## **IRS e-file Signature Authorization**

ERO must obtain and retain completed Form 8879.
 Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

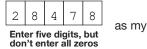
axpaver's name

Taxpayer's name	Social	security number
SAI SRINATH JOSYULA	793	3-02-8478
Spouse's name	Spous	e's social security number
AMISHA THAKKAR	80	7-23-8428
Part I Tax Return Information – Tax Year Ending December 31, 202	22 (Enter year y	you are 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.		
<b>1</b> Adjusted gross income		<b>1</b> 262,137.
<b>2</b> Total tax		<b>2</b> 44,368.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 48,216.
4 Amount you want refunded to you		<b>4</b> 3,848.
<b>5</b> Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you		

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

#### Taxpayer's PIN: check one box only

				ERO firm name	, <u> </u>	En
X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	2



2 8

as mv

4

Enter five digits, but don't enter all zeros

3 8

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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

#### Spouse's PIN: check one box only

X I authorize GLOBAL TAXES LLC ERO firm name

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 now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Da	te 🕨	•									
Practitioner PIN Method Returns Only—continue below												
Part III Certification and Authentication – P	ractitioner PIN Method Only											
ERO's EFIN/PIN. Enter your six-digit EFIN followed by	your five-digit self-selected PIN.	2	2							9	8	9
					Don	τen	iter a	ıll zer	os			

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS *e-file* Providers of Individual Income Tax Returns.

ERO's signature ►	Date 🕨
	Retain This Form — See Instructions Form to the IRS Unless Requested To Do So

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

REV 03/02/23 PRO

Date

to enter or generate my PIN

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	2	OMB No. 1545	-0074	IRS Use	only-	–Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single X Married filing jointly u checked the MFS box, enter the nation is a child but not your dependent	ame of y								spo	lifying sun use (QSS) s name if th	0
Your first name	and mi	ddle initial	Last na	me							Your so	cial securi	ty number
SAI SRIN	ATH		JOSY	ULA							793-	02-847	8
If joint return, sp	ouse's	first name and middle initial	Last na	me							Spouse	's social se	curity numbe
AMISHA			THAK	KAR							807-	23-842	8
Home address (	numbe	er and street). If you have a P.O. box, see	instructio	ons.				A	Apt. no.		Preside	ntial Electi	on Campaigr
6653 MCK	INNE	EY RANCH PKWY						1	4107			here if you,	
City, town, or po	ost offic	ce. If you have a foreign address, also co	mplete s	paces belo	ow.	Sta	te	ZIP c	ode		•		tly, want \$3
MCKINNEY						T	ζ	750	70		0		Checking a change
Foreign country	name		F	oreign pro	ovince/state/	coun	ty	Foreig	jn postal c	ode	box below will not change your tax or refund.		
Digital	At an	ny time during 2022, did you: (a) rece	aivo (ac	a roward	award or	navr	ment for prope	ty or	convicos	). or	(b) sell		
Digital Assets		ange, gift, or otherwise dispose of a	,					-			. ,	Yes	X No
Standard		eone can claim: You as a de					a dependent	40001)	. (000	lotra	01101101)		<u></u>
Deduction		Spouse itemizes on a separate return											
Age/Blindness	You:	Were born before January 2, 1	958 🗌	Are bli	nd Spo	ouse	: 🗌 Was bor	n befo	ore Janu	ary 2	, 1958	🗌 ls bl	lind
Dependents	(see	instructions):		(2) S	ocial security	,	(3) Relationsh	ip (4	I) Check t	he bo	ox if quali	fies for (see	instructions):
If more	<b>(1)</b> Fi	rst name Last name			number		to you		Child t	ax cr	edit	Credit for ot	her dependents
than four													
dependents, see instructions													
and check													
here 🗌													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instruct	ions) .						1a	ı 2'	78,637.
	b	Household employee wages not re	eported	on Form(	s) W-2.						1b	)	
Attach Form(s) W-2 here, Also	с	Tip income not reported on line 1a	(see ins	structions	s)						10	;	
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s)	W-2 (see in	nstru	ictions)				10	I	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441,	line 26						16	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	Form 88	339, line 29						1f	:	
If you did not	g	Wages from Form 8919, line 6 .									10	1	
get a Form	h	Other earned income (see instructi	ons) .				<sub>.</sub> .				11	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			<b>1</b> i						
	z	Add lines 1a through 1h									1z	: 2'	78,637.
Attach Sch. B	2a	Tax-exempt interest	2a			bТ	axable interest				2b		
if required.	3a	Qualified dividends	3a			bC	ordinary divider	nds .			3b		
	4a	IRA distributions	4a			bТ	axable amount	t			4b		
Standard	5a	Pensions and annuities	5a			bТ	axable amount	t			5b		
Deduction for -	6a	Social security benefits	6a			bТ	axable amount	t			6b	)	
Single or Married filing	с	If you elect to use the lump-sum elect	lection r	nethod, d	heck here	(see	instructions)			. [			
separately, \$12,950	7	Capital gain or (loss). Attach Schee	dule D if	required	. If not requ	uired	, check here			. C	7		-3,000.
<ul> <li>Married filing</li> </ul>	8	Other income from Schedule 1, line									8		13,500.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is yo	our <b>total inc</b>	com	е				9		62 <b>,</b> 137.
surviving spouse, \$25,900	10	Adjustments to income from Schedule 1, line 26								10			
• Head of	11	Subtract line 10 from line 9. This is	your ac	djusted o	ross incor	ne					11	2	62 <b>,</b> 137.
household, \$19,400	12	Standard deduction or itemized	•		-						12		25,900.
<ul> <li>If you checked</li> </ul>	13	Qualified business income deducti					5-A				13		
any box under Standard	14	Add lines 12 and 13									14	-	25,900.
Deduction,	15	Subtract line 14 from line 11. If zer						e .			15		36,237.
see instructions.	-			,					-				, , .

