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

| | | <u> </u> |
|--|--|---|
| Submission Identification Number (SID) | | |
| Taxpayer's name | Social security | y number |
| JAYA PADMA SRI MADDI | 448-61- | 9481 |
| Spouse's name | | al security number |
| | | |
| Part I Tax Return Information — Tax Year Ending December 31, 2022 | (Enter year you ar | e 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. | ı | |
| 1 Adjusted gross income | | 1 120,927. |
| 2 Total tax | | 2 19,038. |
| 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | İ | 3 18,172. |
| 4 Amount you want refunded to you | İ | 4 |
| 5 Amount you owe | | 5 866. |
| Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an | | · · · · · · · · · · · · · · · · · · · |
| 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 authorized Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accorpayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial in authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the 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 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 amend Electronic Funds Withdrawal Consent. | for rejection of the tra- e the U.S. Treasury an unt indicated in the ta- nstitution to debit the erminate the authoriza- on requests must be d in the processing of the payment. I furth | ansmission, (b) the reason dits designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the received the the the electronic payment of the reacknowledge that the |
| Taxpayer's PIN: check one box only | | |
| ▼ I authorize GLOBAL TAXES LLC to enter or ger | perate my PIN | 9 4 8 1 as my |
| ERO firm name | Ento | er five digits, but 't enter all zeros |
| signature on the income tax return (original or amended) I am now authorizing. | don | it enter all zeros |
| I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below. Your signature Day Particular of the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below. | I method. The ERO | |
| Your signature ► Da | te ► <u>04/08/2023</u> | |
| Spouse's PIN: check one box only | | |
| ☐ I authorize to enter or ger | perate my PIN | as my |
| ERO firm name | , | er five digits, but |
| signature on the income tax return (original or amended) I am now authorizing. | | 't enter all zeros |
| I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below. | | |
| Spouse's signature ▶ Da | te ▶ | |
| Practitioner PIN Method Returns Only—continue | | |
| 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 2 4 9 6 Don't ente | 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 included authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I are requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Provided | n submitting this retur | rn in accordance with the |
| ERO's signature ▶ Da | te ▶ | |
| ERO Must Retain This Form — See Instruction | | |
| | /IIU | |

