### 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

Internal Revenue Service	·-	
Submission Identification Number (SID)		
Taxpayer's name	Social security	v number
TARAKARAMA RAVI TEJA GODAVARTHI	196-81-	
Spouse's name		al security number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (E	Enter year you ar	re authorizing.)
Enter whole dollars only on lines 1 through 5.		
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	,	l I
<b>1</b> Adjusted gross income		<b>1</b> 119,355.
2 Total tax		<b>2</b> 19,373.
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 21,984.
4 Amount you want refunded to you		4 2,611.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get a Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or ame		·
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accour payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial insauthorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tern payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved it taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amended Electronic Funds Withdrawal Consent.	or rejection of the tra the U.S. Treasury and the trace in the ta stitution to debit the minate the authoriza or requests must be in the processing of the payment. I furth	ansmission, (b) the reason of its designated Financial ox preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of her acknowledge that the
Taxpayer's PIN: check one box only  X   I authorize GLOBAL TAXES LLC to enter or gene	ta DIN 1	2 2 5 7
X I authorize GLOBAL TAXES LLC to enter or gene	Ente	er five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don	't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.		
Your signature ▶ Date	<b>.</b>	
Spouse's PIN: check one box only	. 5111	
I authorize to enter or gene		er five digits, but
signature on the income tax return (original or amended) I am now authorizing.		er live digits, but i't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I a if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.		-
Spouse's signature ▶ Date	•	
Practitioner PIN Method Returns Only—continue be		
Part III Certification and Authentication — Practitioner PIN Method Only		
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 6 1 9 8 9 er all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual inco authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am requirements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers	submitting this return	rn in accordance with the
ERO's signature ▶ Date	•	
ERO Must Retain This Form — See Instruction		

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 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	s X	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	housel	nold (HOH	)		lifying surv use (QSS)	/iving
Check only one box.	If vo	u checked the MFS box, enter the	name of v	our spouse. If vou	check	ed the HOH o	r QSS	box. ente	r the c			ne qualifving
		son is a child but not your depender						,				
Your first name	and m	iddle initial	Last na	me					Yo	our so	cial securit	y number
TARAKARA	AMA I	RAVI TEJA	GODA	VARTHI					1	96-8	31-225	7
		s first name and middle initial	Last na						_			curity number
Home address	(numbe	er and street). If you have a P.O. box, se	e instruction	ons.			Α	pt. no.	Pr	eside	ntial Election	on Campaign
1673 FA	[RWA]	Y GLENS DR									nere if you,	,
City, town, or p	ost offi	ce. If you have a foreign address, also c	omplete s	paces below.	Sta	te	ZIP co	ode				itly, want \$3 Checking a
YPSILANT	ΓI				M	Ι	481	98			ow will not	
Foreign country	y name		F	oreign province/stat	te/count	ty	Foreig	n postal co	de yo	our tax	or refund.	· ·
											You	Spouse
Digital	At ar	ny time during 2022, did you: (a) re	ceive (as	a reward, award,	or payr	ment for prope	erty or	services);	or (b)	sell,		
Assets	exch	ange, gift, or otherwise dispose of	a digital	asset (or a financi	al inter	est in a digital	asset)	? (See ins	tructi	ons.)	Yes	⊠ No
Standard	Som	eone can claim: 🗌 You as a d	ependent	Your spo	use as	a dependent						
<b>Deduction</b>		Spouse itemizes on a separate retu	ırn or you	were a dual-statu	ıs alien	ı						
Age/Rlindness	. Vou	Were born before January 2,	1958	Are blind S	pouse	• Mas bo	rn hefo	re Janua	v 2 1	958	☐ Is bl	ind
	-		1000 _	(2) Social secu		(3) Relationsh	14		, ,			instructions):
Dependents		instructions): irst name Last name		number	rity	to you	lib (	Child ta		· 1	•	her dependents
If more than four	(1)	Last name				-			7			
dependents,									1			╡──
see instruction	s —								<u></u>			$\dashv$
and check here	1								<u>-</u> 1		[	
lu a a usa a	1a	Total amount from Form(s) W-2,	box 1 (see	e instructions) .					<u> </u>	1a	1 12	 29,820.
Income	b	Household employee wages not	,	,						1b		
Attach Form(s)	С	Tip income not reported on line 1								1c		
W-2 here. Also attach Forms	d	Medicaid waiver payments not re		·						1d		
W-2G and	е	Taxable dependent care benefits	•	. ,						1e		
1099-R if tax was withheld.	f	Employer-provided adoption ben		•	29 .					1f		
If you did not	g	Wages from Form 8919, line 6.								1g		
get a Form	h	Other earned income (see instruc	tions) .							1h		0.
W-2, see	i	Nontaxable combat pay election	(see instr	uctions)		1i	i					
instructions.	z	Add lines 1a through 1h	·							1z	12	29,820.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	st .			2b		
if required.	3a	Qualified dividends	3a		<b>b</b> C	rdinary divide	nds .			3b		
	4a	IRA distributions	4a		<b>b</b> T	axable amoun	nt			4b		
Standard	5a	Pensions and annuities	5a		<b>b</b> T	axable amoun	nt			5b		
Deduction for— Single or	6a	Social security benefits	6a		<b>b</b> T	axable amoun	nt			6b		
Married filing	С	If you elect to use the lump-sum	election r	nethod, check he	re (see	instructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Sche	edule D if	required. If not re	quired	, check here				7		895.
Married filing	8	Other income from Schedule 1, li	ne 10 .							8	-1	11,360.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b,	7, and 8.	This is your <b>total</b> i	incom	e				9	1.	19,355.
surviving spouse, \$25,900	10	Adjustments to income from Sch	edule 1, I	ine 26						10	1	
Head of	11	Subtract line 10 from line 9. This	is your <b>ac</b>	djusted gross inc	ome					11	1 11	19,355.
household, \$19,400	12	Standard deduction or itemized		,	,					12		12,950.
If you checked any box under	13	Qualified business income deduc	tion from	Form 8995 or Fo	rm 899	5-A				13	1	
Standard	14	Add lines 12 and 13								14	1 -	12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ero or less	s, enter -0 This is	s your t	taxable incon	ne .			15	1 10	06,405.

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	19,373.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	19,373.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	19,373.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	19,373.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 2	1,984.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	21,984.
15	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin	e 15			31		7	
	32	Add lines 27, 28, 29, and 31	. These are vour	total other pa	avments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	21,984.
Defined	34	If line 33 is more than line 24						34	2,611.
Refund	35a	Amount of line 34 you want						35a	2,611.
Direct deposit?	b	Routing number 0 6 1					Savings		
See instructions.	d	Account number 3 3 4							
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go	. This is the <b>amo</b>	ount you owe.				37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	person to disc	cuss this retur	n with the IRS		Complete	below.	⊠ No
Ü	De	signee's		Phone			rsonal iden	tification	
	naı	ne		no.		nu	mber (PIN)		
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com							
TICIC	Yo	ur signature		Date	Your occupation		Pro	tection P	nt you an Identity IN, enter it here
Joint return?					SOFTWARE		(see	e inst.)	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, <b>l</b>	ooth must sign.	Date	Spouse's occupa	tion	Ide		nt your spouse an ection PIN, enter it here
	——Ph	one no. (321)501-356	3	Email address	RAVITEJA O	207@GMAIL.(	MO.		
		eparer's name	Preparer's signat	l	141V 1 1 1 1 0 A . U	Date Date	PTIN		Check if:
Paid		ATA SAI PAVAN KUMAR DUDIPALLI	,		AR DUDIPALLI			70833 <sup> </sup>	Self-employed
Preparer		m's name GLOBAL TAX				_   03, 13, 2023			678)965-9522
Use Only			Y CT E BRU	NSWICK N.	J 08816			n's EIN	88-2145487
Go to warm ire a		11040 for instructions and the late				DEV 02/02/02 E23			Form <b>1040</b> (2022)
ao to www.iis.go	JV/I OIT	more for instructions and the late	at milomination.		BAA	REV 03/02/23 PRO	,		FOIII 1040 (2022)

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

TARAKARAMA RAVI TEJA GODAVARTHI

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 196-81-2257

Par	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. Atta		5	-11,360.
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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-11,360.