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

Form **1040** (2022)

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3		16	44,368.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	44,368.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	44,368.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your total tax					24	44,368.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				<b>25a</b> 48	,216.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction				25c			
	d	Add lines 25a through 25c						25d	48,216.
16	26	2022 estimated tax payment	ts 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, lir				31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	indable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	48,216.
Refund	34	If line 33 is more than line 24						34	3,848.
Refutio	35a	Amount of line 34 you want				•	. 🗆	35a	3,848.
Direct deposit?	b	Routing number 1 2 2	1000	2 4	c Type: 🗙	Checking	Savings		
See instructions.	d	Account number 9 1 0					U		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the <b>am</b>	ount vou owe					
You Owe		For details on how to pay, g						37	
	38	Estimated tax penalty (see in	nstructions) .			38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions	· · · · ·			. 🗌 <b>Yes.</b> Co	omplete b	elow.	X No
		signee's		Phone			onal identif	ication I	
	nai			no.			per (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here		ur signature		Date	Your occupation			• •	nt you an Identity
	10	ui signature		Date					N, enter it here
Joint return?					SOFTWARE E	INGINEER	(see i	nst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.							Identi (see i	-	ection PIN, enter it here
,					SOFTWARE D		,	1151.)	
		one no. (602)245-594 eparer's name	5 Preparer's signat	Email address	SRINATH.58	93@GMAIL.CC Date	M PTIN		Check if:
Paid								, , , ,	Self-employed
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPTA TALLAM	03/10/2023	P02082		
Use Only		m's name GLOBAL TA		NOUTON N	T 0001C				678)965-9522
		m's address 245 ROONE	Y CT E BRU	INSWICK N			Firm'	s EIN	84-3171965
(in to www.ire a	ov/Forn	17/1/1/1 tor instructions and the late	et intormation						Earm <b>11/4</b> (1/0000)

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

BAA REV 03/02/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

Attachment Sequence No. **01** 

Your social security number

793-02-8478

Internal Revenue Service Go to www.irs.gov/Fo Name(s) shown on Form 1040, 1040-SR, or 1040-NR

	(-)		,		, -	
SAI	SRINAT	H JOS	YULA &	L	AMISHA	THAKKAR

Par	t 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	-13,500.
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		
ĥ	Jury duty pay	8h		
i	Prizes and awards	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		
ο	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	-13,500.

