<b>1040</b>		artment of the Treasury-Internal Revenue Servi S. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use Or	nly—Do not	write or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the n on is a child but not your dependent	ame of y							sp	alifying sur ouse (QSS) 's name if t	Ũ
Your first name	and mi	ddle initial	Last nar	me						Your s	ocial secur	ity number
SRIKAR			ARVA	PALLI						102-	-95-549	4
lf joint return, sp	ouse's	first name and middle initial	Last nar	me						Spous	e's social se	curity number
SARIKA			CHIT	UMALL	I					APPI	LIED FC	R
Home address (	numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.	Presid	ential Elect	ion Campaigr
<u>8560 Mag</u>	NOL	IA TRAIL						3	331		here if you	
City, town, or po	ost offic	ce. If you have a foreign address, also co	omplete sp	paces belo	w.	Sta	te	ZIP co	ode			ntly, want \$3 Checking a
EDEN PRA	IRIE	3				M	1	553	44	· · ·	elow will no	•
Foreign country	name		F	oreign pro	ovince/state/o	coun	ty	Foreig	n postal cod	e your ta	ax or refund	l
											You	Spouse
Digital Assets	exch	ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a	a digital a	asset (or	a financial i	nter	est in a digital					X No
Standard Deduction	_	eone can claim: Vou as a de Spouse itemizes on a separate retur	•		-		a dependent					
Age/Blindness	You:	Were born before January 2, 1	958	Are blir	nd <b>Spo</b>	use	: 🗌 Was bor		ore January	,	ls b	-
Dependents	s (see	instructions):			ocial security		(3) Relationsh	ip (4	) Check the	box if qua	alifies for (see	e instructions):
If more	(1) Fi	rst name Last name			number		to you		Child tax	credit	Credit for o	ther dependents
than four												
dependents, see instructions												
and check												
here 🗌												
Income	<b>1</b> a	Total amount from Form(s) W-2, b	•		,						<b>a</b> 1	16,000.
	b	Household employee wages not re				•				. 1	b	
Attach Form(s) W-2 here, Also	С	Tip income not reported on line 1a									c	
attach Forms	d	Medicaid waiver payments not rep				nstru	ictions)			. 1	d	
W-2G and 1099-R if tax	е	Taxable dependent care benefits f		-		•					e	
was withheld.	f	Employer-provided adoption bene									f	
If you did not	g	Wages from Form 8919, line 6 .				•				. 1	g	
get a Form W-2, see	h	Other earned income (see instruct	,				1	· ·		. 1	h	0.
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		•	<b>1</b> i					
	Z	Ŭ	1		· · · ·			• •				16,000.
Attach Sch. B	2a		2a				axable interest				b	1.
if required.	<u>3a</u>		3a				ordinary divider				b	
	4a		4a				axable amoun				b	
Standard Deduction for –	5a		5a				axable amoun				b	
Single or	6a		6a				axable amoun	i		. 6	b	
Married filing separately,	_c	If you elect to use the lump-sum e				`	,	• •				
\$12,950	7	Capital gain or (loss). Attach Sche									7	-842.
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin						• •			<b>B</b>	1 - 1 - ^
Qualifying spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		-								15,159.
\$25,900	10	Adjustments to income from Sche									0	1 - 1 - 2
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	•					· ·				<u>15,159.</u>
\$19,400	12	Standard deduction or itemized						• •				25,900.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deduct						• •			3	05 000
Standard Deduction,	14	Add lines 12 and 13										25,900.
see instructions.	15	Subtract line 14 from line 11. If zer	U OF IESS	s, enter -l	J THIS IS Y	our	laxable incom	е.	· · ·	. 1	5	89,259.

