889	17c	-	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
е	Additional tax on Archer MSA distributions. Attach Form 8853.	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
I	Tax on accumulation distribution of trusts	171		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
Z	Any other taxes. List type and amount:			
		17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxe on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b.	es. Enter here and	21	105.

SCHEDULE A (Form 1040)

Itemized Deductions

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

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16. Sequence No. 07 Name(s) shown on Form 1040 or 1040-SR Your social security number SANDEEP DUDDELA 064-06-6398 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) 1 Dental 2 Enter amount from Form 1040 or 1040-SR, line 11 | 2 | **Expenses 3** Multiply line 2 by 7.5% (0.075) 3 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. . **Taxes You** 5 State and local taxes. Paid a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, 5a 5,230. **b** State and local real estate taxes (see instructions) 7,926. **c** State and local personal property taxes 5c 5d 13,156. e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filling 5,000. 6 Other taxes. List type and amount: 5,000. Interest 8 Home mortgage interest and points. If you didn't use all of your home You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your instructions and check this box $\dots \dots \dots \dots \dots$ mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited. See 8a 25,373. instructions. b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., 8b c Points not reported to you on Form 1098. See instructions for special 8с 8d 25,373. 9 Investment interest. Attach Form 4952 if required. See instructions . <u>. . . .</u>. 10 25,373. 11 Gifts by cash or check. If you made any gift of \$250 or more, see Gifts to 11 Charity 400. Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more. made a gift and see instructions. You must attach Form 8283 if over \$500. . . . 12 got a benefit for it. see instructions 13 400. Casualty and 15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See **Theft Losses** 15 16 Other—from list in instructions. List type and amount: Other Itemized **Deductions** 16 Total 17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Itemized 17 30,773. Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

SCHEDULE D (Form 1040)

Capital Gains and Losses

2022

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service 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.

Attachment Sequence No. **12**

Name(s) shown on return Your social security number 064-06-6398 SANDEEP DUDDELA Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I. (sales price) (or other basis) combine the result whole dollars. line 2, column (a) 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 1,032. 1,038. -10.-4.2 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 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 7 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 -4. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (a) (d) Adjustments Subtract column (e) (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (g) 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 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III 15 on the back

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Schedule D (Form 1040) 2022

Part	Summary		
16	Combine lines 7 and 15 and enter the result	16	-4.
	• 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? ☐ 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.		
	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 (4.)
	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.		

Form **8949**

Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service 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

Name(s) shown on return
SANDEEP DUDDELA

Social security number or taxpayer identification number

064-06-6398

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)

(C) Short-term transactions	•	` '	•	sis wasn't report	ea to the Ir	10	
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate 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 SECURITIES LLC	01/01/22	12/31/22	1,038.	1,032.	E	-10.	-4.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 12 (if Box A above the line belief) or line 13 (if Box A above the line belief) or line 14 (if Box A above the	al here and inc e is checked), lir	lude on your ne 2 (if Box B	1 020	1 022		1.0	4

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) 2022	Attachment Sequence No. 13	Page
Name(s) shown on return. Do not enter name and social	security number if shown on other side.	Your social security number
SANDEEP DUDDELA		064-06-6398
Caution: The IRS compares amounts report	ted on your tax return with amounts shown on Schedule(s)	K-1.
Part II Income or Loss From Parti	nerships and S Corporations	
Makes If you were at a least week in a	a distribution, dispose of stools or reasive a loop report from	an C correction was much chack