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	e-basi	s gov	rernment		
	officials. Attach Form 2106				12	1
13	Health savings account deduction. Attach Form 8889				13	1
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	1
15	Deductible part of self-employment tax. Attach Schedule SE				15	1
16	Self-employed SEP, SIMPLE, and qualified plans				16	1
17	Self-employed health insurance deduction				17	1
18	Penalty on early withdrawal of savings				18	1
19a	Alimony paid				19a	1
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					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
g	Contributions by certain chaplains to section 403(b) plans	24g				
h	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	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					
	tax law violations	24i			_	
j	Housing deduction from Form 2555	24j			_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k			_	
Z	Other adjustments. List type and amount:					
•-		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>	e. Ent	er here	e and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	03/02/23 F	PRO	Schedu	ıle 1 (Form 1040) 2022

#### SCHEDULE D (Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

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

Go to *www.irs.gov/ScheduleD* for instructions and the latest information. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. 12 Your social security number

20

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SAI SRINATH JOSYULA & AMISHA THAKKAR

793-02-8478

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

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 le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to gain or loss fro Form(s) 8949, Par line 2, column (g	t 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.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	345,577.	421,837.			-76,260.
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 (I	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 <b>Worksheet</b> in the instructions	-	6	( )		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .		7	-76,260.

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

below. perform may be easier to complete if you round off cents to (d) Proceeds (sales price) (e) Cost (or other basis) Form(s) 8949, F		(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)		
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.						
Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	1,336.	750.			586.	
Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked						
Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.						
				11		
Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12		
Capital gain distributions. See the instructions				13		
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover</b> Worksheet in the instructions						
				15	586.	
	<ul> <li>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</li> <li>Totals for all transactions reported on Form(s) 8949 with Box D checked</li> <li>Totals for all transactions reported on Form(s) 8949 with Box E checked</li> <li>Totals for all transactions reported on Form(s) 8949 with Box F checked</li> <li>Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824</li> <li>Net long-term gain or (loss) from partnerships, S corporat Capital gain distributions. See the instructions</li> <li>Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions</li> <li>Net long-term capital gain or (loss). Combine lines 8a on the back</li> </ul>	below.       (d)         form may be easier to complete if you round off cents to e dollars.       Proceeds (sales price)         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         Totals for all transactions reported on Form(s) 8949 with Box D checked       1,336.         Totals for all transactions reported on Form(s) 8949 with Box E checked       1,336.         Totals for all transactions reported on Form(s) 8949 with Box F checked       1,336.         Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; from Forms 4684, 6781, and 8824       .         Net long-term gain or (loss) from partnerships, S corporations, estates, and Capital gain distributions. See the instructions       .         Long-term capital loss carryover. Enter the amount, if any, from line 13 of y Worksheet in the instructions       .         Net long-term capital gain or (loss). Combine lines 8a through 14 in co on the back       .	below.       (d)       (e)         form may be easier to complete if you round off cents to       Proceeds (sales price)       (or other basis)         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       1, 336.       750.         Totals for all transactions reported on Form(s) 8949 with Box D checked       1, 336.       750.         Totals for all transactions reported on Form(s) 8949 with Box E checked       1, 336.       750.         Totals for all transactions reported on Form(s) 8949 with Box E checked       1, 336.       750.         Totals for all transactions reported on Form(s) 8949 with Box F checked.       1, 336.       750.         Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gaf from Forms 4684, 6781, and 8824       1       1         Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schee Capital gain distributions. See the instructions       1       1       1         Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Worksheet in the instructions       1       1       1         Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, gain the back       1       1       1	below.       (d)       (e)       Adjustment or loss         form may be easier to complete if you round off cents to e dollars.       (sales price)       (or other basis)       Adjustment to gain or loss         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).       Image: the structure of the tot of tot of the tot of the tot of tot of the tot of t	below.       (d) Proceeds (sales price)       (e) Proceeds (sales price)       Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)         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       Image: Column (g)         Totals for all transactions reported on Form soft of all transactions reported on Form(s) 8949 with Box D checked       1, 336.       750.         Totals for all transactions reported on Form(s) 8949 with Box E checked       1, 336.       750.       Image: Column (g)         Totals for all transactions reported on Form(s) 8949 with Box E checked       Image: Column (g)       Image: Column (g)       Image: Column (g)         Totals for all transactions reported on Form(s) 8949 with Box F checked       Image: Column (g)       Image: Column (g)       Image: Column (g)         Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824       Image: Column (g)       Image: Column (g)       Image: Column (g)         Long-term capital gain distributions. See the instructions       Image: Column (g)       Image: Column (g)       Image: Column (g)         Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back       Image: Column (g)       Image: Column (g)       Image: Column (g) </td	