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

Form **1040** (2022)

Form 1040 (202	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	10,875.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	10 <b>,</b> 875.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,875.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	10,875.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 12	,639.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction				25c			
	d	Add lines 25a through 25c						25d	12,639.
	26	2022 estimated tax paymen	ts and amount a	pplied 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 fro				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .				30		1	
	31	Amount from Schedule 3, lir				31			
	32	Add lines 27, 28, 29, and 31				Indable credits		32	
	33	Add lines 25d, 26, and 32. T			-			33	12,639.
Refund	34	If line 33 is more than line 24						34	1,764.
Refutio	35a	Amount of line 34 you want					. 🗆	35a	1,764.
Direct deposit?	b	Routing number 0 7 2				_	Savings		
See instructions.	d	Account number 3 7 5					0		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the <b>am</b>	ount vou owe					
You Owe	•	For details on how to pay, g						37	
	38	Estimated tax penalty (see i				38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions	•				omplete b	elow.	X No
		signee's		Phone			onal identif	ication	
	nai			no.			oer (PIN)		
Sign		der penalties of perjury, I declare tief, they are true, correct, and corr							
Here				、	1, 2, 7				, 0
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					IT BUSINES	SS ANALYST	(see	nst.)	
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.					-		Ident (see		ection PIN, enter it here
your rocordo.					HOME MAKEF		,	nsi.)	
		one no. (248) 635-600		Email address	ARVAPALLISRI				
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	03/10/2023	P02082		Self-employed
Use Only		m's name GLOBAL TA			- 0001 0				678)965-9522
			Y CT E BRU	NSWICK N	J U8816		Firm'	s EIN	84-3171965
Go to Manau in a	ov/Form	1040 for instructions and the late	et information						Earm 1040 (2022)

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

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Form **1040** (2022)

#### SCHEDULE D (Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

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

Go to *www.irs.gov/ScheduleD* for instructions and the latest information. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Attachment Sequence No. **12** 

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SRIKAR ARVAPALLI & SARIKA CHITUMALLI

Your social security number 102-95-5494

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

### Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	<b>(g)</b> Adjustments to gain or loss fr		(h) Gain or (loss) Subtract column (e) from column (d) and		
	form may be easier to complete if you round off cents to e dollars.	may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, I						
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 <b>Box A</b> checked	23,249.	24,949.	82	27.	-873.		
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	936.	905.			31.		
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked							
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88		4			
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	usts from	5					
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	6	()				
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .		7	-842.		

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

	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Part II, n (g)	from column (d) and combine the result with column (g)			
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.					
11	in or (loss)	11				
12	Net long-term gain or (loss) from partnerships, S corporat	dule(s) K-1	12			
13	Capital gain distributions. See the instructions		13			
14	Carryover	14	( )			
15	Worksheet in the instructions				14	()
	on the back	•	.,		15	

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16		-842.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?			
	<b>No.</b> Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>			
	□ 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	(	842.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

REV 03/02/23 PRO

Schedule D (Form 1040) 2022

8949

Department of the Treasury

Internal Revenue Service

# Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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.

14 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer identification number
SRIKAR ARVAPALLI & SARIKA CHITUMALLI	102-95-5494

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.

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

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

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

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

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e)	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)			(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).		
APEX CLEARING	01/01/22	12/31/22	488.	763.			-275.		
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	22,761.	24,186.	W	827.	-598.		
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B									
above is checked), or line 3 (if Box (	23,249.	24,949.		827.	-873.				

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

8949

Department of the Treasury

Internal Revenue Service

# Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

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.

12 Attachment Sequence No. 12A

Name(s) shown on return	Social security number or taxpayer ide	entification number
SRIKAR ARVAPALLI & SARIKA CHITUMALLI	102-95-5494	

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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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)

X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	(b) (c) Date sold or		<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	<b>(f)</b> Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD CRYPTO LLC	01/01/22	12/31/22	936.	905.			31.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			936.	905.			31.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form <b>W-7</b>
(Rev. August 2019)
Department of the Treasury Internal Revenue Service