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

Educator expenses   11	Par	Adjustments to Income			
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	11			11	
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-	basis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 Indicate the property of the provided of the lRS detect tax law violations 25 Industry and amount: 26 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions):  20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions):  IRA deduction	19a			19a	
20   Student loan interest deduction   21   22   23   24   22   24   24   24   24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction  Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.  Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974.  Contributions to section 501(c)(18)(D) pension plans  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  Housing deduction from Form 2555.  Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).  Total other adjustments. List type and amount:  25  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount:  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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  c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24				
rental of personal property engaged in for profit			24a		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			24b	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			24d		
f Contributions to section 501(c)(18)(D) pension plans	е		040		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		249		
i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	"		24h		
from the IRS for information you provided that helped the IRS detect tax law violations	i	` <i>'</i>	2-711		
tax law violations	٠				
j Housing deduction from Form 2555			24i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		,		
z Other adjustments. List type and amount:	•••		24k		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		24z		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	•			
				26	

### SCHEDULE D (Form 1040)

Department of the Treasury

### **Capital Gains and Losses**

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

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

Use Form 8949 to list your transactions for lines 1h, 2, 3, 8h, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Intern	al Revenue Service Use Form 6949 to list your train	isactions for filles	10, 2, 3, 60, 9, and 1	0.		bequence No. 12
	(s) shown on return RAKARAMA RAVI TEJA GODAVARTHI				ocial se	curity number 2257
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	rt I Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	4,224.	3,183.			1,041.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
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 (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		Carryover	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	mn (h). If you have	e any long-	7	1,041.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	nstructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part II,	(h) Gain or (loss) Subtract column (e) 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	17,298.	24,290.	6,8	346.	-146.
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					
	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	
13	, ,				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	•	•	-	14	( )

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

BAA

-146.

15

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 895. • 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. □ 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 • (\$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.

#### **Sales and Other Dispositions of Capital Assets**

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

196-81-2257

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

TARAKARAMA RAVI TEJA GODAVARTHI

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

Sequence No. 12A

Before you check Box A, B, or C belc statement will have the same informa broker and may even tell you which b	tion as Form 1	er you receive 1099-B. Either	d any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s	) from your broke t) was reported to	r. A substitute the IRS by your
Part I Short-Term. Trans- instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term trai regate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  X (A) Short-term transactions	below. Chec page 1, for ea aplete as mar reported on	k only one bach applicable by forms with Form(s) 1099	pox. If more than e box. If you had the same box of B-B showing bases	n one box applies ve more short-te checked as you r sis was reported	s for your s rm transac need. to the IRS	hort-term transa tions than will fit (see <b>Note</b> above	on this page
<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	•	٠,	•	sis <b>wasn't</b> report	ea to the if	10	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) 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.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	4,224.	3,183.			1,041.
2 Totals Add the amounts in columns	s (d) (e) (a) and	1 (h) (subtract					

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

4,224.

1,041.

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) .

3,183.

Form 8949 (2022) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

TARAKARAMA RAVI TEJA GODAVARTHI

above is checked), or line 10 (if Box F above is checked) .

196-81-2257

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

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on l	Form(s) 1099	)-B showing bas	•		`	·)
1  (a)  Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	if 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 Ćo.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/21	12/31/22	17,298.	24,290.	W	6,846.	-146.
Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above).	al here and inc	lude on your					

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

6,846.

17,298.

24,290.

#### **SCHEDULE E** (Form 1040)

Department of the Treasury

#### 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,

Attachment

OMB No. 1545-0074

Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Sequence No. 13

Name(s) shown on return Your social security number 196-81-2257 TARAKARAMA RAVI TEJA GODAVARTHI Part I **Income or Loss From Rental Real Estate and Royalties Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . . 1a Physical address of each property (street, city, state, ZIP code) SRINIVASA COLONY EAST SR N HYDERABAD TELANGANA IN 500038 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,250. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 1,050. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,560. 14 14 Repairs . . . 15 Supplies 15 3,120. 16 16 Taxes 17 17 2,890. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 11,870. 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 21 -11,360.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 11,360.) 510. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 11,870. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 11,360. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

-11,360.

VA-8453 Virginia Department of Taxation

# Virginia Individual Income Tax Declaration for Electronic Filing

Tax Year 2022

## DO NOT SEND THIS VA-8453 TO THE VIRGINIA DEPARTMENT OF TAXATION OR THE IRS. IT MUST BE MAINTAINED IN YOUR FILES!

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# **763**Page 1

# 2022 Virginia Nonresident Income Tax Return Due May 1, 2023



	Enclose a comp	lete copy o	your reder	ai ta	x return and a	i other required	virgiii	iia e	liciosui	es.						
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1	Adjusted Gross In	come from	federal returr	า - N	lot federal taxab	le income							1		119355	00
2	Additions from Sc	hedule 763	ADJ Line 3										2			00
3	Add Lines 1 and												3		119355	00
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	and Your Spouse's	_											4b			00
5	Social Security Ac	t and equiv	alent Tier 1 F	Railro	oad Retirement	Act benefits repo	orted on	you	ır federa	al retu	urn		5			00
6	State income tax i	refund or ov	erpayment c	redit	reported as inc	ome on your fed	leral ret	urn.					6			00
7	Subtractions from	Schedule 7	63 ADJ, Line	e 7									7			00
8	Add Lines 4a, 4b	, 5, 6, and 7	7										8			00
9	Virginia Adjusted	d Gross Inc	ome (VAGI).	. Sul	btract Line 8 fr	om Line 3							9		119355	00
10	Itemized Deduction	ns from Vir	ginia Schedu	le A,	, if applicable. S	ee instructions							10			00
11	If you do not claim	n itemized d	eductions on	Line	e 10, enter stand	dard deduction.	See ins	struc	tions				11		8000	00
12	Exemption amoun	t. Enter the	total amount	t fror	m the Exemption	n Sections 1 and	2 abov	/e					12		930	00
13	Deductions from S	Schedule 76	3 ADJ, Line	9									13			00
14	Add Lines 10, 11	, 12 and 13											14		8930	00
15	Virginia Taxable Ir	ncome comp	outed as a re	side	nt. Subtract Line	e 14 from Line 9							15		110425	00
16	Percentage from I	Nonresident	Allocation S	ectic	on on Page 2 (E	nter to one deci	mal plac	ce or	nly)				16		6.7	%
17	Nonresident Taxal	ble Income.	(Multiply Lin	e 15	by percentage	on Line 16)							17		7398	00
18	Income Tax from	Гах Table or	Tax Rate Sc	hedi	ule								18		240	00
19a	Your Virginia incor	me tax withl	neld. Enclose	For	rms W-2, W-2G,	1099, and VK-							19a		415	00
	Dept. of Taxation F 1044 Rev. 07/22	or Local Use	LTD		<b>\</b> \$									XX	XXX	

