Department of the Treasury Internal Revenue Service

Calendar Year — Due **04/18/2023** 

# 2023 Form 1040-ES Payment Voucher 1

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order......

REV 03/22/23 PRO 1555

498.

....

312-31-7046 823-38-3925 PRANAY KATTEKOLA SRI SRAVYA CHAKILAM 9715 ARGINION LN APT C CHARLOTTE NC 28262

INTERNAL REVENUE SERVICE PO BOX 1300 CHARLOTTE NC 28201-1300

Department of the Treasury Internal Revenue Service

Calendar Year — Due **06/15/2023** 

# 2023 Form 1040-ES Payment Voucher 2

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order........... 498.

REV 03/22/23 PRO

1555

312-31-7046 823-38-3925 PRANAY KATTEKOLA SRI SRAVYA CHAKILAM 9715 ARGINION LN APT C CHARLOTTE NC 28262

INTERNAL REVENUE SERVICE PO BOX 1300 CHARLOTTE NC 28201-1300

Department of the Treasury Internal Revenue Service

Calendar Year — Due **09/15/2023** 

# 2023 Form 1040-ES Payment Voucher 3

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order.....

498.

REV 03/22/23 PRO

1555

312-31-7046 823-38-3925 PRANAY KATTEKOLA SRI SRAVYA CHAKILAM 9715 ARGINION LN APT C CHARLOTTE NC 28262

INTERNAL REVENUE SERVICE PO BOX 1300 CHARLOTTE NC 28201-1300

Department of the Treasury Internal Revenue Service

Calendar Year — Due **01/16/2024** 

# 2023 Form 1040-ES Payment Voucher 4

File only if you are making a payment of estimated tax by check or money order. Mail this voucher with your check or money order payable to the **'United States Treasury.'** Write your social security number and '2023 Form 1040-ES' on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this voucher.

Amount of estimated tax you are paying by check or money order......▶

498.

REV 03/22/23 PRO

1555

312-31-7046 823-38-3925 PRANAY KATTEKOLA SRI SRAVYA CHAKILAM 9715 ARGINION LN APT C CHARLOTTE NC 28262

INTERNAL REVENUE SERVICE OF SOR LOOK CHARLOTTE NC 28201-1300

### 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

merial nevertide Service						
Submission Identification Number (SID)			-			
Taxpayer's name	Social	secur	ity numl	oer		
PRANAY KATTEKOLA	312	-31	-704	6		
Spouse's name	Spouse	's so	cial sec	urity r	number	1
SRI SRAVYA CHAKILAM	823	3-38	3-392	5		
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Ent	ter year y	ou a	are au	thor	izing.)	)
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.						
<b>1</b> Adjusted gross income			1			,989.
2 Total tax			2		15	,234.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		13	,246.
4 Amount you want refunded to you			4			
5 Amount you owe			5		2	<u>,006.</u>
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amendation)						
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans- to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for re- for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in Dayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institu- authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin Dayment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation re- Dayment, I must contact the payment (settlement) date. I also authorize the financial institutions involved in the Dayment to the payment (settlement) date. I also authorize the financial institutions involved in the Dayment days prior to the payment (settlement) date. I also authorize the financial institutions involved in the Dayment days prior to the payment (settlement) date. I also authorize the financial institutions involved in the Dayment days prior to the payment (settlement) date. I also authorize the financial institutions involved in the Dayment days prior to the payment (settlement) date. I also authorize the financial institutions involved in the Dayment days prior to the payment (settlement) days are the financial institution account in the payment of the payment days are the payment days are the payment of the payment days are t	rejection of U.S. Treas indicated in ution to del ate the autiequests man he process e payment.	the sury a the sit the soit the thorize the sit the sit the sing of the sing of the sit the si	transmistand its of tax preperently eartion. The receipt the elerther acceipt the access	ssion desig parati to thi Fo re ved ectro knov	, <b>(b)</b> th nated on sof s acco voke (c no late nic pay	e reasor Financia tware for ount. This cancel) a er than 2 yment or that the
Taxpayer's PIN: check one box only						
X   I authorize GLOBAL TAXES LLC to enter or generate	to my DINI	_ 1	. 7 (	) 4	6	ac my
ERO firm name	e my Fm	E	nter five			as my
signature on the income tax return (original or amended) I am now authorizing.		a	on't ente	er all 2	eros	
I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN me below.						
Your signature ▶ Date ▶						
Spouse's PIN: check one box only						
I authorize GLOBAL TAXES LLC to enter or generate	te mv PIN	8	3   3   9	9 2	5	as my
ERO firm name	,		nter five			,
signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN and your return is filed using the Practitioner PIN me below.		noriz		neck	this b	
Spouse's signature ▶ Date ▶						
Practitioner PIN Method Returns Only—continue belo	w					
Part III Certification and Authentication — Practitioner PIN Method Only						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 Doi	9 n't en	6 3 ter all ze	1 eros	9 8	9
certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suffrequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the Practition PIN method and Pub. 1345, Handbook for Authorized IRS <i>e-file</i> Providers of the PIN method PIN meth	bmitting th	is ret	urn in a	accor	danće	
ERO's signature ▶ Date ▶						
FRO Must Retain This Form — See Instructions						