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	-75,674.
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 <b>both</b> gains?		
	<b>No.</b> Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.</li> </ul>		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	The loss on line 16; or     (\$3,000), or if married filing separately, (\$1,500)	21	(3,000.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.		
	☑ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

REV 03/02/23 PRO

Schedule D (Form 1040) 2022

Form **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.



Social security number or taxpayer identification number

Internal Revenue Service Name(s) shown on return

Department of the Treasury

SAI	SRINATH	JOSYULA	&	AMISHA	THAKKAR	793-02-8478

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.

Part I 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.

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

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

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

1 (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co	amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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	10/18/21	01/28/22	11,405.	38,111.			-26,706.
COIN BASE	01/11/22	08/01/22	317,670.	352,111.			-34,441.
GEMINI	01/01/22	12/31/22	2,390.	11,496.			-9,106.
BINANCE	01/01/22	12/31/22	510.	198.			312.
ETORO	01/01/22	12/31/22	23.	32.			-9.
ROBINHOOD CRYPTO LLC	01/01/22	12/31/22	4,936.	13,416.			-8,480.
GATE	01/01/22	12/31/22	8,643.	6,473.			2,170.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box (	al here and inc is checked), <b>li</b>	lude on your ne 2 (if Box B	345 <b>,</b> 577.	421,837.			-76,260.

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

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

Form 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 SAI SRINATH JOSYULA & AMISHA THAKKAR Social security number or taxpayer identification number 793-02-8478

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 reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	(c) Date sold or	(d) Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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 <i>Column</i> (e) in the separate instructions.	<b>(f)</b> Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
ETORO	01/01/21	12/31/22	1,336.	750.			586.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	1,336.	750.			586.

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.