#### 2022 FORM 763 Page 2

2022	FORM 763 Page 2							
Your N	ame .KARAMA RAVI TEJA GODAVARTHI	Your SSN 196-81-2257						
19b	Spouse's Virginia income tax withheld. Enclo	1	and VK-1		19b			00
20	2022 Estimated Tax Payments				20			00
21	2021 overpayment credited to 2022 estimate				21			00
22	Extension Payment - submitted using Form				22			00
23	Credit for Low-Income Individuals or Virginia				23			00
24	Total credits from Schedule OSC.							00
25	Credits from Schedule CR, Section 5, Line 1				25			00
							41 5	
26	Total payments and credits. Add Lines 1	•					415	$\vdash$
27	If Line 18 is larger than Line 26, enter the di				27		4.55	00
28	If Line 26 is larger than Line 18, enter the di						175	$\vdash$
29	Amount of overpayment on Line 28 to be CRE				29			00
30	Virginia529 and ABLE Contributions from So	, ,			30			00
31	Other Voluntary Contributions from Schedule	e VAC, Section II, Line 14			31			00
32	Addition to Tax, Penalty, and Interest from <b>e</b> See instructions End				32			00
33	Sales and Use Tax is due on Internet, mail or See instructions	der, and out-of-state purchase	es (Consume	r's Use Tax).	33			00
34	Add Lines 29 through 33				34			00
35	If you owe tax on Line 27, add Lines 27 and Line 34 is larger than Line 28, enter the diffe www.tax.virginia.govCheck here if page 15.	erence. AMOUNT YOU OWE	. Enclose pa	yment or pay at	35			00
36	If Line 28 is larger than Line 34, subtract Line				36		175	00
If the Γ	Direct Deposit section below is not completed	your refund will be issued b	v check					
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No Intel  Noni  1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	tic Accounts Only relational Deposits 0 6 1 0 0  resident Allocation Percentage  Wages, salaries, tips, etc	ions, S corporations, etc	3 4 0 1 2 3 4 5 6 7 8 9 10 11 12 12	A - All Sources 129820	00 00 00 00 00 00 00 00 00 00 00 00 00	5 2	inia Sources 7968	00 00 00 00 00 00 00 00
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#### 2022 Schedule INC/CG

196812257

Report all W-2s, 1099s & VK-1s with VA Withholding

TARAKARAMA R GODAVARTHI



Your/ Spouse SSN	Withholding Type	VA Withholding	Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					コ
196812257	W	415.	811194657	30811194657F001	7968.

Total VA Withholding

You

196812257

Spouse

Total # of W-2s,1099s & VK-1s

01

E 1040 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	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	hous	ehold (HOF	l)		ifying surv ise (QSS)	iving	
one box.	If yo	u checked the MFS box, enter the r	name of y	our spouse. If you	checke	ed the HOH or	r QSS	box, ente	r the c		,	e qualifying	
	pers	on is a child but not your depender	nt:										
Your first name	and mi	ddle initial	Last na	me					Yo	ur so	cial securit	y number	
TARAKARA	AMA F	RAVI TEJA	GODA	VARTHI					19	96-8	31-2257	7	
If joint return, s	pouse's	first name and middle initial	Last na	me					Sp	ouse's	s social sec	urity number	
Home address	(numbe	r and street). If you have a P.O. box, see	e instruction	ons.				Apt. no.	Pr	esider	ntial Election	on Campaign	
1673 FAI	[RWA]	GLENS DR								Check here if you, or your			
City, town, or p	ost offic	ce. If you have a foreign address, also c	omplete s	paces below.	Stat	te	ZIP	code				tly, want \$3 Checking a	
YPSILANT	ΓI				MI		48	198		_	ow will not	_	
Foreign country	/ name		F	Foreign province/state	e/count	у	Fore	ign postal co	de yo	ur tax	or refund.	· ·	
											You	Spouse	
Digital Assets		by time during 2022, did you: (a) recange, gift, or otherwise dispose of									Yes	⊠ No	
Standard		eone can claim: You as a de				a dependent		, (					
Deduction		Spouse itemizes on a separate retu	•										
Age/Blindness	You:	Were born before January 2,	1958	Are blind S	oouse:	Was bo	rn be	fore Janua	ry 2, 1	958	☐ Is bli	nd	
Dependents	s (see	instructions):		(2) Social securi	ty	(3) Relationsh	nip	(4) Check th	e box if	qualif	ies for (see	instructions):	
If more	•	rst name Last name		number		to you		Child ta	x credit	dit Credit for other depende			
than four													
dependents, see instructions													
and check	·												
here													
Income	1a	Total amount from Form(s) W-2, b	oox 1 (see	e instructions) .						1a	12	29,820.	
	b	Household employee wages not r	reported	on Form(s) W-2 .						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	a (see ins	structions)						1c			
attach Forms	d	Medicaid waiver payments not re	•	., .	instru	ctions)				1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		·						1e			
was withheld.	f	Employer-provided adoption bene								1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form W-2, see	h	Other earned income (see instruc	,				. i			1h		0.	
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i	<u> </u>				1.0		
	z	Add lines 1a through 1h	· · ·						•	1z		29,820.	
Attach Sch. B if required.	2a	Tax-exempt interest	2a			axable interes			•	2b			
ii required.	3a	Qualified dividends	3a			rdinary divide				3b			
<u> </u>	4a	IRA distributions	4a			axable amoun			•	4b			
Standard Deduction for—	5a	Pensions and annuities Social security benefits	5a 6a			axable amoun axable amoun			•	5b 6b			
Single or	6a	If you elect to use the lump-sum		mathad abaak bar			ιι .		·	OD			
Married filing separately,	с 7	Capital gain or (loss). Attach Sche		•	•	,				7		895.	
\$12,950 Married filing	8	Other income from Schedule 1, lin					•		ш	8	1	1,360.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							•	9		9,355.	
Qualifying surviving spouse,	10	Adjustments to income from Sche	•	•		· · · · ·			•	10		., 333.	
\$25,900	11	Subtract line 10 from line 9. This i					•		•	11		9,355.	
Head of household,	12	Standard deduction or itemized	•	-					•	12		2,950.	
\$19,400 If you checked	13	Qualified business income deduc		•	,	 5-А	•		•	13	_	<u>. 4 , 200 .                                  </u>	
any box under	14	Add lines 12 and 13					•		•	14		2,950.	
Standard Deduction,	15	Subtract line 14 from line 11. If ze							•	15		16,405.	
see instructions.			51 1000	-,	, 501 6				•	-,5	1 10	, 100.	