Cautio	on: The IRS compares amounts	reported	d on your ta	x return with	amoun	ts show	n on S	Schedule(s) K-1.			
Part	Income or Loss From Note: If you report a loss, re the box in column (e) on line amount is not at risk, you m	eceive a d 28 and a	istribution, d ttach the req	ispose of stoc uired basis co	k, or rece mputatio	eive a loa on. If you	report	a loss from	an at-ı	risk ac	ation, you i tivity for w	must check hich any
27	Are you reporting any loss not passive activity (if that loss wa	allowed as not re	in a prior y ported on I	ear due to t	ne at-ris	sk or ba	sis lim	nitations, a	prior	year ι	you ansv	wered_"Yes,"
	see instructions before comple	eting this	section .	(b) Enter P fo		heck if				(-) (-		Yes X No
28	(a) Name			partnership; S	for	eign ership	ident	d) Employer ification numb)er	oasis co	heck if mputation quired	any amount is
A	SHRI LAKSHMI PRASANN	A ESTA	TES LLC	P	<u> </u>		86-	-162305	0			Ц
В	1					\dashv					<u> </u>	
C					L	-					<u> </u>	
D_	<u> </u>											
	Passive Income (g) Passive loss allowed		SS Passive income	(i) Nov	nanaliya la	No ess allowe		sive Incor (j) Section 17				
	(attach Form 8582 if required)		Schedule K-1		e Schedu			eduction from				assive income chedule K-1
Α	0.											
В												
С												
D												
29a	Totals											
b	Totals 0.											
30	Add columns (h) and (k) of line	29a .								30		
31	Add columns (g), (i), and (j) of I	ine 29b.								31	(0.)
32	Total partnership and S corp			· ·	ine line	s 30 and	d 31			32		0.
Part	III Income or Loss From	Estate	s and Tru	sts								
33			(a) N	lame							(b) Emp identificatio	
A_												
B	<u> </u>											
	(c) Passive deduction or loss allo		and Loss	Passive income				Nonpassiv ction or loss	e Inco		Ind Loss (f) Other inc	omo from
	(attach Form 8582 if required			n Schedule K-1				hedule K-1		'	Schedu	
Α												
В												
34a	Totals											
b	Totals											
35	Add columns (d) and (f) of line									35		
36	Add columns (c) and (e) of line									36	()
37	Total estate and trust incom		•							37		
Part	V Income or Loss From	Real E	state Mor	tgage Inve				<u> </u>			al Holde	r
38	(a) Name			Employer ation number	Sched	ss inclusic l ules Q , lir instructio	ne 2c	(d) Taxal (net lo Schedule	ss) from	ı		come from les Q , line 3b
39	Combine columns (d) and (e) o	nly. Ente	er the result	here and inc	lude in	the tota	l on lir	ne 41 belov	Ν.	39		
Part												
40 41	Net farm rental income or (loss Total income or (loss). Combi	-		-				 nd on Sche	 dule	40		
	1 (Form 1040), line 5									41		0.
42	Reconciliation of farming a farming and fishing income rep (Form 1065), box 14, code B; S AD; and Schedule K-1 (Form 10	orted on Schedule	Form 4835 K-1 (Form	5, line 7; Sch 1120 - S), box	edule K- 17, cod	1						
43	Reconciliation for real estate professional (see instructions reported anywhere on Form from all rental real estate activ	s), enter 1040, Fo	the net in orm 1040-S	ncome or (I R, or Form	oss) yo 1040-N	R						

43

under the passive activity loss rules

(Rev. November 2019) Department of the Treasury Internal Revenue Service (99)

Allocation of Tax Amounts Between Certain Individuals in Community Property States

► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form8958 for the latest information.

Attachment Sequence No. **63**

OMB No. 1545-0074

Your first name and initial	Your last name		Your social security number				
CANDEED	DIIDDELA		064-06-6398				
SANDEEP Spouse's or partner's first name and initial	DUDDELA Spouse's or partner's last name						
JEEVANA	TUNUGUNTLA		192-94-6563				
	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP				
		SSN <u>064 06 6398</u>	SSN <u>192 94 6563</u>				
1 Wages (each employer) SWANKTEK INC	128,500.	128,500.					
2 Interest Income (each payer)							
2 Interest income (each payer)							
3 Dividends (each payer)							
Robinhood Securities LLC	5.	5.					
4 State Income Tax Refund							
5 Self-Employment Income (See instructions)							
6 Capital Gains and Losses from Form 1040, line 6	-4.	-4.					
7 Pension Income							
8 Rents, Royalties, Partnerships, Estates, Trusts							
from Form 1040, Schedule 1, line 5	0.	0.					

Form 8958 (Rev. 11-2019)

	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP
		SSN 064 06 6398	SSN <u>192 94 6563</u>
Deductible part of Self-Employment Tax (See instructions)			
10 Self-Employment Tax (See instructions)			
11 Taxes Withheld from Form 1040, line 17	23,031.	23,031.	
·			
12 Other items such as: Social Security Benefits, Unemployment Compensation, Deductions, Credits, etc.			

