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

	5				
Submi	ission Identification Number (SID)				
Taxpaye	er's name	Social secur	ity num	ber	
RANZ	ADHEER KAMINENI	710-97	-700	7	
Spouse'	's name	Spouse's so	cial sec	urity numbe	er
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	r vear vou :	are all	thorizino	1)
	whole dollars only on lines 1 through 5.	i yeai you a	ale au	itilonzing	J· <i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1 1	130	0,580.
2	Total tax		2		4,567.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,502.
4	Amount you want refunded to you		4		8,935.
5	Amount you owe		5	<u> </u>	3,733.
Part		keep a cop	y of y	our retu	urn)
my know return (to send for any Agent t payment authoria payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended by by by an acknowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abortonically a managed of the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for redelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account into the form of the financial institution account into the financial interval for a payment of estimated tax, and the financial institution into the financial into the financial institution into the financial into the financial institution into the financial institution into the financial institution into the financial institution involved in the financial institution information necessary to answer inquiries and resolve issues related to the alignment of the financial institution or amended) I are a financial information or amended) I are a financial information or amended) I are financial withdrawal Concept.	ve are the amnitter, or electricection of the dispersion of the dispersion of the dispersion of the authorizate the authorizate must be processing opayment. I fur	rounts to conic recransminand its cax preparation. The receipt the electron and the recrease of the electron are recreased to	from the inturn original ssion, (b) to designated paration so to this according to the five downward or to the five downward or the five downward for the	ncome tax ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 ayment of e that the
	nic Funds Withdrawal Consent. Nyer's PIN: check one box only]
X		my PIN	7	0 0 7	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	. Ei		digits, but er all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN metibelow.				
Your s	signature ▶ Date ▶				
Spous	se's PIN: check one box only	_			
	I authorize to enter or generate	my PIN			as my
	ERO firm name	_	nter five	digits, but] do my
	signature on the income tax return (original or amended) I am now authorizing.	de	on't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN meti below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	/			
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9 Don't en	6 6		8 9
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of	ax return (orig	jinal or urn in a	amended) accordanc	
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

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

OMB No. 1545-0074

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

Filing Status Check only one box.		Single Married filing jointly u checked the MFS box, enter the na								spo	use (QSS	5)		
		son is a child but not your dependent												
Your first name	and m	iddle initial	Last na	me							our social security number			
RANADHE				NENI							97-700			
If joint return, s	pouse's	s first name and middle initial	Last na	me						Spouse	's social s	ecurity number		
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.		Preside	ntial Elec	tion Campaign		
231 PAL	ACIO	ST									nere if you			
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	ZIP	code				intly, want \$3 I. Checking a		
IRVING					TX		75	039		_		ot change		
Foreign country name				oreign province/state/	count	у	Fore	ign postal	code					
											You	Spouse		
Digital Assets		ny time during 2022, did you: (a) rece lange, gift, or otherwise dispose of a	•				•		, .	. ,	Yes	s 🔀 No		
Standard		eone can claim: You as a de					4000	.,. (0001	110114	01.01.0.)				
Deduction		Spouse itemizes on a separate return	•			и асрепасті								
Age/Blindnes	s You:	Were born before January 2, 1	958	Are blind Spo	ouse	☐ Was bor	rn be	fore Janu	ary 2	, 1958	☐ Is l	blind		
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	nip	(4) Check	the bo	x if quali	fies for (se	e instructions):		
If more	(1) F	irst name Last name		number		to you		Child	tax cr	edit	Credit for o	other dependents		
than four														
dependents, see instruction	s ——													
and check	. —													
here L														
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instructions) .						. 1a	1 1	L46,186.		
	b	Household employee wages not re	ported	on Form(s) W-2 .						. 1b)			
Attach Form(s) W-2 here. Also	С	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '							. 10	;				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							. 1d	ı				
W-2G and 1099-R if tax	е	· · · · · · · · · · · · · · · · · · ·							. 1e	•				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								. 1f				
If you did not	g	Wages from Form 8919, line 6 .								. 1g	1			
get a Form W-2, see	h	Other earned income (see instructi	,				i		-	. 1h	1	0.		
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>								
	Z									. 1z		L46,186.		
Attach Sch. B	2a		2a			axable interest				. 2b		86.		
if required.	3a		3a			rdinary divide			•	3b				
	4a		4a -			axable amoun				4b				
Standard Deduction for—	5a		5a			axable amoun				. 5b				
Single or	6a	,	6a			axable amoun	τ.			. 6b)			
Married filing separately,	c	If you elect to use the lump-sum e			•		•			╡┞ ╷		1 000		
\$12,950	7	Capital gain or (loss). Attach Sched					•		٠ ـ	J 7		-1,802.		
 Married filing jointly or 	8	Other income from Schedule 1, lin		This is your total inc					•	. 8		-13,890.		
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							•	9		L30,580.		
\$25,900	10	Adjustments to income from Sche	-						•	10		20 500		
 Head of household, 	11	Subtract line 10 from line 9. This is	-	-					•	11		130,580.		
\$19,400	12	Standard deduction or itemized Qualified business income deduction				 5 A			•	12		12,950.		
 If you checked any box under 	13								•	13		12 050		
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer							•	14		12,950.		
see instructions.	13	Capitact into 14 ITOHT little 11. II Zer	o or ies	ع, حالت -ن ااااه اه y	our t	avanie ilicoli	i.C		•	15	, <u> </u>	L17,630.		

