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

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OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separately (l	MFS)	Head of	housel	nold (HOI	H) [ifying surv ise (QSS)	iving
one box.	•	u checked the MFS box, enter the n on is a child but not your dependent	•	our spouse. If you c	heck	ed the HOH or	r QSS I	oox, ente	er the	child's	name if the	e qualifying
Your first name and middle initial Last name								Your social security number				
INDRA SI	R REDDY	I						383-47-3996				
If joint return, s	first name and middle initial	me						Spouse's social security number				
RAMYA SI	REE	ANTI						APPLIED FOR				
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Α	pt. no.		Presider	ntial Electio	n Campaign
15800 BI	RONTI	E LANE									ere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	e	ZIP co	ode				tly, want \$3 Checking a
NORTHLAKE					TX		762	47		_	ow will not	•
Foreign country name				Foreign province/state/county			Foreig	n postal co	ode	your tax	or refund.	Ü
											You	Spouse
Digital Assets		ny time during 2022, did you: (a) recange, gift, or otherwise dispose of a	•				•	,		,	Yes	⊠ No
Standard		eone can claim: You as a de				a dependent	,	(/		
Deduction Deduction	_	Spouse itemizes on a separate retur	•									
Age/Blindnes			958	Are blind Sp	ouse:	☐ Was bor		re Janua	_		☐ Is bli	
Dependents (see instructions):				(2) Social security				.			•	•
If more	(1) Fi	rst name Last name		number		to you		Child to	ax cre	dit	Credit for oth	ner dependents
than four dependents,								L	<u>_</u>		L	
see instruction	s ——							L	<u>_</u>		L	
and check	_								<u> </u>			
here											<u> </u>	
Income	1a	Total amount from Form(s) W-2, b	•	*						1a 1b	9	2,179.
A44	b	, , , , , , , , , , , , , , , , , , , ,										
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26								1e		
was withheld.	f	Employer-provided adoption bene	fits from	1 Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6.								1g		
get a Form W-2, see	h	Other earned income (see instruct	,							1h	-	0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>						
	Z	Add lines 1a through 1h								1z	9	2,179.
Attach Sch. B	2a	' <u>-</u>	2a			axable interest				2b		
if required.	3a		3a	6.		rdinary divide				3b		6.
	4a		4a			axable amoun				4b		
Standard Deduction for—	5a	-	5a			axable amoun				5b		
Single or	6a	Social security benefits 6a b Taxable amount								6b		
Married filing separately,	_ c	If you elect to use the lump-sum election method, check here (see instructions)								7		1 440
\$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here										1,449.
Married filing jointly or	8	Other income from Schedule 1, lin								8	+ -	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•						9	9	3,634.
\$25,900 spouse,	10	Adjustments to income from Sche	-							10	+	
Head of household,	11	Subtract line 10 from line 9. This is	•							11		3,634.
\$19,400	12	Standard deduction or itemized		•	,					12	2	25,900.
If you checked any box under	13	Qualified business income deduct								13	+	
Standard Deduction,	14	Add lines 12 and 13								14		25,900.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is y	our t	axable incom	те .			15	6	57,734.

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	7,716.
Credits	17	Amount from Schedule 2, lin	🗔	17					
	18	Add lines 16 and 17		18	7,716.				
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ne 8					20	
	21	Add lines 19 and 20					7	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			7	22	7,716.
	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				7	24	7,716.
Payments	25	Federal income tax withheld							· ·
,	а	Form(s) W-2				25a 13	,330.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	.5d	13,330.
	26	2022 estimated tax payment						26	· · · · · · · · · · · · · · · · · · ·
If you have a 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							
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31				ndable credits	;	32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments			[33	13,330.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you overpaid	;	34	5,614.
neiuliu	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	s is attached, chec	k here	. 🗆 🖪	5a	5,614.
Direct deposit?	b	Routing number 1 2 1					avings		
See instructions.	d	Account number 3 2 5	0 5 3 9	2 6 4 3	3 4				
	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 For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party Designee	Do	you want to allow another	person to disc	cuss this retu		See	mplete belo	ow.	⊠ No
Designee		signee's		Phone			nal identifica		
		mě		no.		numbe	er (PIN)		
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com							
Here	Yo	ur signature	Date Your occupation					t you an Identity	
			CORPUADE ENGINEED			Protection (see inst		N, enter it here	
Joint return? See instructions.		ougo's signature. If a joint return I	acth must sign	Data	SOFTWARE E			<u> </u>	t vour apouloo ap
Keep a copy for	Sμ	Spouse's signature. If a joint return, both must sign.			Date Spouse's occupation				your spouse an otion PIN, enter it here
your records.							(see inst	.)	
	Ph	one no. (786)340-337	6	Email address	INDRASHEKAR.(GUMMI@GMAIL.COM	M		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/18/2023	P020827	03	Self-employed
Preparer	Fir	m's name GLOBAL TA	XES LLC				Phone n	o. (f	578)965-9522
Use Only	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's E	IN	84-3171965
Go to www.irs.go	ov/Forr	n1040 for instructions and the late	st information.		BAA	REV 02/10/23 PRO			Form 1040 (2022)