					al Income and Loss						OMB No. 1545-0074			
(Form	1040)	(Fro	m re		royalties, partners		-		s, etc.)	· 20 <b>22</b>				
	ent of the Treasury Revenue Service				ttach to Form 1040, s.gov/ScheduleE for					nformation.		Attachment Sequence No. <b>13</b>		
Name(s)	shown on return									,	Your soci	al security	number	
SAI		JOSYULA & AMISHA THAKKAR 793-02-8478												
Part					l Real Estate an									
	Note: If yo	ou are	in the	e business of rer	ting personal proper	ty, use	Schedu	le C. Se	e instru	uctions. If you ar	e an indi	vidual, rep	ort farm	
			ne or loss from <b>Form 4835</b> on page 2, line 40. payments in 2022 that would require you to file Form(s) 1099? See instructions											
					Form(s) 1099?									
												16		
1a	Physical addr	ess o	of ea	ch property (st	reet, city, state, ZIF	- code	e)							
A	ALWYN COL	YNC	ΗΥΙ	DERABAD TE	LANGANA IN 50	00049	9							
В														
С														
1b	Type of Prope				al real estate prope				Fa	air Rental		nal Use	QJV	
	(from list below	N)			the number of fair					Days	Da	ays		
A	3				days. Check the Q. e requirements to f			Α		365		0		
B					venture. See instru			В						
C								С						
	of Property:													
	Single Family R				n/Short-Term Ren	tal	5 Lar			Self-Rental				
2	Multi-Family Re	siden	ice	4 Comme	ercial		6 Roy	alties	8	Other (descri	be)			
										Propertie	s:			
Incom	e:							Α		B			С	
3	Rents received	1. L				3		6	650.					
4						4								
Expen														
5						5								
6	0					6								
7						7		1,2	250.					
8	-					8								
9						9								
10						10								
11						11		1,8	350.					
12					see instructions)	12		i						
13	Other interest					13								
14	Repairs					14		4,8	850.					
15	Supplies					15		3,6	650.					
16	Taxes					16								
17						17		2,5	550.					
18						18								
19	Other (list)					19								
20	Total expenses				9	20		14,1	150.					
21	Subtract line 2	0 fror	m lin	e 3 (rents) and	/or 4 (royalties). If									
	result is a (loss	s), see	e ins	structions to fir	d out if you must									
	file <b>Form 6198</b>	3				21		-13,5	500.					
22					limitation, if any,									
	on Form 8582	(see i	instr	ructions)		22	(	13,5	00.)	)(	)	(	)	
23a					for all rental prope				23a		650.			
b		nounts reported on line 4 for all royalty properties 23b												
С					2 for all properties				23c					
d					8 for all properties				23d					
е					) for all properties				23e	14,	150.			
24					n on line 21. <b>Do no</b>						24			
25					and rental real estat							( 1	13,500.)	
26					ncome or (loss).									
					n page 2 do not									
					vise, include this ar				line 41		26	-	-13,500.	
For Pa	perwork Reduct	ion Ac	ct No	tice, see the se	parate instructions.		N	IPA		-13,500.	Sc	hedule E (E	orm 1040) 2022	

Schedule E (Form 1040) 2022

Form **8960** 

Department of the Treasury

# Net Investment Income Tax— Individuals, Estates, and Trusts

OMB No. 1545-2227 20

2

Attach to your tax return.

	Attach to your tax return.           Revenue Service         Go to www.irs.gov/Form8960 for instructions and the latest information.		A	ttachment equence No. <b>72</b>
	shown on your tax return	Your soci		curity number or EIN
	SRINATH JOSYULA & AMISHA THAKKAR	793-0		•
Part		133 0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
rare	$\Box$ Section 6013(h) election (see instructions)			
	Regulations section 1.1411-10(g) election (see instructions)			
1			1	
2	Ordinary dividends (see instructions)		2	
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see			
	instructions)	500.		
	Adjustment for net income or loss derived in the ordinary course of a non- section 1411 trade or business (see instructions)			
С	Combine lines 4a and 4b		4c	-13,500.
5a		.000.		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)5b			
с	Adjustment from disposition of partnership interest or S corporation stock (see			
	instructions)			
d	Combine lines 5a through 5c		5d	-3,000.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	🗋	6	
7	Other modifications to investment income (see instructions)		7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	-16,500.
Part				
9a	Investment interest expenses (see instructions)			
b	State, local, and foreign income tax (see instructions)			
С	Miscellaneous investment expenses (see instructions)			
d	Add lines 9a, 9b, and 9c		9d	
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	
Part	I Tax Computation			
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 1			_
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0	· · [	12	0.
	Individuals:			
13		.137.		
14		.000.		
15		,137.		0
16	Enter the smaller of line 12 or line 15		16	0.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and in			0
	on your tax return (see instructions)	· · ·	17	0.
10-				
18a	Net investment income (line 12 above)         18a	_		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)       18b			
С	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0			
19a	Adjusted gross income (see instructions)			
b	Highest tax bracket for estates and trusts for the year (see instructions) 19b			
с	Subtract line 19b from line 19a. If zero or less, enter -0			
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here			
	include on your tax return (see instructions)		21	
For Pap	perwork Reduction Act Notice, see your tax return instructions. BAA REV 03/02/23 PRC	)		Form 8960 (2022)

### E-file Signature Authorization (Arizona Forms 140, 140A, 140EZ, 140NR and 140PY)

2022

Do not mail this form to the Arizona Department of Revenue. The ERO must retain this document a minimum of four years.