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check if any fro	m Form	n(s): 1 881	4 2 49	72 ;	3 🗌		16	22,067.
Credits	17	Amount from Schedule 2, line 3 .							17	
	18	Add lines 16 and 17							18	22,067.
	19	Child tax credit or credit for other de	penden	its from Sched	ule 8812 .				19	
	20	Amount from Schedule 3, line 8 .							20	7,500.
	21	Add lines 19 and 20							21	7,500.
	22	Subtract line 21 from line 18. If zero	or less,	enter -0					22	14,567.
	23	Other taxes, including self-employm	ent tax,	from Schedule	2, line 21				23	0.
	24	Add lines 22 and 23. This is your tot	al tax						24	14,567.
Payments	25	Federal income tax withheld from:								
-	а	Form(s) W-2				. [25a 23	3,502.		
	b	Form(s) 1099					25b			
	С	Other forms (see instructions)				. [25c			
	d	Add lines 25a through 25c							25d	23,502.
I	26	2022 estimated tax payments and a	nount a	applied from 20	21 return .				26	
If you have a qualifying child,	27	Earned income credit (EIC)				.	27			
attach Sch. EIC.	28	Additional child tax credit from Sched					28			
	29	American opportunity credit from Fo	rm 8863	3, line 8		. 1	29			
	30	Reserved for future use				. 1	30			
	31	Amount from Schedule 3, line 15 .				- 1	31		7	
	32	Add lines 27, 28, 29, and 31. These							32	
	33	Add lines 25d, 26, and 32. These are	,	•	-				33	23,502.
Refund	34	If line 33 is more than line 24, subtra							34	8,935.
Returia	35a	Amount of line 34 you want refunde					•	. 🗆	35a	8,935.
Direct deposit?	b	Routing number 1 1 1 9 0						Savings		
See instructions.	d	Account number 7 6 9 0 0						3.		
	36	Amount of line 34 you want applied			d tax	<u> </u>	36			
Amount	37	Subtract line 33 from line 24. This is								
You Owe	•	For details on how to pay, go to www		•		ons .			37	
	38	Estimated tax penalty (see instruction	ns) .			.	38			
Third Party	Do	you want to allow another person	to disc	cuss this retur	n with the I	IRS?	See			
Designee ²	ins	tructions					. Tyes. C	omplete	below.	X No
		signee's		Phone				onal ident	ification	
	naı			no.				ber (PIN)		
Sign		der penalties of perjury, I declare that I have ef, they are true, correct, and complete. De								
Here		ur signature	J. C.	Date	Your occupat	•	ou on an informati			nt you an Identity
	10	ar signature		Date	Tour occupat	LIOII				PIN, enter it here
Joint return?					SOFTWAR	RE D	EVELOPER	(see	e inst.)	
See instructions.	Sp	ouse's signature. If a joint return, both mus	t sign.	Date	Spouse's occ	cupatio	n			nt your spouse an
Keep a copy for your records.									ntity Prote e inst.)	ection PIN, enter it here
,		(0.51) 0.55						(300		
		one no. (361)355-3559	, .	Email address	K0007RA	ANA@	GMAIL.COM	DTIN		0
Paid		· '	r's signa		GIIDEI =		Date	PTIN	0000	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM SYAM		KAM SAGAR	GUPTA TAL	ıLAM	02/08/2023	P0208		Self-employed
Use Only		n's name GLOBAL TAXES L			- 00077					(678)965-9522
		n's address 245 ROONEY CT		JNSWICK NO	08816			Firm	n's EIN	84-3171965
Go to www.irs.go	ov/Forn	1040 for instructions and the latest information	ation.		BAA		REV 01/28/23 PRO			Form 1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022