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	19,373.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	19,373.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	19,373.
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	19,373.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 2	1,984.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c						25d	21,984.
15	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return			26	
If you have a qualifying child,	27	Earned income credit (EIC)			No .	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	3, line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin	e 15			31		7	
	32	Add lines 27, 28, 29, and 31	. These are vour	total other pa	avments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T	•		-			33	21,984.
Defined	34	If line 33 is more than line 24						34	2,611.
Refund	35a	Amount of line 34 you want						35a	2,611.
Direct deposit?	b	Routing number 0 6 1					Savings		
See instructions.	d	Account number 3 3 4							
	36	Amount of line 34 you want a				36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, go	. This is the <b>amo</b>	ount you owe.				37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party Designee		you want to allow another	person to disc	cuss this retur	n with the IRS		Complete	below.	⊠ No
Ü	De	signee's		Phone			rsonal iden	tification	
	naı	ne		no.		nu	mber (PIN)		
Sign Here		der penalties of perjury, I declare t ief, they are true, correct, and com							
TICIC	Yo	ur signature		Date	Your occupation		Pro	tection P	nt you an Identity IN, enter it here
Joint return?					SOFTWARE		(see	e inst.)	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, <b>l</b>	ooth must sign.	Date	Spouse's occupa	tion	Ide		nt your spouse an ection PIN, enter it here
	——Ph	one no. (321)501-356	3	Email address	RAVITEJA O	207@GMAIL.(	MO.		
		eparer's name	Preparer's signat	l	141V 1 1 1 1 0 A . U	Date Date	PTIN		Check if:
Paid		ATA SAI PAVAN KUMAR DUDIPALLI	,		AR DUDIPALLI			70833 <sup> </sup>	Self-employed
Preparer		m's name GLOBAL TAX				_   03, 13, 2023			678)965-9522
Use Only			Y CT E BRU	NSWICK N.	J 08816			n's EIN	88-2145487
Go to warm ire a		11040 for instructions and the late				DEV 02/02/02 E23			Form <b>1040</b> (2022)
ao to www.iis.go	JV/I OIT	more for instructions and the late	at milomination.		BAA	REV 03/02/23 PRO	,		FOIII 1040 (2022)

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

TARAKARAMA RAVI TEJA GODAVARTHI

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 196-81-2257

Par	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. Atta		5	-11,360.
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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-11,360.

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

Educator expenses   11	Par	Adjustments to Income			
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	11			11	
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-	basis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 Indicate the property of the provided of the lRS detect tax law violations 25 Industry and amount: 26 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions):  20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions):  IRA deduction	19a			19a	
20   Student loan interest deduction   21   22   23   24   22   24   24   24   24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction  Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.  Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974.  Contributions to section 501(c)(18)(D) pension plans  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  Housing deduction from Form 2555.  Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).  Total other adjustments. List type and amount:  25  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount:  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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  c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24				
rental of personal property engaged in for profit			24a		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			24b	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			24d		
f Contributions to section 501(c)(18)(D) pension plans	е		040		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		249		
i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	"		24h		
from the IRS for information you provided that helped the IRS detect tax law violations	i	` <i>'</i>	2-711		
tax law violations	٠				
j Housing deduction from Form 2555			24i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		,		
z Other adjustments. List type and amount:	•••		24k		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		24z		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	•			
				26	

### SCHEDULE D (Form 1040)

Department of the Treasury

### **Capital Gains and Losses**

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

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

Use Form 8949 to list your transactions for lines 1h, 2, 3, 8h, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Intern	al Revenue Service Use Form 6949 to list your train	isactions for filles	10, 2, 3, 60, 9, and 1	0.		bequence No. 12
	(s) shown on return RAKARAMA RAVI TEJA GODAVARTHI				ocial se	curity number 2257
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	rt I Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	4,224.	3,183.			1,041.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
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 (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	mn (h). If you have	e any long-	7	1,041.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	nstructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) 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	17,298.	24,290.	6,8	346.	-146.
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					
	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	
13	, ,				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	•	•	-	14	( )

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

BAA

-146.

15

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 895. • 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. □ 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 • (\$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.

#### **Sales and Other Dispositions of Capital Assets**

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

196-81-2257

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

TARAKARAMA RAVI TEJA GODAVARTHI

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

Sequence No. 12A

Before you check Box A, B, or C belc statement will have the same informa broker and may even tell you which b	tion as Form 1	er you receive 1099-B. Either	d any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s	) from your broke t) was reported to	r. A substitute the IRS by your
Part I Short-Term. Trans- instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term trai regate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  X (A) Short-term transactions	below. Chec page 1, for ea aplete as mar reported on	k only one bach applicable by forms with Form(s) 1099	pox. If more than e box. If you had the same box of B-B showing bases	n one box applies ve more short-te checked as you r sis was reported	s for your s rm transac need. to the IRS	hort-term transa tions than will fit (see <b>Note</b> above	on this page
<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	•	٠,	•	sis <b>wasn't</b> report	ea to the if	10	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) 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)		(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	4,224.	3,183.			1,041.
2 Totals Add the amounts in columns	s (d) (e) (a) and	1 (h) (subtract					

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

4,224.

1,041.

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) .

3,183.

Form 8949 (2022) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

TARAKARAMA RAVI TEJA GODAVARTHI

above is checked), or line 10 (if Box F above is checked) .

196-81-2257

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

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>★ (D) Long-term transactions</li><li>(E) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas				e)
(a) Description of property	(b) Date acquired	(c)	(d)	(e) Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a c 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/21	12/31/22	17,298.	24,290.	W	6,846.	-146.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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

6,846.

17,298.

24,290.

#### **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, Attachment

Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number 196-81-2257 TARAKARAMA RAVI TEJA GODAVARTHI Part I **Income or Loss From Rental Real Estate and Royalties Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . . 1a Physical address of each property (street, city, state, ZIP code) SRINIVASA COLONY EAST SR N HYDERABAD TELANGANA IN 500038 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,250. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 1,050. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,560. 14 14 Repairs . . . 15 Supplies 15 3,120. 16 16 Taxes 17 17 2,890. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 11,870. 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 21 -11,360.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 11,360.) 510. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

23e

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

11,360.

-11,360.

Schedule E (Form 1040) 2022

11,870.

-11,360.