Your First Name and Initial	Last Name		Your Social Security Number*
SAI SRINATH	JOSYULA	Enter	793   02   8478
Your Spouse's First Name and Initial (if filed joint)	l ast Name	your SSN(s).	Spouse's Social Security No.*
AMISHA	THAKKAR	55N(S).	807   23   8428

PART 1 – PURPOSE (If you are e-filing a Small Business Income Tax Return, also complete Form AZ-8879 SBI)<sup>\*Do Not Truncate</sup>

• To certify the truthfulness, correctness, and completeness of the taxpayer's electronic income tax return.

• To authorize the Electronic Return Originator (ERO) to affirm that the taxpayer wishes to use the taxpayer's electronic signature to the taxpayer's federal individual income tax return as the taxpayer's signature to the taxpayer's electronic Arizona individual income tax return.

PART 2 – TAX RETURN INFO	RMATION		PART 3 – FINANCIAL INS	TITUTION INFORMATION
			Must be present when reque	esting direct debit or deposit.
1 Arizona Adjusted Gross Income	168,905 <b>00</b>		Foreign Account Deposit	Debit: See instructions below.
2 Balance Of Tax	4,015 <b>00</b>		TYPE OF ACCOUNT	
3 Arizona Income Tax Withheld	4,560 <b>00</b>		Checking Savings	1 2 2 1 0 0 0 2 4
Check box 4 <u>or</u> box 5:			ACCOUNT NUMBER	
4 REFUND: Enter the amount of	f refund	545 <b>00</b>	9 1 0 1 3 5 3 1 3	
5 AMOUNT YOU OWE: Enter th	e amount owed	00		

**Box 4 Checkbox – Refund:** You are due a refund based on the information provided on your tax return. Your refund amount will be deposited in the account listed in the Financial Institution Information Section (Part 3).

**Box 5 Checkbox – Amount You Owe:** You owe taxes based on the information provided on your tax return. You have elected to direct debit for payment. The payment will be withdrawn from the account and on the date listed in the Financial Institution Information Section (Part 3).

Foreign Account Deposit/Debit Checkbox: Check the "Foreign Account Deposit/Debit" box if your deposit will be ultimately placed in or come from a foreign account. If you check this box, do not enter your account numbers. If this box is checked, we will not direct deposit or debit your account. If you are due a refund, we will send you a check instead. If you owe tax, you must mail a check to the Arizona Department of Revenue, PO Box 29085, Phoenix, AZ 85038-9085.

#### PART 4 – DECLARATION AND SIGNATURE AUTHORIZATION (Sign only after completing Part 2)

Under penalties of perjury, I declare that I have examined a copy of my electronic Arizona individual income tax return and accompanying schedules and statements for the year ending December 31, 2022, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts of Arizona adjusted gross income, total tax, Arizona income tax withheld, and refund (or amount owed) listed above are the amounts shown on the copy of my electronic Arizona income tax return.

- **6a** X I consent that my refund be directly deposited as designated in the electronic portion of my 2022 Arizona individual income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- **6b** I do not want direct deposit of my refund or I am not receiving a refund.
- **6c** I authorize the Arizona Department of Revenue (ADOR) and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Arizona taxes owed on this return. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If I have filed a balance due return, I understand that if the ADOR does not receive full and timely payment of my tax liability by April 18, 2023, I will remain liable for the tax liability and all applicable interest and penalties. When electronically filing my federal and state tax returns, I understand that if there is an error on my federal return, my state return will also be rejected.