Attachment
Soguence No. 01

Department of the Treasury Internal Revenue Service

RANADHEER KAMINENI

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.

	Sequence No. 01	
Your soci	al security number	r
710_97	_7007	

Taxable refunds, credits, or offsets of state and local income taxes	-13,890.
Alimony received	-13,890.
Business income or (loss). Attach Schedule C	-13,890.
Business income or (loss). Attach Schedule C	-13,890.
Other gains or (losses). Attach Form 4797	-13,890.
6 Farm income or (loss). Attach Schedule F. 6 7 Unemployment compensation 7 8 Other income: 8a () a Net operating loss 8a () b Gambling 8b	-13,890.
7 Unemployment compensation	
8 Other income: a Net operating loss	
a Net operating loss	
b Gambling	
c Cancellation of debt 8c	
d Foreign earned income exclusion from Form 2555	
e Income from Form 8853	
f Income from Form 8889	
g Alaska Permanent Fund dividends 8g	
h Jury duty pay	
i Prizes and awards	
j Activity not engaged in for profit income 8j	
k Stock options	
I Income from the rental of personal property if you engaged in the rental	
for profit but were not in the business of renting such property 8I	
m Olympic and Paralympic medals and USOC prize money (see	
instructions)	
n Section 951(a) inclusion (see instructions)	
o Section 951A(a) inclusion (see instructions)	
p Section 461(I) excess business loss adjustment	
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	
t Pension or annuity from a nonqualifed deferred compensation plan or	
a nongovernmental section 457 plan	
u Wages earned while incarcerated 8u	
z Other income. List type and amount:	
9 Total other income. Add lines 8a through 8z	
10 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	-13,890.

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

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

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 03

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

Your social security number 710-97-7007

Pai	Nonretundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. Attach	2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Alternative motor vehicle credit. Attach Form 8910	6e		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f 7,500.		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
-1	Amount on Form 8978, line 14. See instructions	61		
Z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	7,500.
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-	SR, or 1040-NR,		
	line 20		8	7,500.
		(Co	ontinue	ed on page 2)

Schedule 3 (Form 1040) 2022 Page **2**

Par	Other Payments and Refundable Credits			·
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h		
Z	Other payments or refundable credits. List type and amount:			
		13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31		15	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

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

Go to www.irs.gov/ScheduleD for instructions and the latest information. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

	(s) shown on return					curity number	
	NADHEER KAMINENI				-97-	7007	
	rou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona						
Pai	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)	
lines	e instructions for how to figure the amounts to enter on the is below. In proceeds (sales price) In proceeds (sales price) In proceeds (sales price) In proceeds (or other basis) In proceeds (or other basis) In proceeds (or other basis)					(h) Gain or (loss) Subtract column (e) from column (d) and combine the result	
	e dollars.	in (g)	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	5,154.	7,279.		222	-1,802.	
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	3,134.	1,219.	323.		-1,002.	
3	Totals for all transactions reported on Form(s) 8949 with Box C checked						
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4		
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	5		
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss 	Carryover	6	()	
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	-1,802.	
Par	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see i	instructions)	
	nstructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmer		(h) Gain or (loss) Subtract column (e)	
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, line 2, colum	Part II,	from column (d) and combine the result with column (g)	
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.						
	Totals for all transactions reported on Form(s) 8949 with Box D checked						
9	Totals for all transactions reported on Form(s) 8949 with Box E checked						
10	Totals for all transactions reported on Form(s) 8949 with Box F checked						
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11		
	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 Worksheet in the instructions				14	()	
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part III			