24

25

24

25

26

Total of all amounts reported on line 20 for all properties

**Income.** Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

NPA

#### 2022 MICHIGAN Individual Income Tax Return MI-1040

	IZ WIICHIGAN INCIV Irn is due April 18, 2023. ⊤					rn IVII-1	1040				ended Return ude Schedule AMD)	]		
	er's First Name	M.I.	Last Name	Diuon	IIIX.			er's Ful	Il Social Se	curity	No. (Example: 123-45-678	39)		
	RAKARAMA RAVI TE		GODAVART	THI						•	` '	10)		
	oint Return, Spouse's First Name	M.I.	Last Name					196		81				
Home	Address (Number, Street, or P.O. Box)	<u> </u> :)					3. Sp	ouse's	Full Social	Secur	rity No. (Example: 123-45-6	6789)		
	73 FAIRWAY GLENS													
City o	or Town			State	ZIP Code		4. Sc	hool Di	strict Code	(5 dig	gits – see page 60)			
YPS	SILANTI			MI	4819	8		8	1020					
1	STATE CAMPAIGN FUND Check if you (and/or your spouse, filing a joint return) want \$3 of you to go to this fund. This will not incr your tax or reduce your refund.	ır taxes		iler Spouse		6. <b>FAR</b>		nis box	if 2/3 of y		AFARERS  ncome is from farming,			
7.	2022 FILING STATUS. Check one	€.					•		STATUS.	Chec	ck all that apply.			
a.	X Single		ou check box "c,"			a. X	Resider	nt						
b. <b>[</b>	Married filing jointly	line 3	3 and enter spous w:	se's full n	name	b	Nonresi	dent *			* If you check box "b" o "c," you must complete	;		
-	<u></u>						_				and include Schedule NR.	<b>'</b>		
C.	Married filing separately*					c	c. Part-Year Resider							
9.	EXEMPTIONS. NOTE: If some	one els	e can claim you a	as a dep	endent, ch	eck box 9e,	enter 0 o	n line	9a and en	iter \$	1,500 on line 9e (see in	ıstr.).		
	a. Number of exemptions (see in	nstructi	ons)			9a	a.	1   x	\$5,000	9a.	5000	00		
	b. Number of individuals who qua		,				~	ヿ	<del>+-</del> ,	-		†		
	blind, hemiplegic, paraplegic,	quadri	plegic, or totally a	and perm	nanently dis	sabled 9b		_ x		i		00		
	c. Number of qualified disabled \							×	\$400	9c.		00		
	d. Number of Certificates of Stillk	oirth tro	m MDHHS (see i	instruction	ons)	90	J. [] . Ł	x	\$5,000	9d.		00		
	e. Claimed as dependent, see lin	ne 9 N	OTE above			96	ə			9e.		00		
	f. Add lines 9a, 9b, 9c, 9d and 9	e. En⁴	ter here and on lin	าe 15						9f.	5000	00		
10.	Adjusted Gross Income from yo	our U.\$	3. Form <i>1040</i> (see	e instruc	tions)				10.		119355	00		
11.	Additions from Schedule 1, line 9	). Inclı	ıde Schedule 1						11.			00		
12.	Total. Add lines 10 and 11								12.		119355	00		
13.	Subtractions from Schedule 1, lin	ne 30.	Include Schedul	le 1					13.			00		
14.	Income subject to tax. Subtract	t line 1	3 from line 12. If I	line 13 is	s greater th	nan line 12,	enter "0".		14.		119355	00		
15.	Exemption allowance. Enter an	nount f	rom line 9f or Sch	nedule N	IR, line 19.				15.		5000	00		
16.	Taxable income. Subtract line 19	5 from	line 14. If line 15	is great	ter than line	e 14, enter "	'0"		16.		114355	00		
	Tax. Multiply line 16 by 4.25% (0	.0425)							17.		4860	00		
	-REFUNDABLE CREDITS					AMOU	INI		1 г		CREDIT	_		
18.	Income Tax Imposed by governm Include a copy of the return (see				8a.		240	00	18b.		240	00		
19.	Michigan Historic Preservation Ta	ax Cre	dit (see instructior	ns). 19	9a			00	19b.			00		
20.	Income Tax. Subtract the sum of If the sum of lines 18b and 19b is								20.		4620	00		

2022 N	II-1040, Page 2 of 2									
		File	r's Full Social S	ecurity Number	1	96 <b>–</b>	– 8	31 — 2257		
21.	Enter amount of Income Tax from li	ne 20					21.	46	2 N	00
22.	Voluntary Contributions from Form						22.	10		00
	•									00
23.	<b>USE TAX.</b> Use tax due on Internet, Worksheet 1 (see instructions)						23.		0	00
24	Total Tax Liability. Add lines 21, 22	2 and 23				24		46	20	00
	INDABLE CREDITS AND PAYN									-
25.	Property Tax Credit. Include MI-1	040CR or MI-1040CI	R-2				25.			00
20.	Troporty Tax Ground Intolado IIII T	04001( OF IIII 104001					20.			00
26.	Farmland Preservation Tax Credi	it. Include MI-1040Cl	R-5		 DERAL		26.	MICHIGAN		00
			Г	761	JERAL			MICHIGAN		
27.	Earned Income Tax Credit. Multiply enter result on line 27b	line 27a by 6% (0.06	i) and 27a			00	27b.			00
28.	Michigan Historic Preservation Tax	Credit (refundable). I	nclude Form	3581			28.			00
29.	Credit for allocated share of tax paid	d by an electing flow-	through entity	(see instruct	ions)		29.			00
20	Michigan toy withhold from Cohodu		20	52	55	00				
30.	Michigan tax withheld from Schedul		30.		55	00				
31.	Estimated tax, extension payments	and 2021 credit forw	ard				31.			00
32.	2022 AMENDED RETURNS ONLY. Taxpayers completing an original 2022 return should skip to lin Amended returns must include Schedule AMD (see instructions).									
		•	,							
	32a. If you had a refund and/or negative number on line 33		iginal return, che	eck box 32a an	d enter this amo	unt as a				
	32b. If you paid with the origina any additional tax paid after						32c.			00
33.	Total refundable credits and payme	unts Add lines 25, 26	27h 28 20 3	30 31 and 33	10	33.		52	55	00
	IND OR TAX DUE	ints. Add iirles 25, 20,	270, 20, 29, 3	30, 31 and 32	.0	55. <u> </u>				00
	If line 33 is less than line 24, subtra	ct line 33 from line 24	4. If applicable	e, see instruct	ions.	Г				
				,						
	Include interest 00 a	and penalty	00	\	OU OWE	34.				00
35.	Overpayment. If line 33 is greater to	than line 24, subtract	line 24 from li	ine 33		35.		6	35	00
	. ,	,				_				
36.	Credit Forward. Amount of line 35	to be credited to you	r 2023 estimat	ted tax for yo	ur 2023 tax re	turn	36.			00
37.	Subtract line 36 from line 35				REFUND	37.		6	35	00
	ECT DEPOSIT	a. Routing Trans			ccount Numbe			c. Type of Account		
	it your refund directly to your financial ion! See instructions and complete a, b	0.51.000.000		22424	160000		1. 🖸	K Checking 2.	Saving	gs
and c.	ion. Goo mendellone and complete a, b	061000052		334044	1677052					
	eased Taxpayer. If Filer and/or Spouser. If Filer and/or Spouser. DATE OF DEATH ONLY. Example							eclare under penalty of perjion of which I have any know		
			111)	<del></del>	Preparer's PTI			on or willon thave any know	neug	О.
Filer		Spouse		·	P024708					
	ayer Certification. I declare under tachments is true and complete to the bes		he information in	n this return	Preparer's Nam VENKATA			VAN KUMAR DU	DII	0
Filer's	Signature		Date		Preparer's Sign		- DAI	77 NT 121 N	D T T	
Spous	se's Signature		Date					VAN KUMAR DUR  ess and Telephone Number	NΤΙ	
Spous	oc a Oigilaluic		Date		GLOBAL			•		
<u> </u>			1		245 RO					
	By checking this box, I authorize Tre	easury to discuss my	return with my	v preparer	E BRUNS			08816		
╽╙┙	2, Shooking the box, I dutionze the	casary to disouse filly	. Starri With Hi	, proparor.	678-965			00010		

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956

Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

#### 2022 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

#### **Attachment 13**

**INSTRUCTIONS:** If you had Michigan income tax withheld in 2022, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name	M.I.	Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)
TARAKARAMA RAVI TE		GODAVARTHI	196 — 81 — 2257
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)

#### TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

*	A   B		С	D		E					
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld					
X		81-1194657	CORPORATE SOLUTI	129820	00	5255	00				
					00		00				
					00		00				
					00		00				
					00		00				
Enter	Table			00							
		TOTAL. Enter total of Table 1, c	4.	5255	00						

## TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	B C D					
Enter "X" for Filer or Spous	Payer's federal identification	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	<b>E</b> Michigan income tax withheld			
			00	00	00		
			00	00	00		
			00	00	00		
			00	00	00		
			00	00	00		
Enter Tab	le 2 Subtotal from additional Sche	dule W forms (if applicable)		00	00		
5. SUBTOTAL. Enter total of Table 2, column E							
6. <b>TO</b>	TAL. Add lines 4 and 5. Enter her	5255 00	00				