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

Form 1040-V (2022) 2022 Page **2** 

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2022

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2022

# Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

Write your social security number (SSN) on your check or money order.

Enter the amount of your payment . . . . . ▶

5,006.

REV 03/22/23 PRO

1555

PRANAY KATTEKOLA SRI SRAVYA CHAKILAM 9715 ARGINION LN C CHARLOTTE NC 28262 INTERNAL REVENUE SERVICE P.O. BOX 1214 CHARLOTTE, NC 28201-1214

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.

_	s 🗌 S	Single X Married filing jointly	Marri	ed filing separately	y (MFS)	Head of	hous	ehold (HOF	l) 🗌		ifying surv	ving
Check only one box.	If vo	u checked the MFS box, enter the r	name of	vour spouse. If you	ı check	ed the HOH o	089	Shox ente	r the c		ise (QSS) name if the	aualifyina
0110 00%		on is a child but not your depender		your opouco. If you	a 0110011		QO.	o box, onco	1 1110 0	11110	namo n un	y quamymig
Your first name	and mi	ddle initial	Last na	ame					Yo	our so	cial security	number
PRANAY			KATT	TEKOLA							31-7046	
	pouse's	first name and middle initial	Last na						-			urity number
SRI SRAV			CHAR	KILAM					8	23-3	38-3925	
		er and street). If you have a P.O. box, se						Apt. no.	_			n Campaign
9715 ARG	•							C			ere if you,	
		ce. If you have a foreign address, also c	omplete s	spaces below.	Sta	te	ZIP	code			if filing joint	
CHARLOTT	ΓE				NO	7	28	262		_	this fund. ( ow will not (	0
Foreign country				Foreign province/sta	ite/count	y	Fore	eign postal co			or refund.	mango
				- '							You	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award.	or pavr	ment for prope	rtv o	r services):	or (b)	sell.		
Assets		ange, 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/Rlindness		Were born before January 2,	1058 [	Are blind	Spouse	· 🗆 Was box	rn he	fore Janua	n/2 1	958	☐ Is blii	nd
Dependents			1000 [	(2) Social secu		(3) Relationsh		(4) Check th	, ,			
•	,	rst name Last name		number	iiity	to you	"P	Child ta	x credi	t	Credit for oth	er dependents
If more than four								Г	7		Г	1
dependents,												<u>-</u> 1
see instructions and check	s ——							Ī	<del>-</del>		Ī	<del></del>
here	]							Ī	ī		Ī	<del></del>
Incomo	1a	Total amount from Form(s) W-2, b	oox 1 (se	ee instructions) .					<del>-</del>	1a	19	0,425.
Income	b	Household employee wages not i	,	,						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	ported o	n Form(s) W-2 (se	e instru	ictions)				1d		
W-2G and	е	Taxable dependent care benefits	from Fo	rm 2441, line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption ben	efits fron	n Form 8839, line	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 instructions.	i	Nontaxable combat pay election	(see inst	ructions)		1i						
motraotions.	Z	Add lines 1a through 1h		,						1z	19	0,425.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t			2b		
if required.	3a	Qualified dividends	3a			rdinary divide				3b		
	4a	IRA distributions	4a		b T	axable amoun	t.			4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t.			5b		
Deduction for— Single or	6a	Social security benefits	6a		b T	axable amoun	t.			6b		
Married filing	С	If you elect to use the lump-sum	election	method, check he	re (see	instructions)			. Ц			
separately, \$12,950	7	Capital gain or (loss). Attach Sche	edule D i	f required. If not re	equired	, check here				7		1,769.
Married filing	8	Other income from Schedule 1, lin								8	-5	3,667.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	7, and 8.	This is your <b>total</b>	income	e				9	13	<u>4,989.</u>
surviving spouse, \$25,900	10	Adjustments to income from Sche	edule 1,	line 26						10		
Head of	11	Subtract line 10 from line 9. This	is your <b>a</b>	djusted gross inc	come					11	13	<u>4,989.</u>
household, \$19,400	12	Standard deduction or itemized	l deduct	tions (from Sched	ule A)					12	2	5,900.
If you checked any box under	13	Qualified business income deduc	tion fron	n Form 8995 or Fo	rm 899	5-A				13		
Standard	14	Add lines 12 and 13								14		5,900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ero or les	s, enter -0 This i	s your t	taxable incom	ne			15	10	9,089.
)												