8959 Form

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment Sequence No. 71

Name(s) shown on return

SANDEEP DUDDELA

Your social security number

064-06-6398

Part	Additional Medicare Tax on Medicare Wages		
1	Medicare wages and tips from Form W-2, box 5. If you have more than one		
	Form W-2, enter the total of the amounts from box 5		
2	Unreported tips from Form 4137, line 6		
3	Wages from Form 8919, line 6		
4	Add lines 1 through 3		
5	Enter the following amount for your filing status:		
	Married filing jointly \$250,000		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000 5 125,000.		
6	Subtract line 5 from line 4. If zero or less, enter -0	6	11,707.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to		
_	Part II	7	105.
Part			
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		
	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 8		
9	Enter the following amount for your filing status:		
	Married filing jointly \$250,000		
	Married filing separately \$125,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
10	Enter the amount from line 4		
11	Subtract line 10 from line 9. If zero or less, enter -0		
12	Subtract line 11 from line 8. If zero or less, enter -0	12	
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and		
Dort	go to Part III	13	
Part			
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		
15	(see instructions)	-	
15	Married filing jointly \$250,000		
	Married filing separately \$250,000		
	Single, Head of household, or Qualifying surviving spouse \$200,000		
16	Subtract line 15 from line 14. If zero or less, enter -0	16	
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).	10	
17	Enter here and go to Part IV	17	
Part			
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR		
10	or 1040-SS filers, see instructions), and go to Part V	18	105.
Part			100.
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		
	W-2, enter the total of the amounts from box 6		
20	Enter the amount from line 1		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax		
	withholding on Medicare wages		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax		
	withholding on Medicare wages	22	0.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box		, ·
	14 (see instructions)	23	
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with		
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or		
	1040-SS filers, see instructions)	24	0.

Form **8960**

Net Investment Income Tax—Individuals, Estates, and Trusts

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

Go to www.irs.gov/Form8960 for instructions and the latest information.

OMB No. 1545-2227

2022

Attachment Sequence No. 72

Name(s) shown on your tax return Your social security number or EIN SANDEEP DUDDELA 064-06-6398 Part I Investment Income Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 2 2 3 3 4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) 4b 0. **5a** Net gain or loss from disposition of property (see instructions) 5a -4.b Net gain or loss from disposition of property that is not subject to net 5b Adjustment from disposition of partnership interest or S corporation stock (see 5c 5d Adjustments to investment income for certain CFCs and PFICs (see instructions) 6 7 7 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. 8 Part II Investment Expenses Allocable to Investment Income and Modifications 9a Investment interest expenses (see instructions) State, local, and foreign income tax (see instructions) 9b 9c 9d 10 10 11 11 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0- 12 Individuals: 13 Modified adjusted gross income (see instructions) 13 128,501. 14 Threshold based on filing status (see instructions) 125,000. Subtract line 14 from line 13. If zero or less, enter -0- 15 3,501. 15 16 16 1. 17 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 0. **Estates and Trusts: 18a** Net investment income (line 12 above) 18a Deductions for distributions of net investment income and deductions under 18b c Undistributed net investment income. Subtract line 18b from line 18a (see 18c 19a Adjusted gross income (see instructions) 19a **b** Highest tax bracket for estates and trusts for the year (see instructions) . . . 19b c Subtract line 19b from line 19a. If zero or less, enter -0- 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and

Passive Activity Loss Limitations

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

SANDEEP DUDDELA

See separate instructions. Attach to Form 1040, 1040-SR, or 1041.

Identifying number

064-06-6398

Go to www.irs.gov/Form8582 for instructions and the latest information.

Attachment Sequence No. **858**

OMB No. 1545-1008

Par							
	Caution: Complete Parts IV a	nd V before compl	eting Part I.				
	I Real Estate Activities With Active Pance for Rental Real Estate Activities	- '		tive participation, s	ee Special		
1a b c d	Activities with net income (enter the analysis Activities with net loss (enter the amorprior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, c he amount from Pa	olumn (b)) art IV, column (c))	1b ()	1d	
All Ot	her Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (0. -464.) -1,532.)	2d	-1,996.
3	Combine lines 1d and 2d. If this line all losses are allowed, including any losses on the forms and schedules no	is zero or more, st prior year unallow ormally used .	op here and inclu ed losses entered	de this form with y	our return; Report the	3	- 1,996.
Cautio	If line 3 is a loss and: • Line 1d is a • Line 2d is a on: If your filing status is married filing	loss (and line 1d is	,	rip Part II and go to		vear,	do not complete
	. Instead, go to line 10.	, , , , , , , , , , , , ,	, , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,	, , , , , , , , , , , , , , , , , , ,
Par	•			-			
	Note: Enter all numbers in Par Enter the smaller of the loss on line 1	•		tions for an examp	ole.		
4 5 6	Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	rately, see instructi e, but not less thar	ions n zero. See instruc	ctions 6		4	
7				7			
8	Multiply line 7 by 50% (0.50). Do not e				instructions	8	
9	• • • •					9	0.
Part							
10	Add the income, if any, on lines 1a ar					10	0.
11	Total losses allowed from all passiv		22. Add lines 9 ar	nd 10. See instruct	ions to find		
Dovi	out how to report the losses on your t			· · · · · · · · · · · · · · · · · · ·		11	0.
Part	IV Complete This Part Befor	e Part I, Lines 1	a, 1b, and 1c. S	see instructions.			
	Name of activity		nt year	Prior years	Ove	rall ga	ain or loss
		(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gair	1	(e) Loss
Total.	Enter on Part I, lines 1a, 1b, and 1c						