### Application for IRS Individual Taxpayer Identification Number by individuals who are not U.S. citizens or permanent

raaidanta

Department of the Treas Internal Revenue Service			arate instruc		manen	reside	1115.			
An IRS individual	l taxpayer identification num	ber (ITIN) is for	U.S. feder	al tax pur	poses	only.			ype (check one box):	٦
<ul> <li>Before you begin</li> <li>Don't submit th</li> </ul>	<b>:</b> is form if you have, or are eligil	ble to get, a U.S.	. social sec	urity numl	ber (SS	N).			for a new ITIN / an existing ITIN	
	ubmitting Form W-7. Read the ederal tax return with Form V								<b>b, c, d, e, f,</b> or <b>g, yc</b>	u
	alien required to get an ITIN to cla	-	əfit							
_	alien filing a U.S. federal tax retur									
	t alien (based on days present in		-							
<b>d</b> 🗋 Dependent of	of U.S. citizen/resident alien ] If	d, enter relationsh	ip to U.S. cit	izen/reside	ent alien	(see ins	tructions) 🕨	•		
e 🛛 Spouse of U		<b>d</b> or <b>e,</b> enter name SRIKAR ARVA					alien (see ir		tions) ► 102-95-5494	
f 🗌 Nonresident	alien student, professor, or resea	rcher filing a U.S. f	federal tax re	turn or clai	ming ar	ı excepti	on			
	spouse of a nonresident alien hold	ing a U.S. visa								
h 🗌 Other (see in	·									
	on for <b>a</b> and <b>f</b> : Enter treaty country <b>1a</b> First name		dle name	and tr	eaty art	icle num	name			
Name	SARIKA	Wilde					ITUMALL	т		
(see instructions) Name at birth if different ►	1b First name	Mido	dle name				name	-		
Applicant's	2 Street address, apartment nu 8560 MAGNOLIA TRA		te number. <b>If</b>	you have	a P.O. I	oox, see	separate	instru	uctions.	
Mailing Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate.									
Address	EDEN PRAIRIE				MN	USA			55344	
Foreign (non- U.S.) Address	3 Street address, apartment nu	mber, or rural rout	te number. D	on't use a	P.O. bo	ox numb	oer.			_
(see instructions)	City or town, state or provinc	e, and country. Inc	clude postal	code where	e approj	oriate.				_
Birth Information	<b>4</b> Date of birth (month / day / year) 07/11/1997	Country of birth INDIA		City and s	state or	province	e (optional)		☐ Male Ⅹ Female	_
Other Information	6a       Country(ies) of citizenship       6b       Foreign tax I.D. number (if any)       6c       Type of U.S. visa (if any), number, and expiration date         INDIA       INDIA       INDIA       INDIA       INDIA       INDIA							_		
	6d Identification document(s) submitted (see instructions) 🛛 Passport 🗌 Driver's license/State I.D.									
	USCIS documentation Other Date of entry into									
	the United States									
	Issued by: INDIA No.: T6117757 Exp. date: 07/17/2029 (MM/DD/YYYY):									
	6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)?									
	<ul> <li>No/Don't know. Skip line 6f.</li> <li>Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions).</li> </ul>									
	Image: Second piete line of. If more than one, list on a sneet and attach to this form (see instructions).         Of       Enter ITIN and/or IRSN ►       ITIN       IRSN       and									
	name under which it was iss								u	iu.
	name under which it was issued ► 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 (appli- documentation and statements, and information with my acceptance agen	to the best of my	knowledge a	nd belief, it	is true,	correct,	and comple	te. I a	uthorize the IRS to sha	
Keep a copy for your records.	Signature of applicant (if del	egate, see instruc	tions)	Date (mont	th / day /	year)	Phone nur	nber		
	Name of delegate, if applica	ble (type or print)		Delegate's relationship to applicant			Parent		Court-appointed guardia	 an
Acceptance	Signature			Date (mont	th / day /	year)	Phone Fax		•	_
Agent's	Name and title (type or print	)	Name of co	ompany		EIN			PTIN	—
Use ONLY						Difice code			_	

REV 03/02/23 PRO