Form 1040 (2022	2)			Page <b>2</b>
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814  2  4972  3	16	15,234.
Credits	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	15,234.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	15,234.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>	24	15,234.
Payments	25	Federal income tax withheld from:		
,	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)	7	
	d	Add lines 25a through 25c	25d	13,246.
15	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	1	
	29	American opportunity credit from Form 8863, line 8	1	
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15	1	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	13,246.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	
neiulia	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here	35a	
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings		
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .		
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions	37	2,006.
	38	Estimated tax penalty (see instructions)		
Third Party Designee		you want to allow another person to discuss this return with the IRS? See structions	oelow.	X No
		signee's Phone Personal identi	fication	
	na			
Sign Here	be	der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	n prepar	er has any knowledge.
1.0.0	Yo			nt you an Identity IN, enter it here
Joint return?			inst.)	IIV, enter it nere
See instructions.	Sp		IRS ser	nt your spouse an
Keep a copy for		Iden	tity Prote	ection PIN, enter it here
your records.		SOFTWARE ENGINEER (see	inst.)	
		one no. (301)526-6211 Email address PRANAY.KATTEKOLA@GMAIL.COM		
Paid	Pre	eparer's name Preparer's signature Date PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/12/2023 P0208	2703	Self-employed
Use Only	Fir		ne no. (	678)965-9522
	Fir	m's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm	's EIN	84-3171965
Go to www irs a	ov/Forr	n 1040 for instructions and the latest information		Form 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

PRANAY KATTEKOLA & SRI SRAVYA CHAKILAM

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 312-31-7046

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	-53,667.
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	
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		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	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-NK, line 8	10	-53,667.

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 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 24 Jeli 25 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 C (Form 1040)

# Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/ScheduleC for instructions and the latest information. Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Attachment Sequence No. **09** 

Name	of proprietor						security number (SSN)		
SRI					823-38-3925				
Α	Principal business or profession, including product or service (see instructions)						er code from instructions		
	SOFTWARE SERVICES						1 9 2 0 0		
С	Business name. If no separate	busin	ess name, leave blank.			D Emp	oloyer ID number (EIN) (see instr.)		
	SOFTWARE SERVICES								
E	Business address (including su								
	City, town or post office, state								
F	Accounting method: (1)	_	· · · · · · · · · · · · · · · · · · ·						
G			•	_	2022? If "No," see instructions for I				
Н	·		-						
Ι.					n(s) 1099? See instructions				
J	If "Yes," did you or will you file	requi	red Form(s) 1099'?				LYes LNo		
Part									
1	·				this income was reported to you or	<b>I</b>			
•					1	1 2			
2 3									
4									
5	•	,							
6					refund (see instructions)				
7	, ,		O .		eiulia (see ilistractions)				
Part			es for business use of yo						
8	Advertising	8	io for Buointeed dee of ye	18	Office expense (see instructions)	18			
9	Car and truck expenses			19	Pension and profit-sharing plans				
9	(see instructions)	9	8,527.	20	Rent or lease (see instructions):				
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment	20a			
11	Contract labor (see instructions)	11		b	Other business property		20,400.		
12	Depletion	12		21	Repairs and maintenance		·		
13	Depreciation and section 179			22	Supplies (not included in Part III)				
	expense deduction (not included in Part III) (see			23	Taxes and licenses				
	instructions)	13		24	Travel and meals:				
14	Employee benefit programs			а	Travel	24a	4,000.		
	(other than on line 19) .	14		b	Deductible meals (see				
15	Insurance (other than health)	15			instructions)	24b	6,100.		
16	Interest (see instructions):			25	Utilities	. 25	1,540.		
а	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26			
b	Other	16b		27a	Other expenses (from line 48) .	27a	13,100.		
17	Legal and professional services	17		b	Reserved for future use	. 27b			
28	Total expenses before expen-	ses fo	r business use of home. Add	l lines 8	3 through 27a	. 28	53,667.		
29	Tentative profit or (loss). Subtr	act lin	e 28 from line 7			. 29	-53,667.		
30				e expe	nses elsewhere. Attach Form 8829	)			
	unless using the simplified me			, ,					
	Simplified method filers only			(a) you		-			
	and (b) the part of your home to				. Use the Simplified				
			•	ter on I	ine 30	. 30			
31	Net profit or (loss). Subtract I				)				
	<ul> <li>If a profit, enter on both Schecked the box on line 1, see</li> </ul>		* **			31	-53,667.		
	• If a loss, you must go to line				J				
32	If you have a loss, check the b	ox tha	t describes your investment	in this	activity. See instructions.				
	• If you checked 32a, enter the		•				<b>V</b>		
	SE, line 2. (If you checked the	box or	line 1, see the line 31 instruc	tions.)	Estates and trusts, enter on		All investment is at risk.		
	Form 1041, line 3.	<b></b>	ob Forms 6400 V	w b = !'	Distant.	32b	Some investment is not at risk.		
	<ul> <li>If you checked 32b, you must</li> </ul>	oi ana	UH <b>FUHHU 190.</b> YOUR IOSS Ma	ay be ill	mileu.				