I consent to my Electronic Return Originator (ERO) or On-Line Service Provider (OLSP) sending my electronic Arizona individual income tax return and accompanying schedules and statements to ADOR, and I consent to my ERO or OLSP sending such information to ADOR through a transmitter. I consent to ADOR sending my ERO, OLSP and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not the transmission of my return is accepted and, if the return is rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize ADOR to disclose to my ERO, OLSP and/ or transmitter the reason(s) for the delay, or when the refund was sent. If ADOR contacts my ERO for a copy of my return, any documents or schedules to my return, and/or this authorization form, I authorize my ERO to release copies of the requested documents to ADOR.

#### I authorize GLOBAL TAXES LLC

#### (ELECTRONIC RETURN ORIGINATOR)

to make the election that I want my electronic signature to my electronic federal individual income tax return to serve as my signature to my electronic Arizona individual income tax return for the year ending December 31, 2022. I understand that when my ERO makes the election that my electronic signature to my federal individual income tax return will serve as my signature to my Arizona individual income tax return and declared under penalties of perjury that to the best of my knowledge and belief the return is true, correct and complete.

HERE	<b>→</b>	YOUR PEN AND INK SIGNATURE	DATE
SIGN	<b>→</b>		
PLEASE		SPOUSE'S PEN AND INK SIGNATURE	DATE

E RETURN.			Arizona Form	Part-	Year Resid	lent Po	ersona	Incom	e T	ax Retur	n	FOR CA	LENDAR YEAR
RE	82F		Check box 82F	OR FISC	AL YEAR BEGIN			12.0.2.2	2   4		1 .		
Ξ	<u>,</u>		f filing under exter First Name and Middle				Name				_		I Security Number
2			SRINATH			JOS	YULA			Enter		793 <sub>I</sub>	02   8478
<b>NS</b>		•	se's First Name and Mi	ddle Initial (if box 4	or 6 checked)	Last	Name			your SSN(s	Sp Sl	oouse's S	Social Security No.
ITEMS		AMI			- 1	THA	KKAR	Aut NL				807	23 8428
ANY I			nt Home Address - nur		al route			<b>Apt. No.</b> 14107				245-5	area code)
			3 MCKINNEY RAI		state		ZIP Code	14107	L				Year(s) (if different)
Ы		•	INNEY		ΓX		75070						97
DO NOT STAPLE		4	Married filing joir	nt return 🛛 4a 🔲 I	njured Spouse P	rotection		rerpayment	R	EVENUE USE C	NLY. D		ARK IN THIS AREA.
Ë	TAT	5	Head of househo	old: Enter name of qu	alifying child or dep	pendent on	next line:		88	R			
ž	FILING STATUS												
BO	L	6	<b>—</b>	parate return: Enter	spouse's name and	d Social Se	ecurity Numb	er above.					
	<u>I</u>	7	Single ↓ Enter the number	er claimed. Do no	t put a check m	ark							
		8		/ou and/or spouse)	If completing line		11a, also com	plete lines 46,	81	PM		80R	RCVD
	and 10b	9	Blind (you and/or	• • •	47, and 49. For lin	nes 10a and	10b, also cor	nplete line 59.					
	a an	10a	Dependents: Uno	der age of 17.	10b Depe	endents: A	Age 17 and	over.					
		<u>11a</u>		ts and grandparents				41	40		<b>-</b>		N 41114
	Dependents	12-	(Box 10a and 10b):	IS (check one): 12				-					-
	ben		(BOX TUA and TUB).	(a)		(t		(c)	the			(e)	(f)
				AND LAST NAME (ist yourself or spouse.)		SOCIAL S		RELATIONS	HIP	NO. OF MONTHS		ndent Age uded in:	✓ if you did not claim this person on your
	and 11a		(D0 1101	ist yoursen or spouse.)		NOW	DER			HOME IN 2022	1 (Box 10a	2 a) (Box 10b)	federal return due to