REV 02/21/23 PRO

#### MI-1040 Line 18

### **Credit for Income Tax Paid to Another State**

 $\begin{array}{c} \textbf{2022} \\ \textbf{Statement} \ \ \underline{\text{VA}} \end{array}$ 

	e as Shown on Return AKARAMA RAVI TEJA GODAVARTHI		al Security Number -81-2257					
• QuickZoom to another copy of this worksheet								
	<ul> <li>Part-year residents: You can claim this credit only when your income from another state was earned while you were a Michigan resident.</li> </ul>							
	urisdiction code · · · · · · ▶ <u>VA</u> urisdiction name · · · · · · <u>Virginia</u>							
1	Income earned in another state or locality subject to Michigan tax	1	7,398.					
2	Enter the amount from Form MI-1040, line 14	2	119,355.					
3	Divide line 1 by line 2	з	0.0620					
4	Enter the amount from Form MI-1040, line 17	4	4,860.					
5	Multiply line 4 by line 3	5	301.					
6	Enter the amount of tax imposed by another state or locality	6	240.					
7	Credit. Enter line 6 or the smaller of line 5 or line 6	7	240.					

MIIW1801.SCR 04/30/15

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

TARAKARAMA RAVI TEJA GODAVARTHI

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 196-81-2257

Par	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. Atta		5	-11,360.
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		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-11,360.

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

Educator expenses   11	Par	Adjustments to Income			
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	11			11	
officials. Attach Form 2106  1 Health savings account deduction. Attach Form 8889  1 Health savings account deduction. Attach Form 8889  1 Deductible part of self-employment tax. Attach Schedule SE  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed SEP, SIMPLE, and qualified plans  1 Self-employed health insurance deduction  1 The Penalty on early withdrawal of savings  1 Ba Alimony paid  1 Ba Pecipient's SSN  1 C Date of original divorce or separation agreement (see instructions):  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA deduction  2 IFA desclustion  2 IFA desclustion  2 IFA desclustion  2 IFA description of future use  2 IFA desclustion  2 IFA description of future use  2 IFA descri	12	Certain business expenses of reservists, performing artists, and fee-ba	asis government		
13 Health savings account deduction. Attach Form 8889		officials. Attach Form 2106		12	
15 Deductible part of self-employment tax. Attach Schedule SE 16 Self-employed SEP, SIMPLE, and qualified plans 17 Self-employed death insurance deduction 17 Penalty on early withdrawal of savings 18 Penalty on early withdrawal of savings 19a Alimony paid 19a Alimony paid 19a Recipient's SSN 19a Becipient's SSN 19a Becipient	13	Health savings account deduction. Attach Form 8889		13	
16 Self-employed SEP, SIMPLE, and qualified plans	14			14	
17 Self-employed health insurance deduction 18 Penalty on early withdrawal of savings 18 18 19 Alimony paid 19 Recipient's SSN 10 Date of original divorce or separation agreement (see instructions): 20 IRA deduction 21 Student loan interest deduction 22 Archer MSA deduction 23 Archer MSA deduction 24 Other adjustments: 25 Jury duty pay (see instructions) 26 Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit 24 Contributions of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m 24 Reforestation amortization and expenses 24 Repayment of supplemental unemployment benefits under the Trade Act of 1974 24 Contributions to section 501(c)(18)(D) pension plans 24 Contributions by certain chaplains to section 403(b) plans 24 Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) 24 Indicate the property of the provided of the lRS detect tax law violations 25 Industry and amount: 26 Total other adjustments. Add lines 24a through 24z 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	15			_	
18	16			-	
19a Alimony paid b Recipient's SSN c Date of original divorce or separation agreement (see instructions):  20 IRA deduction		Self-employed health insurance deduction		-	
b Recipient's SSN c Date of original divorce or separation agreement (see instructions): 20 1RA deduction	18			-	
c Date of original divorce or separation agreement (see instructions):  IRA deduction	19a			19a	
20   Student loan interest deduction   21   22   23   24   22   24   24   24   24	b	Recipient's SSN			
Student loan interest deduction Reserved for future use Archer MSA deduction  Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m.  Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974.  Contributions to section 501(c)(18)(D) pension plans  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  Housing deduction from Form 2555.  Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041).  Total other adjustments. List type and amount:  25  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	С	Date of original divorce or separation agreement (see instructions):			
22 Archer MSA deduction				-	
Archer MSA deduction Other adjustments:  Jury duty pay (see instructions)  Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit  Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m Reforestation amortization and expenses Repayment of supplemental unemployment benefits under the Trade Act of 1974 Contributions to section 501(c)(18)(D) pension plans Contributions by certain chaplains to section 403(b) plans 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 Jeuseph Housing deduction from Form 2555 Let Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) Cother adjustments. List type and amount:  Total other adjustments. Add lines 24a through 24z Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on				$\overline{}$	
24 Other adjustments: a 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				-	
a 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  c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m				23	
b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24		_		
rental of personal property engaged in for profit		, , , , ,	la		
c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	b				
and USOC prize money reported on line 8m			łb	-	
d Reforestation amortization and expenses	С				
e Repayment of supplemental unemployment benefits under the Trade Act of 1974					
Act of 1974			ła		
f Contributions to section 501(c)(18)(D) pension plans	е		10		
g Contributions by certain chaplains to section 403(b) plans					
h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)				-	
discrimination claims (see instructions)	_		rg		
i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	"		lh		
from the IRS for information you provided that helped the IRS detect tax law violations	i	·	***		
tax law violations	٠				
j Housing deduction from Form 2555			4i		
k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	i				
1041)	k		.,		
z Other adjustments. List type and amount:	•••		lk		
Total other adjustments. Add lines 24a through 24z	z				
Total other adjustments. Add lines 24a through 24z	_		łz		
26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on	25			25	
	26	,			
				26	

### SCHEDULE D (Form 1040)

Department of the Treasury

### **Capital Gains and Losses**

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

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

Use Form 8949 to list your transactions for lines 1h, 2, 3, 8h, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Intern	al Revenue Service Use Form 6949 to list your train	isactions for filles	10, 2, 3, 60, 9, and 1	0.		bequence No. 12
	(s) shown on return RAKARAMA RAVI TEJA GODAVARTHI				ocial se	curity number 2257
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	rt I Short-Term Capital Gains and Losses – Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	4,224.	3,183.			1,041.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
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 (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	mn (h). If you have	e any long-	7	1,041.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see i	nstructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) 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	17,298.	24,290.	6,8	346.	-146.
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					
	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	
13	, ,				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	•	•	-	14	( )

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

BAA

-146.

15

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 895. • 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. □ 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 • (\$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.