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. 1545-007

IRS Use Only—Do not write or staple in this space

| Check only | | Single Married filing jointly | _ | ed filing separately (N | | _ | | | | spou | lifying su use (QSS | 5) | |
|----------------------------------|---------------|--|----------------------|-------------------------|--------------|--------------------------------|---------|------------|----------|---------------------------------|--|---------------|------------|
| one box. | - | u checked the MFS box, enter the nonis a child but not your dependent | - | our spouse. If you c | hecke | ed the HOH or | r QSS | box, ente | r the c | child's | name if | the q | ualitying |
| Your first name | | | Last nai | me | | | | | Y | our so | cial secu | rity nı | umber |
| JAYA PAI | AMC | SRT | MADD | ıT | | | | | | | 61-948 | - | |
| | | s first name and middle initial | Last nai | | | | | | _ | Spouse's social security number | | | |
| Home address | (numbe | er and street). If you have a P.O. box, see | instruction | ons. | | | Α | pt. no. | Pi | reside | ntial Elec | tion C | Campaign |
| 3990 SPI | RING | VALLEY RD | | | | | | 125 | | Check here if you, or your | | | |
| | | ce. If you have a foreign address, also co | mplete s | paces below. | Stat | e | ZIP co | | | | if filing jo | | |
| DALLAS | | | TX 75 | | | | | 44 | | | this fund ow will no | | |
| Foreign countr | y name | | F | oreign province/state/ | count | у | Foreig | | | | or refund | | . J. |
| | | | | | | | | | | | You | | Spouse |
| Digital Assets | | ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a | | | | | - | | | | Yes | . × | No |
| Standard | | eone can claim: You as a de | | | | a dependent | , | (| | / | | | |
| Deduction | _ | Spouse itemizes on a separate retur | | • | | | | | | | | | |
| Age/Blindnes | s You: | ☐ Were born before January 2, 1 | 958 | Are blind Spo | ouse: | ☐ Was bor | rn befo | re Janua | ry 2, 1 | 958 | ☐ Is I | blind | |
| Dependent | s (see | instructions): | | (2) Social security | , | (3) Relationsh | nip (4 |) Check th | ie box i | f quali | fies for (se | e inst | ructions): |
| If more | (1) Fi | rst name Last name | | number | | to you | | Child ta | x cred | it | Credit for | other d | dependents |
| than four | | | | | | | | | | | | | |
| dependents, see instruction | s | | | | | | | | | | | \sqsubseteq | |
| and check | | | | | | | | L | | | | <u>Ш</u> | |
| here L | | | | | | | | L | | | | Ш_ | |
| Income | 1a | Total amount from Form(s) W-2, b | • | * | | | | | | 1a | 1 | <u>.22,</u> | 564. |
| Attack Farms(a) | b | Household employee wages not re | | | | | | | | 1b | | | |
| Attach Form(s) W-2 here. Also | С | Tip income not reported on line 1a | • | • | | | | | | 1c | | | |
| attach Forms | d | Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | | | | | | | | 1d | | | |
| W-2G and 1099-R if tax | е | Taxable dependent care benefits from Form 2441, line 26 | | | | | | | | 1e | | | |
| was withheld. | f | Employer-provided adoption benefits from Form 8839, line 29 | | | | | | | | 1f | | | |
| If you did not | g | Wages from Form 8919, line 6 . | | | | | | | | 1g | | | |
| get a Form W-2, see | h | Other earned income (see instruct | · | | | | | | 1h | | | 0. | |
| instructions. | ı | Nontaxable combat pay election (s | see instr | ructions) | | <u>1</u> i | I | | | _ | 1 | 22 | E C A |
| | <u>Z</u> | Add lines 1a through 1h | | | | | | | 1z | | <u>. </u> | 564. | |
| Attach Sch. B if required. | 2a | ' <u></u> | 2a | | | axable interes | | | | 2b | | | |
| | 3a | | 3a 4a | | | rdinary divide axable amoun | | | | 3b 4b | _ | | |
| Standard | 4a 5a | | т а 5а | | | axable amoun | | | | 5b | | | |
| Deduction for— | 6a | | 6a | | | axable amoun | | | | 6b | | | |
| Single or | C | If you elect to use the lump-sum e | | method check here | | | | | · . | OD | | | |
| Married filing separately, | 7 | Capital gain or (loss). Attach Sche | | | | , | | | . 🗀 | 7 | | 8 | 382. |
| \$12,950 Married filing | 8 | Other income from Schedule 1, lin | | | | | | | . ш | 8 | + - | | 019. |
| jointly or | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 | | | | | | | | 9 | | | ,927. |
| Qualifying surviving spouse, | 10 | Adjustments to income from Sche | | = | | | | | | 10 | | . <u></u> . , | <i></i> |
| \$25,900 Head of | 11 | Subtract line 10 from line 9. This is | | | | | | | | 11 | | 20 | 927. |
| household, | 12 | Standard deduction or itemized | - | | | | | | | 12 | | | ,950. |
| \$19,400 If you checked | 13 | Qualified business income deduct | | | | 5-A | | | | 13 | | / | |
| any box under Standard | 14 | | | | | | | | | 14 | + | 12. | ,950. |
| Deduction, see instructions. | 15 | Subtract line 14 from line 11. If zer | o or less | s, enter -0 This is y | our t | axable incom | ne . | | | 15 | 1 | | 977. |
| | 1 | | | | | | | | | | | | |

| | Page 2 |
|------|---------------|
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| × No | |
| | |

Form 1040 (2022) **Tax** (see instructions). Check if any from Form(s): **1** 8814 **2** 4972 3 16 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 17 Add lines 16 and 17 18 18 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 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 Add lines 22 and 23. This is your total tax 24 24 **Payments** 25 Federal income tax withheld from: 18,172. Form(s) W-2 . 25a а Form(s) 1099 25b b Other forms (see instructions) 25c С 25d d Add lines 25a through 25c 26 2022 estimated tax payments and amount applied from 2021 return 26 If you have a 27 Earned income credit (EIC) 27 qualifying child, attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8. 29 30 30 Reserved for future use 31 Amount from Schedule 3, line 15 31 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 total payments 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here . . . 35a 35a Routing number X X X X X X X X X X X Direct deposit? b c Type: Checking Savings See instructions. d 36 Amount of line 34 you want applied to your 2023 estimated tax . . . Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . 37 Estimated tax penalty (see instructions) Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) ASSOCIATE SOFTWARE ENGINE Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (469)785-7092Email address PADMASRIMJ@GMAIL.COM Preparer's name PTIN Check if: Preparer's signature Date **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/22/2023 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name Use Only

Firm's address

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's EIN

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

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
JAYA PADMA SRI MADDI

Your social security number
448-61-9481

| 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 | |
| 4 | Other gains or (losses). Attach Form 4797 | | 4 | |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attac | ch Schedule E . | 5 | -10,019. |
| 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 | | 8h | | |
| i | ⊨ | 8i | | |
| j | Activity not engaged in for profit income | 8j | | |
| k | Stock options | 8k | | |
| - 1 | 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 | ` ' | 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 | | | |
| | · · · · · · · · · · · · · · · · · · · | 8t | | |
| u | | 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 | -10,019. |