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -1,802. • 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. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 1,802.) • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

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

Social security number or taxpayer identification number

710-97-7007

RANADHEER KAMINENI

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

Part I
Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, *or* C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

) Short-term transactions	•	, ,	•	sis wasn't report	ea to the if	10		
1 (a) Description of property		(b) (c) Date squired Date s	(c) Date sold or	ate sold or Proceeds See	(e) Cost or other basis See the Note below	Adjustment, i 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).	
Robinh	nood Securities LLC	05/11/22	12/31/22	5,154.	7,279.	W	323.	-1,802.	
nega Sche	ls. Add the amounts in column tive amounts). Enter each tot dule D, line 1b (if Box A above	al here and inc e is checked), li i	lude on your ne 2 (if Box B	5 154	7 279		373	_1 802	

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.

REV 01/28/23 PRO

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

RAN	ADHEER KAMINENI					7	10-9	7-7007	1	
Par										
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	e instru	ctions. If you are	an indi	vidual, rep	ort farm	
Α	Did you make any payments in 2022 that would require you	to file l	Form(c) 1	0002 9	Soo inc	tructions			os 🛛 No	-
	If "Yes," did you or will you file required Form(s) 1099?									
				• •	• •		• •		<u> </u>	-
1a	Physical address of each property (street, city, state, ZIF		<u> </u>							_
Α	7-32RAYAPATANAM RD, MADHIRA KHAMMAM TEL	LANGA	NA IN	5072	03					_
В										_
С										_
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair				Fa			al Use	QJV	
Α.						Days	Da			_
A B	gersonal use days. Check the Qui			A B	-	365		0		-
C	qualified joint venture. See instru	ictions.		С						_
	of Property:									_
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental				
	Multi-Family Residence 4 Commercial	tai	6 Roya			Other (describ	<u>_</u>)			
	Width anny residence 4 Commercial		O Hoye	11100						-
						Properties	:			_
Incon				Α		В			С	_
3	Rents received	3		- 6	20.					_
4	Royalties received	4								_
	nses:	_								
5	Advertising	5 6			110					_
6 7	Auto and travel (see instructions)	7			310. 350.					_
8	Commissions	8		Ι,υ	50.					-
9	Insurance	9								-
10	Legal and other professional fees	10								-
11	Management fees	11		1,4	10.					-
12	Mortgage interest paid to banks, etc. (see instructions)	12								-
13	Other interest	13								_
14	Repairs	14		3,5	80.					
15	Supplies	15		3,7	00.					
16	Taxes	16								
17	Utilities	17		3,9	60.					
18	Depreciation expense or depletion	18								
19	Other (list)	19								_
20	Total expenses. Add lines 5 through 19	20		14,5	510.					_
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	04		-13,8	an					
22	Deductible rental real estate loss after limitation, if any,	21		10,0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					-
22	on Form 8582 (see instructions)	22	1	13,89	an 1	(١	(١
23a	Total of all amounts reported on line 3 for all rental prope				23a		<u>)</u> 520.	(1
b	Total of all amounts reported on line 4 for all royalty properties.				23b					
C	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					
e	Total of all amounts reported on line 20 for all properties				23e	14,5	510.			
24	Income. Add positive amounts shown on line 21. Do no						24			
25	Losses. Add royalty losses from line 21 and rental real estat		-		Enter to	otal losses here	25	(13,890.)
26	Total rental real estate and royalty income or (loss).									_
	here. If Parts II, III, IV, and line 40 on page 2 do not	apply	to you,	also ei	nter th	is amount on				
	Schedule 1 (Form 1040) line 5. Otherwise, include this ar	mount	in the tot	al on l	ina /11	on nage 2	06		_12 200	

(Rev. January 2023)

Department of the Treasury

Tentative Credit

Year, make, and model of vehicle.