Form 8582 (2022) Page **2**

Part V	Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			9-
			Currer	nt year		Prior ye	ears	Overall gain or loa		ain or loss
	Name of activity	(a	Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss
SHRI LAKSH	MI PRASANNA ESTATES LLC		0.		464.	1,	532.			1,996.
Total. Enter of	on Part I, lines 2a, 2b, and 2c		0.		464.	1,	532.			
Part VI	Use This Part if an Amour	it Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.			
	Name of activity	an to I	m or schedule d line number be reported on e instructions)	(a)) Loss	(b) Ra	itio	(c) Special allowance		(d) Subtract column (c) from column (a).
Total						1.00)			
Part VII	Allocation of Unallowed L	oss	ses. See instr	uction	S.					
	Name of activity		Form or sche and line nur to be reporte (see instruct	nber ed on	(a) l	_OSS	(b) Ratio	(c	s) Unallowed loss
SHRI LAKS	HMI PRASANNA ESTATES L	LC	E Ln 28	BA		1,996.	1.0	0000000		1,996.
Total						1,996.		1.00		1,996.
Part VIII	Allowed Losses. See instru	ucti	ons.					1122		,
	Name of activity		Form or scho and line nur to be reporte (see instruct	nber ed on	(a) l	_oss	(b) Ur	nallowed loss	((c) Allowed loss
SHRI LAKS	HMI PRASANNA ESTATES L	LC	E Ln 28	А		1,996.		1,996.		0.
Total						1,996.		1,996.		0.





DR 0104 (11/18/22)
COLORADO DEPARTMENT OF REVENUE
Tax. Colorado.gov
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(0013)

2022 Colorado Individual Income Tax Return

	r or Nonresident (or reside dent combination) *Mus			104PN		if Abroa	ad on due d	ate –	
Your Last Name	done combination, made	Your First						Middle In	nitial
DUDDELA		SANDE	EP						
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceased	<u></u>						
12/16/1988	064-06-6398		L		cked and cla R 0102 and				
Enter the following information driver license or state identific		State of Is	ssue	Last 4 o	characters of I	D number	Date of Issua	nce	
If Joint, Spouse's Last Name		Spouse's	First N	ame				Middle Ir	nitial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN	Deceased		If chec	cked and cla R 0102 and	aiming a death ce	refund, you ertificate with	must incl	ude urn.
Enter the following information current driver license or state	n from your spouse's identification card.	State of Is	ssue	Last 4	characters of II	D number	Date of Issua	nce	
Mailing Address						Pho	ne Number		
18627 MERIDIAN PL W							48)667-57		
City		S	State	ZIP Code		Foreign (Country (if app	icable)	
BOTHELL			WA	98012					
To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if: • You are a Colorado resident and at least one person in your household does not have health coverage AND • You give permission for the Colorado Department of Revenue to share the information on Form DR 0104EE with Connect for Health Colorado (the Colorado Health Benefit Exchange) and the Department of Health Care Policy & Financing.									
						Re	ound To The I	learest Do	llar
1. Enter Federal Taxable Inco	P line 15.	come tax	(form	ı: 	• 1			97728	00
Include W-2s and 1099s with 0			_						
2. State Addback, enter the s	Additions to								-
1040 SR, or 1040 SP sche		•		ociai iui	• 2			0	00
3. Qualified Business Income	Deduction Addback (se	ee instruc	tions)	• 3				0 0



DR 0104 (11/18/22)
COLORADO DEPARTMENT OF REVENUE
Tax.Colorado.gov
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220104 21555