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

| Par | Adjustments to Income | | | |
|-----|---|-------------|-----|--|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-t | | | |
| | officials. Attach Form 2106 | | 12 | |
| 13 | Health savings account deduction. Attach Form 8889 | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form 3903 | | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | 16 | |
| 17 | Self-employed health insurance deduction | | 17 | |
| 18 | Penalty on early withdrawal of savings | | 18 | |
| 19a | Alimony paid | | 19a | |
| b | Recipient's SSN | | | |
| С | Date of original divorce or separation agreement (see instructions): | | | |
| 20 | IRA deduction | | 20 | |
| 21 | Student loan interest deduction | | 21 | |
| 22 | Reserved for future use | | 22 | |
| 23 | Archer MSA deduction | | 23 | |
| 24 | Other adjustments: | | | |
| а | Jury duty pay (see instructions) | 24a | | |
| b | Deductible expenses related to income reported on line 8I from the | | | |
| | rental of personal property engaged in for profit | 24b | | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals | | | |
| | | 24c | | |
| d | | 24d | | |
| е | Repayment of supplemental unemployment benefits under the Trade | | | |
| | | 24e | | |
| f | | 24f | | |
| g | , | 24g | | |
| h | Attorney fees and court costs for actions involving certain unlawful | | | |
| | · | 24h | - | |
| 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 | | | |
| | F | 24i | - | |
| j | <u> </u> | 24j | - | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | | | |
| | | 24k | - | |
| Z | Other adjustments. List type and amount: | na_ | | |
| 05 | | 24z | 05 | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income . | | 00 | |
| | Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a | | 26 | |

REV 03/09/23 PRO

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service 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.

Name(s) shown on return Your social security number JAYA PADMA SRI MADDI 448-61-9481 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 5,492. 5,027. 465. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 465. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with 21,470. 13,553. 7,917. Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

7,917.

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

Part III Summary

| Combine lines 7 and 15 and enter the result | 16 | 8, | 382. |
|--|----|----|------|
| 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 line 22. 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. Are lines 15 and 16 both gains? Yes. Go to line 18. | | | |
| line 22. 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. Are lines 15 and 16 both gains? Yes. Go to line 18. | | | |
| 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? X Yes. Go to line 18. | | | |
| X Yes. Go to line 18. | | | |
| | | | |
| 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet | 18 | | |
| 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet | 19 | | |
| 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. | | | |
| 21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: | | | |
| • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) | 21 | (|) |
| Note: When figuring which amount is smaller, treat both amounts as positive numbers. | | | |
| 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? | | | |
| ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. | | | |
| ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR. | | | |

8949

Sales and Other Dispositions of Capital Assets

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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. Sequence No. 12A

Name(s) shown on return JAYA PADMA SRI MADDI Social security number or taxpayer identification number

448-61-9481

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 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★ (B) Short-term transactions★ (C) Short-term transactions | reported on | Form(s) 1099 | 9-B showing bas | | | | 9) |
|--|--|--------------------------------|-------------------------------------|--|--|---------------------------------------|---|
| (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below | Cost or other basis See the Note below enter a code in co See the separate in | | (h) Gain or (loss) Subtract column (e) |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g). |
| MORGAN STANLEY DOMESTIC HOLDINGS, INC | 01/01/22 | 12/01/22 | 5,492. | 5,027. | | | 465. |
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| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C) | al here and inc is checked), lir | lude on your ne 2 (if Box B | 5,492. | 5,027. | | | 465. |

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.

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

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

JAYA PADMA SRI MADDI

Social security number or taxpayer identification number

448-61-9481

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.

| ✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions | reported on | Form(s) 1099 | -B showing bas | • | , | |) |
|---|---|--------------------------------|-------------------------------------|--|-------------------------------------|--|---|
| (a) Description of property | (b) Date acquired | (b) (c) | (d) Proceeds | (e) Cost or other basis See the Note below | If you enter an enter a co | Adjustment, if any, to gain or loss f you enter an amount in column (g), enter a code in column (f). See the separate instructions. | |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g). |
| MORGAN STANLEY DOMESTIC HOLDINGS, INC | 01/01/20 | 12/01/22 | 21,470. | 13,553. | | | 7,917. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked). | I here and inc is checked), lir | lude on your ne 9 (if Box E | 21,470. | 13,553. | | | 7,917. |

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.