#### **Sales and Other Dispositions of Capital Assets**

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

196-81-2257

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

TARAKARAMA RAVI TEJA GODAVARTHI

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

Sequence No. 12A

Before you check Box A, B, or C belc statement will have the same informa broker and may even tell you which b	tion as Form 1	er you receive 1099-B. Either	ed any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s	) from your broke t) was reported to	r. A substitute the IRS by your	
Part I Short-Term. Trans- instructions). For lo Note: You may agg reported to the IRS Schedule D, line 1a	ng-term trai regate all s and for whi	nsactions, s hort-term tr ich no adjus	see page 2. ansactions rep stments or cod	oorted on Form les are required	(s) 1099-E d. Enter th	showing basi e totals directly	s was y on	
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com  X (A) Short-term transactions	below. Chec page 1, for ea aplete as mar reported on	k only one bach applicable by forms with Form(s) 1099	pox. If more than le box. If you han the same box of 9-B showing bas	n one box applies ve more short-te checked as you r sis was reported	s for your s rm transac need. to the IRS	hort-term transa tions than will fit (see <b>Note</b> above	on this page	
<ul><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	•	. ,	•	sis <b>wasn't</b> report	ed to the II	RS		
1 (a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds S	Proceeds See	(e) Cost or other basis See the <b>Note</b> 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.		G), (h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).	
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	4,224.	3,183.			1,041.	
2 Totals Add the amounts in columns	(d) (e) (d) and	h (h) (subtract	İ	I			İ	

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

4,224.

1,041.

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) .

3,183.

Form 8949 (2022) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

TARAKARAMA RAVI TEJA GODAVARTHI

above is checked), or line 10 (if Box F above is checked) .

196-81-2257

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

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>★ (D) Long-term transactions</li><li>(E) Long-term transactions</li></ul>	reported on I	Form(s) 1099	-B showing bas				e)
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	Cost or other basis See the <b>Note</b> below	Adjustment, i If you enter an enter a co	(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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/21	12/31/22	17,298.	24,290.	W	6,846.	-146.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above	al here and incl	lude on your					

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

6,846.

17,298.

24,290.

#### **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, Attachment

Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number 196-81-2257 TARAKARAMA RAVI TEJA GODAVARTHI Part I **Income or Loss From Rental Real Estate and Royalties Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . . 1a Physical address of each property (street, city, state, ZIP code) SRINIVASA COLONY EAST SR N HYDERABAD TELANGANA IN 500038 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,250. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 1,050. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,560. 14 14 Repairs . . . 15 Supplies 15 3,120. 16 16 Taxes 17 17 2,890. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 11,870. 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 21 -11,360.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 11,360.) 510. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on

23e

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result

11,360.

-11,360.

Schedule E (Form 1040) 2022

11,870.

-11,360.

24

25

24

25

26

Total of all amounts reported on line 20 for all properties

**Income.** Add positive amounts shown on line 21. **Do not** include any losses

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

NPA

# **763**Page 1

# 2022 Virginia Nonresident Income Tax Return Due May 1, 2023



	Enclose a comp	lete copy o	i your reder	ai ta	X return and ai	i other required	virgiii	ııa e	iiciosui	es.						
First Name			МІ					Your So		-		er	Check if deceased			
	AKARAMA RAVI			NAI	GODAVARTH	ΗI	196-81-2257 Suffix Spouse's Social Security N				lı ınah as					
Spous	se's First Name (Filing	Status 2 Oni	у)	MI	Last Name		Sullix		Spouse	S 500	iai Sec	urity iv	umber		Check decease	
Prese	nt Home Address (Nu	mber and Str	eet or Rural Ro	oute)			Y	our E	Birth Date	• [	0 7	- (		<b>-</b> 1 9 9		
1673	3 FAIRWAY GI	LENS DR			1	T	-	(mm	-dd-yyyy	)	0 /		)	_ 1 9 5	9 0	
City, Town or Post Office  State  ZIP Code  Spouse's Birth Date  A 8 1 9 8 (mm-dd-yyyy)							-		-							
YPSILANTI     MI     48198     (mm-dd-yyyy)       State of Residence     Important - Name of Virginia City or County in which principal place of business, employment								ment	or inco	me source	Locality Cod	de de				
is located.												, -				
MI			ALLEGHA	ANY							l	Cit	y <b>OR</b>	X County	005	=
			nded Return Reason Cod	e		Name(s) or A				nan			Overs	seas on Du	e Date	
Ch	eck Applicable Boxes											F10	01-1-			
	DOXCO	│	endent on And	othe	r's Return	Qualifying F Merchant Se		Fish	erman, o	or		\$	Clain	ned on fede	erai return .00	
	Filing Status Ente	r Filing Stat	us Code in b	ox b	elow.		Ex	emp	otions A	\dd S	ection		nd 2. I	Enter the si	um on Line	12.
	•	•	ead of house					You	Spor	use if	Depe	ndents				
					must have Virgi			rou	2 ( 1	or 3	Боро			$\neg$	Total Section	on 1
_ 1					rom Any Source	е		1	+		+	=	=   :	1 X \$930	= 93	0
If Filim			parate Retur		inala Casial Car	auritu Numahar		You 6	5 Spouse or or ove	e 65	You Blind	— Spouse Blind	•	_	Total Sect	ion 2
	ig Status 3 or 4, ent t top of form and en				use's Social Sec	•			1 +	] + [	+			X \$800	_	
DOX a	t top or form and en	iter opouse	3 Name						] ' [	] . Г				X \$000		
1	Adjusted Gross In	come from	federal returr	า - N	ot federal taxab	le income							1		119355	00
2	Additions from Sc	hedule 763	ADJ Line 3										2			00
3	Add Lines 1 and												3		119355	00
4	Age Deduction (Se														119333	
4	Enter Birth Dates	above. Ente	er Your Aae D	Dedu	ction on Line 4a	a							4a			00
	and Your Spouse's	_											4b			00
5	Social Security Ac	t and equiv	alent Tier 1 F	Railro	oad Retirement	Act benefits repo	orted or	ı you	ur federa	al retu	ırn		5			00
6	State income tax i	refund or ov	erpayment c	redit	reported as inc	come on your fed	leral ret	turn.					6			00
7	Subtractions from	Schedule 7	763 ADJ, Line	e 7									7			00
8	Add Lines 4a, 4b	, 5, 6, and 7	7										8			00
9	Virginia Adjusted	d Gross Inc	ome (VAGI).	. Sul	btract Line 8 fr	om Line 3							9		119355	00
10	Itemized Deduction	ns from Vir	ginia Schedu	le A,	if applicable. S	ee instructions							10			00
11	If you do not claim	n itemized d	eductions on	Line	e 10, enter stand	dard deduction.	See ins	struc	ctions				11		8000	00
12	Exemption amoun	t. Enter the	total amount	t fror	m the Exemption	n Sections 1 and	2 abov	/e					12		930	00
13	Deductions from S	Schedule 76	3 ADJ, Line	9									13			00
14	Add Lines 10, 11	, 12 and 13											14		8930	00
15	Virginia Taxable Ir	ncome comp	outed as a re	side	nt. Subtract Line	e 14 from Line 9							15		110425	00
16	Percentage from I	Nonresident	Allocation S	ectic	on on Page 2 (E	nter to one deci	mal plac	ce o	nly)				16		6.7	%
17	Nonresident Taxal	ble Income.	(Multiply Lin	e 15	by percentage	on Line 16)							17		7398	00
18	Income Tax from	Гах Table or	Tax Rate Sc	hedi	ule								18		240	00
19a	Your Virginia incor	me tax withl	neld. Enclose	For	rms W-2, W-2G,	, 1099, and VK-1							19a		415	00
	Dept. of Taxation F 1044 Rev. 07/22	or Local Use	LTD		□ \$		Γ							XX	XXX	