220104	21555	Page 2 01 4		
Name			SSN or ITIN	
SANDEEP DUDDE	LA		064-06-6398	
4 Itaminad Dadu	ation addhaolr (aga inaturation	20)		0.0
	ction addback (see instruction			0.0
	Recapture Prior Year - Non-q			0.0
Contribution (s	ee instructions)	• 5		0.0
6 Other Addition	s, explain (see instructions)	• 6		0.0
Explain:	s, explain (see instructions)	• 0		00
•				
			97728	
7. Subtotal, sum	of lines 1 through 6	7	91120	0.0
		Colorado Subtractions		
		e, line 22, you must submit the		
DR 0104AD so	chedule with your return.	• 8		0.0
			97728	
	ble Income, subtract line 8 fro			0.0
		Book for full-year tax table and part-ye	ear DR 0104PN Schedule	_
		PN line 36, you must submit the	3980	00
	th your return if applicable.	• 10		00
	with your return.	AMT line 8, you must submit the • 11		00
DR 0104AWIT	with your return.	♥ 11		00
12. Recapture of p	rior vear credits	• 12		0.0
12: Nocaptare of p	nor your oround	V 12		
13. Subtotal. sum	of lines 10 through 12	13	3980	0.0
		R line 48, the sum of lines 14, 15, and 16		
		DR 0104CR with your return. • 14		0.0
		s used – as calculated, or from the		
		d 16 cannot exceed line 13, you must		
submit the DR	1366 with your return.	• 15		0.0
16. Strategic Capit	al Tax Credit from DR 1330, t	the sum of lines 14, 15, and 16 cannot		
exceed line 13	, you must submit the DR 133	0 with your return. • 16		0.0
			3980	
		Subtract that sum from line 13.		0.0
•		ule line 7, you must submit the		
DR 0104US wi	th your return.	● 18		0.0
			3980	
	Tax, sum of lines 17 and 18	19		0.0
		99s, you must submit the W-2s and/or	5230	
Tuyys claiming	g Colorado withholding with yo	our return. • 20		0.0
24 Deignage Total	matad Tay Carry farmer	04		0.0
	mated Tax Carryforward Payments, enter the sum of the	• 21		0.0
	rayments, enter the sum of t	he quarterly payments remitted for		00
this tax year		• 22		100
23 Extension Day	ment remitted with the DD 01	58.1		0.0
ZJ. EXICHSION Pay	ment remitted with the DR 01	58-I • 23		U



31555

DR 0104 (11/18/22)
COLORADO DEPARTMENT OF REVENUE
Tax. Colorado.gov
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Name					SSN or I	TIN			
SANDEEP DUDDELA					064-0)6-6398			
24. Other Prepayments:				• DR 1079 • 24		0 0			
25. Gross Conservation		it from the DR 1	305G line 33, yo			0 0			
the DR 1305G with y 26. Innovative Motor Ve		tive Truck Credit	from form DR 0	• 25 617. vou must					
submit each DR 061	17 with your retui	n.		• 26		0 0 0			
27. Refundable Credits									
with your return.	• 27		0 0						
28. Subtotal, sum of line	28		⁵²³⁰ 00						
			AGI for TABO						
Lines 30 through 33 29. Federal Adjusted Gr					t your Colorado	tax liability.			
1040 SR line 11, or		128501 00							
30. Nontaxable Social S	Security Income			• 30		0 0			
31. Nontaxable interest	income from sta	te and local hon	ds	• 31		0 0			
						128501			
32. Sum of lines 29 thro			for State Sales	Tay Refund		00			
1611 00 1	\$48,000	\$48,001 –	\$95,001 –	\$151,001 —	\$209,001 -	\$268,001 -			
If line 32 is:	or less	\$95,000	\$151,000	\$209,000	\$268,000	or more			
Single Filers Enter	\$153	\$208	\$234	\$285	\$300	\$486			
Joint Filers Enter	\$306	\$416	\$468	\$570	\$600	\$972			
full-year Colorado re to file a return. Use t	33. State Sales Tax Refund: For full-year Colorado residents, born before 2004, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 32 and reference the table above. See instructions if you are filing an extension. • 33								
34. Sum of lines 28 and	33			34		⁵²³⁰ 00			
35. Overpayment, if line	34 is greater tha	an line 19 then s	ubtract line 19 fr	om line 34 35		1250 00			
36. Estimated Tax Cred	it Carryforward t	o 2023 first quar	ter, if any.	• 36		0 0			
If you have an overpayı Colorado charity, includ				ll or a portion of y	our overpayme	nt to a qualified			
37. Refund, subtract line	e 36 from line 35	(see instruction	s)	• 37		1250 00			
Direct Routing Nur	nber 0 2 1 (0 0 0 3 2 2	Type: X	Checking	Savings	CollegeInvest 529			
Deposit Account Nur	mber 4 8 3 0	0 4 5 3 7 9	9 8 7 6						
For questions regal	rding CollegeInves	et direct deposit or	to open an accour	nt, visit CollegeInve	est.org or call 800	-448-2424.			