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

Department of the Treasury Internal Revenue Service

Name(s) shown on return

INDRA SHEKAR REDDY GUMMI & RAMYA SREE SURKANTI

383-47-3996

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, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 1,449. 314,535. 318,401. 5,315. 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 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 1,449. 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) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 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 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

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

14

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 1,449. 16 Combine lines 7 and 15 and enter the result 16 • 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 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), 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

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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

Name(s) shown on return						Social security number or taxpayer identification number				
INDRA SHEKAR REDDY GUMMI & RAMYA SREE SURKANTI 383-47-3996										
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				eld 1	year or le	ess are ger	nerally short-te	rm (see		
Note: You may agg reported to the IRS Schedule D, line 1a	and for whi	ich no adjus	stments or cod	les are	e required	d. Enter th	e totals directly	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	page 1, for ea	ach applicab	le box. If you ha	ve mor	re short-te	rm transac				
☒ (A) Short-term transactions☐ (B) Short-term transactions☐ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas				•)		
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost or oth See the No	(e) other basis Note below	See the separate instructions.		(h) Gain or (loss) Subtract column (e)		
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	in the	e Column (e) e separate tructions.	(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	314,535.	31	8,401.	W	5,315.	1,449.		

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 318,401. above is checked), or line 3 (if Box C above is checked) . 314,535. 5,315. 1,449.

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.



Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents.
 ▶ See separate instructions.

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

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Application type (check one box):

Before you begin • Don't submit th	ı: is form if you have, or are eligil	ble to get, a U.S.	. social sec	urity number (S	SN).		ply for a new ITIN new an existing ITIN			
	ubmitting Form W-7. Read the ederal tax return with Form V									
a Nonresident	alien required to get an ITIN to cla	aim tax treaty bene	efit							
b Nonresident	alien filing a U.S. federal tax return	n								
	t alien (based on days present in		_							
d Dependent of	of U.S. citizen/resident alien	d, enter relationsh	ip to U.S. cit	tizen/resident alie	n (see instr	ructions) 🕨				
e X Spouse of U		d or e, enter name			resident a	lien (see ins				
	,	NDRA SHEKAI					383-47-3996			
	alien student, professor, or resear	_	ederai tax re	turn or claiming a	n exceptio	on				
h Other (see in	spouse of a nonresident alien hold	-								
•	on for a and f : Enter treaty country	>		and treaty a	ticle numb	 ner ▶				
Name	1a First name		dle name	and troaty a	name					
(see instructions)	RAMYA SREE					SURKANTI				
Name at birth if	1b First name	Midd	ddle name Last r			name				
different ►										
Applicant's Mailing	2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 15800 BRONTE LANE									
Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate. NORTHLAKE TX USA 76247									
Foreign (non- U.S.) Address	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.									
(see instructions)	City or town, state or province, and country. Include postal code where appropriate.									
Birth	4 Date of birth (month / day / year)		5 Male							
Information	06/06/1996	INDIA				★ Female				
Other Information	6a Country(ies) of citizenship INDIA	6b Foreign tax I.I	D. number (it	fany) 6c Type	of U.S. vis	sa (if any), ni	umber, and expiration date			
	6d Identification document(s) submitted (see instructions) Passport Driver's license/State I.D.									
	USCIS documentation Other Date of entry into									
		_	02/10	/0000	the United					
	Issued by: INDIA No.: T0630735 Exp. date: 03/12/2029 (MM/DD/YYYY): 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?									
	No/Don't know. Skip line 6f.									
	Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).									
	6f Enter ITIN and/or IRSN ▶ I	51 011 4 011001		RSN	, motraotioi	and				
	name under which it was issi	uad >		•"			and			
	First name Middle name Last name									
	6g Name of college/university or company (see instructions) ▶									
	City and state ► Length of stay ►									
Sign Here	Under penalties of perjury, I (applicant/delegate/acceptance agent) declare that I have examined this application, including accompanying documentation and statements, and to the best of my knowledge and belief, it is true, correct, and complete. I authorize the IRS to share information with my acceptance agent in order to perfect this Form W-7, Application for IRS Individual Taxpayer Identification Number.									
Keep a copy for your records.	Signature of applicant (if dele	tions)				one number				
, cai 1000100.	Name of delegate, if applica		Delegate's relatio to applicant	nship	Parent Court-appointed guardian					
A	Signature			Date (month / day	/ year)	Phone				
Acceptance					· · · -	Fax				
Agent's	Name and title (type or print))	Name of co	ompany	EIN	PTIN				
Use ONLY				Office co	ode					