#### 2022 FORM 763 Page 2

	FORM 763 Page 2							
Your Na	me KARAMA RAVI TEJA GODAVARTHI	Your SSN 196-81-2257						
	Spouse's Virginia income tax withheld. Enclo	1	and VK-1		19b			00
	2022 Estimated Tax Payments				20			00
	2021 overpayment credited to 2022 estimate							00
	Extension Payment - submitted using Form							00
	Credit for Low-Income Individuals or Virginia							
	•							00
	Total credits from Schedule OSC.							00
	Credits from Schedule CR, Section 5, Line 1							00
	Total payments and credits. Add Lines 19	•					415	$\vdash$
27	If Line 18 is larger than Line 26, enter the dif	ference. This is the INCOME	TAX YOU O	WE	27			00
28	If Line 26 is larger than Line 18, enter the dif	ference. This is the <b>OVERPA</b>	YMENT AM	OUNT	28		175	00
29	Amount of overpayment on Line 28 to be CRE	DITED TO 2023 ESTIMATED	O INCOME TA	AX	29			00
30	Virginia529 and ABLE Contributions from Sc	hedule VAC, Part I, Line 6			30			00
31	Other Voluntary Contributions from Schedule	VAC, Section II, Line 14			31			00
	Addition to Tax, Penalty, and Interest from er				32			00
	See instructions Encl Sales and Use Tax is due on Internet, mail or				-			
	See instructionsChe				33			00
34	Add Lines 29 through 33				34			00
	If you owe tax on Line 27, add Lines 27 and Line 34 is larger than Line 28, enter the diffe www.tax.virginia.govCheck here if pa	rence. AMOUNT YOU OWE	. Enclose pa	yment or pay at	35			00
	If Line 28 is larger than Line 34, subtract Line 3				36		175	00
	•			LI ONDED TO TOO.	00		1/3	
	irect Deposit section below is not completed							7
	T BANK DEPOSIT ic Accounts Only  Your Bank Routing	Transit Number	Your Bank A	ccount Number Che	cking	X S	Savings	
No Inter	rnational Deposits 0 6 1 0 0	0 0 5 2 3	3 4 0	0 4 4 6 7 7	0 !	5 2		
	esident Allocation Percentage			A - All Sources		B - Virg	inia Sources	•
1. V	Vages, salaries, tips, etc		<u> </u>	129820				
2. li	nterest income				00		7968	00
3.	Dividends		2		00		7968	00
4. <i>A</i>	Alimony received		<u> </u>				7968	
5. E	,		3		00 00 00		7968	00
	Business income or loss		3 4 5		00		7968	00
	•		3 4 5 6	895	00 00 00 00 00		7968	00 00 00 00
6. C	Business income or loss Capital gain or loss/capital gain distributions Other gains or losses		3 4 5 6 7	895	00 00 00 00 00 00			00 00 00 00
6. C 7. C 8. T	Business income or loss	ons.	3 4 5 6 7 8		00 00 00 00 00 00 00		0	00 00 00 00 00 00
6. C 7. C 8. T 9. F	Business income or loss	ons. S corporations, etc	3 4 5 6 7 8 9	-11360	00 00 00 00 00 00 00			00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F	Business income or loss	ons. S corporations, etc.	3 4 5 6 7 8 9 10 10 10 10 10 10 10 10 10 10 10 10 10		00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F	Business income or loss	ons. S corporations, etc.	3 4 5 6 7 8 9 10 11		00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C	Business income or loss	ons	3 4 5 6 7 8 9 10 11 12		00 00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II	Business income or loss	ons. S corporations, etchedule 763 ADJ, Line 1luded on Sch. 763 ADJ, Line	3 4 5 6 7 8 9 10 11 12 13 12	-11360	00 00 00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L	Business income or loss	ons. S corporations, etchedule 763 ADJ, Line 1luded on Sch. 763 ADJ, Line ch column total here	3 4 5 6 7 8 9 10 11 12 13 14 14		00 00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T	Business income or loss	ons. S corporations, etc	3 4 5 6 7 8 9 10 11 12 13 14 14 14	-11360	00 00 00 00 00 00 00 00 00 00 00		0	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N	Business income or loss	ons	3 4 5 6 7 8 9 10 11 12 12 13 14 14 15 15 15	-11360	00 00 00 00 00 00 00 00 00 00 00	at www.tax	7968	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N p	Business income or loss	ons. S corporations, etc  hedule 763 ADJ, Line 1 luded on Sch. 763 ADJ, Line ch column total here ne 14 B, by Line 14 A. Comp Enter on Page 1, Line 16 s return with my (our) preparer.	3 4 5 6 7 8 9 10 11 12 13 14 14 14 15 15 15 15 15 15 15	-11360  119355  agree to obtain my Form e best of my (our) knowledge	00		7968 6.7%	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N F	Business income or loss	ons. S corporations, etc  hedule 763 ADJ, Line 1 luded on Sch. 763 ADJ, Line ch column total here ne 14 B, by Line 14 A. Comp Enter on Page 1, Line 16 s return with my (our) preparer.	3 4 5 6 7 8 9 10 11 12 13 14 14 15 15 15 15 15 15 1 15 17 15	-11360  119355  agree to obtain my Form e best of my (our) knowledge imber	00 00 00 00 00 00 00 00 00 1099-G		7968 6.7%	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N p I (We Your Sig	Business income or loss	ons. S corporations, etc  hedule 763 ADJ, Line 1 luded on Sch. 763 ADJ, Line ch column total here ne 14 B, by Line 14 A. Comp Enter on Page 1, Line 16 s return with my (our) preparer.	3 4 5 6 7 8 9 10 11 12 12 13 14 14 15 15	-11360  119355  agree to obtain my Form e best of my (our) knowledge imber 501-3563	00	ue, correct, a	7968 6.7%	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N p I (We Your Sig	Business income or loss	ons. S corporations, etc  hedule 763 ADJ, Line 1 luded on Sch. 763 ADJ, Line ch column total here ne 14 B, by Line 14 A. Comp Enter on Page 1, Line 16 s return with my (our) preparer.	3 4 5 6 7 8 9 10 11 12 13 14 14 15 15 15 15 15 15 1 15 17 15	-11360  119355  agree to obtain my Form e best of my (our) knowledge imber 501-3563	00	ue, correct, a	7968 6.7% virginia.gov.	00 00 00 00 00 00 00 00 00 00
6. C 7. C 8. T 9. F 10. F 11. C 12. II 13. L 14. T 15. N F 1 (We Your Sig	Business income or loss	ons. S corporations, etc  hedule 763 ADJ, Line 1 luded on Sch. 763 ADJ, Line ch column total here ne 14 B, by Line 14 A. Comp Enter on Page 1, Line 16 s return with my (our) preparer.	3 4 5 6 7 8 9 10 11 12 12 13 14 14 15 15	-11360  119355  agree to obtain my Form e best of my (our) knowledge imber 501-3563 te Number	00   00   00   00   00   00   00   00	ue, correct, a	7968 6.7% S.virginia.gov. and complete returned complete returned complete returned control code	00 00 00 00 00 00 00 00 00 00

#### 2022 Schedule INC/CG

196812257

Report all W-2s, 1099s & VK-1s with VA Withholding

TARAKARAMA R GODAVARTHI



Your/ Spouse SSN	Withholding VA Type Withholding		Employer FEIN	VA Account Number	VA Wages, tips, other comp.
Г					コ
196812257	W	415.	811194657	30811194657F001	7968.

Total VA Withholding

You

196812257

Spouse

Total # of W-2s,1099s & VK-1s

01