220104 41555

DR 0104 (11/18/22) COLORADO DEPARTMENT OF REVENUE Tax. Colorado.gov

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220104 41555	ruge + or +					
Name				SSN or IT	ΓIN	
SANDEEP DUDDELA		<u> </u>		064-0	6-6398	
38. Net Tax Due, subtract line 34 from line 19		38				0 0
39. Delinquent Payment Penalty (see instructions	s)	• 39				0 0
40. Delinquent Payment Interest (see instructions		• 40				0 0
41. Estimated Tax Penalty, you must submit the (see instructions)	DR 0204 with your return.	• 41				0 0
42. Amount You Owe, sum of lines 38 through 4	1	• 42				
The State may convert your check to a one-time electronic by the State. If converted, your check will not be returned. If Revenue may collect the payment amount directly from your	your check is rejected due to insufficier					eceived
	Third Party Designee					
Do you want to allow another person to discuss this return and any related information with the Colorado Department of Revenue? See the instructions.	• X No • Yes	. Complet	te the fo	ollowing:		
Designee's Name			Phone N	lumber		
•		,	•			
Sign Below Under penalties of perjury, I declare that to the	ne best of my knowledge and belief, this	return is tru	e, correct	and comp	lete.	
Your Signature				Date (мм	I/DD/YY)	
Spouse's Signature. If joint return, BOTH must sign.				Date (мм	I/DD/YY)	
Paid Preparer's Name			Paid Prep	arer's Pho	one	
GLOBAL TAXES LLC			(678)	965-95	22	
Paid Preparer's Address	City		State	ZIP Code	e	
245 ROONEY CT	E BRUNSWICK		NJ	08816		

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File and pay at: Colorado.gov/RevenueOnline

If you are filing this return **with** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**6**

If you are filing this return **without** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**5**

These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.





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Form 104PN

Part-Year Resident/Nonresident Tax Calculation Schedule 2022

Taxpayer's Name				SSN or ITIN
SANDEEP DUI	DDELA			064-06-6398
gross income s	you and/or your spouse were a resident of a o that Colorado tax is calculated for only you ugh 9 of the DR 0104. If you filed federal forn	ır Colorado income. Comple	te this for	
1. ● Taxpayer i			Beginning (N	
	Full-Year Resident	Nonresident 305-day rul	le Military	
2. • Spouse is	(mark one): Full-Year Nonresident	Part-Year Resident from	Beginning (N	MMYY) Ending (MM/YY)
	Full-Year Resident	Nonresident 305-day rul	le Military	
3.	ederal form you filed: X 1040 104	40 NR	Othe	r
		Federal Information	Co	lorado Information
1040 SP lir			00	
while you w	ne from line 4 that was earned while working ere a Colorado resident. Part-year residents mbursements only if paid for moving into Co	should include moving	5	118942
	um of all interest/dividend income 1040, 1040 SR or 1040 SP lines 2b • 6	5	00	
	e from line 6 that was earned while you were and the ownership of real or tangible personal pro		7	0 00
Schedule 1,		ļ.	00	
	e from line 8 that is from State of Colorado une			
	r state's benefits that were received while you	were a Colorado resident.	9	00
and line 4 of S	ne from line 7 of form 1040, 1040 SR, or 1040 SP Schedule 1 of form 1040, 1040 SR or 1040 SP. • 10	l l	00	
	ne from line 10 that was earned during that p	• •	11	0 00