Use a separate column for each vehicle. If you need more columns,

use additional Forms 8936 and include the totals on lines 12 and 19.

Enter date vehicle was placed in service (MM/DD/YYYY)

If the vehicle is a two-wheeled vehicle, enter the cost of

Vehicle identification number (see instructions)

Internal Revenue Service

Part I

1

2

3

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles and New Clean Vehicles)

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

OMB No. 1545-2137

Attachment Sequence No. **69**

(b) Vehicle 2

Identifying number Name(s) shown on return RANADHEER KAMINENI 710-97-7007

Note: This credit is for qualified plug-in electric drive motor vehicles placed in service before 2023, qualified two-wheeled plug-in electric vehicles acquired before but placed in service in 2022, and new clean vehicles placed in service after 2022. See separate instructions for vehicle definitions and other requirements.

1

2

3

(a) Vehicle 1

5YJ3E1EB7NF317829

08/05/2022

TESLA

MODEL 3

+ a	the vehicle. If the vehicle has at least four wheels, see								
	instructions	4a	7,50	0.					
			.,,55	••					
b	Phase-out percentage (see instructions)	4b	100.00	%	%				
c	Tentative credit. Multiply line 4a by line 4b	4c	7,50	0.					
Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation,									
skip Part II and go to Part III. All others, go to Part II.									
Part II Credit for Business/Investment Use Part of Vehicle									
Part	Credit for Business/Investment Use Part of	venic	cie	_					
5	Business/investment use percentage (see instructions)	5		%	%				
5	business/investment use percentage (see instructions)	3) - 	70	76				
6	Multiply line 4c by line 5. If the vehicle has at least four			ш					
0 =	wheels, leave lines 7 through 10 blank and go to line 11	6							
	ooio, rouvo iii.oo r aiiioagii ro ziaiiii aiia go to iii.o								
7	Section 179 expense deduction (see instructions) .	7							
	,								
8	Subtract line 7 from line 6	8							
9	Multiply line 8 by 10% (0.10)	9							
10	Maximum credit per vehicle	10	2,	500	2,500				
11	For vehicles with four or more wheels, enter the								
	amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11							
	vehicle, enter the smaller of line 9 of line 10	- 1 1							
12	Add columns (a) and (b) on line 11			12					
	rida delarriro (a) aria (b) erririro (11								
13	Qualified plug-in electric drive motor vehicle credit from p	artnei	ships and S corporations						
	(see instructions)			13					
	•								
14	Business/investment use part of credit. Add lines	nd 13. Partnerships and							
	S corporations, stop here and report this amount on Schedule K. All others, report this								
-	amount on Form 3800, Part III, line 1y			14					
Note: Complete Part III to figure any credit for the personal use part of the vehicle.									

Form 8936 (Rev. 1-2023) Page **2**

1 01111 0	900 (Hev. 1-2023)				rage Z
Part	Credit for Personal Use Part of Vehicle				
			(a) Vehicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15	7,5	00.	
16	Multiply line 15 by 10% (0.10)	16		L	
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17			
18	For vehicles with four or more wheels placed in service before 2023, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17. For vehicles placed in service after 2022, see instructions	18	7,5	00.	
19	Add columns (a) and (b) on line 18			19	7,500.
20	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18				22,067.
21	Personal credits from Form 1040, 1040-SR, or 1040-NR (21			
22	Subtract line 21 from line 20. If zero or less, enter -0- and the personal use part of the credit	22	22,067.		
23	Personal use part of credit. Enter the smaller of line Schedule 3 (Form 1040), line 6f. If line 22 is smaller than I			23	7,500.
- 1				REV 0	1/28/23 PRO Form 8936 (Rev. 1-2023)

DO NOT FILE