BAA REV 03/09/23 PRO Form **8949** (2022)

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Your social security number

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

Attachment Sequence No. 13

| JAY. | A PADMA SRI MADDI | | | | | | 448-6 | 1-9481 | |
|-------------|---|------------------|-------------|------------|--------|-------------------|-----------|-------------|-----------------|
| Par | | | | | | | | | |
| | Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40. | ty, use S | Schedule | C. See | instru | ctions. If you ar | e an indi | /idual, rep | ort farm |
| Α | Did you make any payments in 2022 that would require you t | to filo E | (orm/o) 1 | 0002 8 | oo inc | tructions | | | No. VI No. |
| | If "Yes," did you or will you file required Form(s) 1099? . | | | | | | | | |
| | | | | | | <u></u> | | . 🗆 🖰 | 55 <u> 140</u> |
| 1a | Physical address of each property (street, city, state, ZIP | | | | | | | | |
| Α | 102, RAINBOW APARTMENTS 5-5-190/66, PATE | CL NAC | GA R,N | AMPAI | LY, E | HYDERABAD, | TELAN | GANA I | N 500001 |
| В | | | | | | | | | |
| С | | | | | | | | | |
| 1b | Type of Property 2 For each rental real estate proper | | | | Fa | ir Rental | Person | | QJV |
| | (from list below) above, report the number of fair repersonal use days. Check the QJ | rental a | nd | | | Days | Da | | |
| A | gersonal use days. Check the QJ if you meet the requirements to fi | | | Α | | 365 | | 0 | |
| В | qualified joint venture. See instruc | | | В | | | | | |
| <u>C</u> | | | | С | | | | | |
| | of Property: | | | | - | 0.16.0 | | | |
| | Single Family Residence 3 Vacation/Short-Term Rent | iai | 5 Land | | | Self-Rental | | | |
| 2 | Multi-Family Residence 4 Commercial | | 6 Roya | lities | 8 | Other (descri | be) | | |
| | | | | | | Propertie | s: | | |
| Inco | me: | | | Α | | В | | | С |
| 3 | Rents received | 3 | | 6 | 25. | | | | |
| 4 | Royalties received | 4 | | | | | | | |
| Expe | nses: | | | | | | | | |
| 5 | Advertising | 5 | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | | | | | | |
| 7 | Cleaning and maintenance | 7 | | 9 | 57. | | | | |
| 8 | Commissions | 8 | | | | | | | |
| 9 | Insurance | 9 | | | | | | | |
| 10 | Legal and other professional fees | 10 | | | | | | | |
| 11 | Management fees | 11 | | 1,2 | 51. | | | | |
| 12 | Mortgage interest paid to banks, etc. (see instructions) | 12 | | | | | | | |
| 13 | Other interest | 13 | | 3,8 | 00 | | | | |
| 14 15 | Repairs | 15 | | 2,9 | | | | | |
| 16 | | 16 | | 4, 3 | 07. | | | | |
| 17 | Utilities | 17 | | 1,6 | 49 | | | | |
| 18 | Depreciation expense or depletion | 18 | | <u> </u> | 15. | | | | |
| 19 | | 19 | | | | | | | |
| 20 | Other (list) Total expenses. Add lines 5 through 19 | 20 | | 10,6 | 44. | | | | |
| 21 | Subtract line 20 from line 3 (rents) and/or 4 (royalties). If | | | | | | | | |
| | result is a (loss), see instructions to find out if you must | | | | | | | | |
| | file Form 6198 | 21 | - | -10,0 | 19. | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, | | | | | | | | |
| | on Form 8582 (see instructions) | 22 (| | 10,01 | 9.) | (|) | (|) |
| 23 a | Total of all amounts reported on line 3 for all rental proper | | | | 23a | | 625. | | |
| b | Total of all amounts reported on line 4 for all royalty prope | | | | 23b | | | | |
| С | Total of all amounts reported on line 12 for all properties | | | | 23c | | | | |
| d | Total of all amounts reported on line 18 for all properties | | | | 23d | | | | |
| е | Total of all amounts reported on line 20 for all properties | | | | 23e | - | 644. | | |
| 24 | Income. Add positive amounts shown on line 21. Do not | | - | | | | 24 | , | |
| 25 | Losses. Add royalty losses from line 21 and rental real estate | | | | | | | (| 10,019.) |
| 26 | Total rental real estate and royalty income or (loss). C | | | | | | | | |
| | here. If Parts II, III, IV, and line 40 on page 2 do not a Schedule 1 (Form 1040), line 5. Otherwise, include this am | | | | | | | | _10 010 |
| | ochedule i (i offi 1040), lifte o. Otherwise, iliciude this aff | nount l | ii iiie iOl | aı UII III | 15 4 I | on paye 2 . | 26 | | -10,019. |