BAA

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

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to			
	value closing inventory: a Cost b Lower of cost or market c Other (atta		olanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor If "Yes," attach explanation		. 🗌 Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part				
43	When did you place your vehicle in service for business purposes? (month/day/year) 10/06/2013			
44	Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle during 2022 years and you were the number of miles you were the number o	ehicle	for:	
а	Business 14,225 <b>b</b> Commuting (see instructions) <b>c</b> O	ther		6,775
45	Was your vehicle available for personal use during off-duty hours?		Tes	⊠ No
46	Do you (or your spouse) have another vehicle available for personal use?		🗙 Yes	☐ No
47a	Do you have evidence to support your deduction?		Yes	<b>⊠</b> No
b			Tes	☐ No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or line	e 30.	Γ	
BA	CK END OFFICE EXPENSES			13,100.
48	Total other expenses. Enter here and on line 27a	48		13,100.

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

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

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

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

lame(s) shown on return
PRANAY KATTEKOLA & SRI SRAVYA CHAKILAM

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Your social security number 312-31-7046

If "Y	es," attach Form 8949 and see its instructions for additiona	al requirements for	r reporting your ga	ain or loss.		
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 be dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, column	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	15,777.	22,161.	4,5	77.	-1,807.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	6,543.	6,505.			38.
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			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	our <b>Capital Loss</b>		6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	-1,769.
Pa	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	leld More Than	One Year	(see i	instructions)
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, I	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	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.			line 2, colum	(9)	with column (g)
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11 12	

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

BAA

13

14

15

Schedule D (Form 1040) 2022 Page 2

#### Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -1,769.• 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 1,769.) • (\$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**

Social security number or taxpayer identification number

OMB No. 1545-0074

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

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Attachment Sequence No. 12A

PRANAY KATTEKOLA & SRI	SRAVYA C	HAKILAM		312-31	-7046		
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	tion as Form	er you receive 1099-B. Eithei	ed any Form(s) 109 will show whether	99-B or substitute er your basis (usua	statement(s ally your cost	) 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	ng-term tra regate all s and for wh	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 the	showing basi e totals directly	s was y on
Schedule D, line 1a	• •	<u> </u>					
You must check Box A, B, or C I complete a separate Form 8949, p for one or more of the boxes, com	page 1, for ea	ach applicab	e box. If you ha	ve more short-te	rm transact		
<ul><li>(A) Short-term transactions</li><li>(B) Short-term transactions</li><li>(C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•		•	e)
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 co	f any, to gain or loss amount in column (g), ode in column (f). arate 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	15,777.	21,502.	W	4,577.	-1,148.
COINBASE	01/01/22	12/31/22	0.	659.			-659.
2 Totals. Add the amounts in columns	s (d), (e), (g), and	d (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.

15,777.

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) .

22,161.

### 8949

### Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074 Attachment Sequence No. 12A

Department of the Treasury Internal Revenue Service

Social security number or taxpayer identification number

312-31-7046

PRANAY KATTEKOLA & SRI SRAVYA CHAKILAM

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

broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) 🗵 (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired (sales price) from column (d) and disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions ROBINHOOD CRYPTO LLC 01/01/22 12/31/22 6,543. 6,505. 38.

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.

6,543.

38.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) .

6,505.

### **Additional Information From 2022 Federal Tax Return**

### Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 20b Itemization Statement

Description	Amount
RENT(12M*\$1700P.M)	20,400.
Total	20,400.

### Schedule C (SOFTWARE SERVICES): Profit or Loss from Business

Line 25 Itemization Statement

Description	Amount
INTERNET(12M*\$40P.M)	480.
GAS	1,059.66
Total	1,540.