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Name SSN or ITIN SANDEEP DUDDELA 064-06-6398 **Federal Information** Colorado Information 12. Enter the sum of all income from form 1040, 1040 SR, 00 or 1040 SP lines 4b, 5b and 6b. 13. Enter income from line 12 that was received during that part of the year you were a Colorado resident. • 13 00 **14.** Enter the sum of all business and farm income from form 1040, 1040 SR, or 1040 SP, Schedule 1, lines 3 • 14 00 15. Enter income from line 14 that was earned during that part of the year you were a Colorado resident and/or was earned from Colorado sources. 0.0 15 16. Enter all Schedule E income from form 1040, 1040 SR, 0 or 1040 SP, Schedule 1, line 5. იი 17. Enter income from line 16 that was earned from Colorado sources; and/or rent and royalty income received or credited to your account during the part of the year you 0 were a Colorado resident: and/or partnership/S corporation/fiduciary income that is taxable to Colorado during the tax year. 00 • 17 18. Enter the sum of all other income from form 1040, 1040 SR, or 1040 SP, Schedule 1, lines 1, 2a 00 and 9. 18 List Type 19. Enter income from line 18 that was earned during that part of the year you were a 00 Colorado resident and/or was derived from Colorado sources. • 19 List Type 20. Total Income, Enter amount from form 1040, 1040 SR. 128501 00 or 1040 SP. line 9. 20 **21.** Total Colorado Income. Enter the total from the Colorado column, lines 5, 7, 9, 11, 118942 00 13. 15. 17 and 19. 21 22. Enter all federal adjustments from form 1040, 1040 SR, or 1040 SP. line 10. 00 22 List Type 00 23. Enter adjustments from line 22 as follows 23 List Type

- Educator expenses, IRA deduction, business expenses of reservists, performing artists and fee-basis government officials, health savings account deduction, self-employment tax, self-employed health insurance deduction, SEP and SIMPLE deductions are allowed in the ratio of Colorado wages and/or self-employment income to total wages and/or self-employment income.
- Student loan interest deduction, alimony, and tuition and fees deduction are allowed in the Colorado to federal total income ratio (line 21 / line 20).
- · Penalty paid on early withdrawals made while a Colorado resident.
- · Moving expenses for members of the Armed Forces.

For treatment of other adjustments reported on federal form 1040, 1040 SR, or 1040 SP, line 10, see the Colorado Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents.

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Nar	me				SSN or ITIN
SF	ANDEEP DUDDELA				064-06-6398
			Federal Information		Colorado Information
24.	Adjusted Gross Income. Enter amount from fo	orm 1040.			
	1040 SP, or 1040 SR line 11.	24	128501	00	
25.	Colorado Adjusted Gross Income. Subtract th	ne amount	on line 23 of Form 104PN		118942
	from the amount on line 21 of Form 104PN.			25	00
26.	Additions to Adjusted Gross Income. Enter th	e sum of			
	lines 3 through 6 of Colorado Form 104 exclu	uding any			
	charitable contribution adjustments.	• 26		00	
27.	Additions to Colorado Adjusted Gross Incor	ne. Enter	any amount from		
	line 26 that is from non-Colorado state or lo	ocal bond i			
	a Colorado resident.*			27	0.0
			128501		
28.	Total of lines 24 and 26	28	120001	00	
					118942
	Total of lines 25 and 27			29	00
30.	Subtractions from Adjusted Gross Income. Er				
	amount from line 8 of Colorado Form 104 exc	_			
	any qualifying charitable contributions.	• 30		00	
31.	Subtractions from Colorado Adjusted Gross II	ncome.			
	Enter any amount from line 30 as follows:			31	00
	• The state income tax refund subtraction to the				
	• The federal interest subtraction to the extent				
	• The pension/annuity subtraction and the PERA				
	The Colorado Agricultural capital gain subtra				
	For treatment of other subtractions, see t Part-Year Residents & Nonresidents.	ine inaivia	iuai income Tax Guide an	a/or	the income Tax Topics:
22	Modified Adjusted Gross Income. Subtract lin	o 20			
32.	from line 28.	32	128501	00	
-	HOITI IIIIe 20.	32		00	
33.	Modified Colorado Adjusted Gross Income. S	ubtract line	e 31 from line 29	33	118942 00
	Divide line 33 by line 32. Round to four signific				00
	e.g. xxx.xxxx	34	92.5611	%	
		<u> </u>	I	1.5	4200
35.	Tax from the tax table based on income repor	rted on the	DR 0104 line 9	35	4300 00
	Apportioned tax. Multiply line 35 by the percent				
L	line 34. Enter here and on DR 0104 line 10.	36	3980	00	

^{*} See the Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents for treatment of other additions.

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