		10c									<u> </u>	- 무	
₽.	8, 9,	10d	(Box 11a): Qualifyir	a paranta and gran	decrente Sec il	notruction	- Formo	ro oncos obs	ok f				
40	ions		( <b>BOX 11a</b> ). Qualityii	(a)		(b		(C)				(e)	(f)
ш 1	Exemptions 8,			AND LAST NAME		SOCIAL S		RELATIONS	HIP	NO. OF MONTHS LIVED IN YOUR		GE 65 OR VER	✓ IF DIED IN 2022
nts after Form 140PY	ă	44.				Nom				HOME IN 2022			
er		11ь 11с											
aft			Dates of Arizona residen	cy: From [0,1]0	1 2 0 2 2	」 <b>to</b> [ 0 ] 8	310,412	0,2,2		2022 FEDE	RAL	2	022 ARIZONA
ints			List other state(s) of resi						An	nount from Feder			Amount Only
me		15	Wages, salaries, tips,						15	278,	637	00	168,905 00 00
00		16 17	Interest Dividends						<u>16</u> 17			00	00
ir d		18	Arizona income tax re						18			00	00
the	ome	19	Business income (or	loss) from federal S	chedule C				19			00	00
oro	Arizona Income	20	Gains (or losses) from						20		000		0 00
es	zoná	21	Rents, royalties, partners	•					21	-13,	500	00	0 00 0 00
qul	Ari	22 23	Other income reporte Total income: Add line						22 23	262,	137		168,905 00
che		24	Other federal adjustm									00	00
Z S(		25	Federal adjusted gros								137	00	
qΡ		26	Arizona gross income										168,905 <b>00</b>
an	ŀ	27 This	Arizona income ratio	Divide line 26 by line contain a printed bard	ne 25 and enter the code of data from v	<u>e result (no</u> our return			_				0.644
ral	ions									check the box. Se		28 29	00 168,905
ede	Additions		LYDE BANK HAIRS B		04464646	SH <del>S</del>		•		n Arizona gross ir		30	00
d fe	٩		SECTOR NO.		防御局域的			•		. Complete pag		31	00
lire	ige 2	Ĭ	nexesenerener	eerer die	la da da da da da		32 Subto	otal: Add lines	<u>s 29,</u>	<u>30 and 31</u>		32	168,905 00
ear	on pa		,	м, 4, 16, 4, 16, 4, 16, 4, 16, 4, 16, 14, 16, м, 4, 16, 4, 16, 4, 16, 4, 16, 4, 16, 4, 16,				/loss - line 20				00	
anv required federal and AZ schedules or other docume	- cont. on page 2							ort-term gain/loss				<u>00</u> 00	
e al	s – c							gain (see instruct).			0		
Place	tctior			ANG SCHOOL SHOULD						25)		37	00
₫.	Subtractions		ng bogologin yang koro ba	towy hypersection and the	EN TREE BURN AND TREAD	orx III				ified small busine			1.69.005.00
		 R 1014	19 (22)		A	AZ Form	140PY (20)	<u>ct lines 37 and</u> <b>22)</b>	<u>38 f</u>	rom 32		<b>39</b> //04/23 PRO	168,905 00 Page 1 of 6

	Your	Name (as shown on page 1)		Your Social Security Nu	Imber					
	SAI	I SRINATH JOSYULA & AMISHA THAKKAR		793-02-8478	}					
-	40	Recalculated Arizona depreciation		.40	0					
cont. from page 1	41	Contributions to: 41a 529 College Savings Plans	_		0					
E	42					0				
.fr	43	U.S. Social Security or Railroad Retirement Act benefits included in yo				0				
i u	44					0				
		Subtract lines 40 through 44 from line 39. Enter the difference				,905 0				
	45	C C				, 903 0				
	46	Age 65 or over: Multiply the number in box 8 by \$2,100			00					
ő	47	Blind: Multiply the number in box 9 by \$1,500			00					
Exemptions	48	Other Exemptions. See instructions48E Multiply the number in			00					
xer	49	Qualifying parents and grandparents: Multiply the number in box 11a by \$			00					
ш	50	Add lines 46 through 49. Enter the total			00					
	51	Multiply line 50 by the Arizona income ratio on line 27				0 0				
	52	Arizona adjusted gross income: Subtract line 51 from line 45. If less that			-	,905 <mark>0</mark>				
	53	Deductions: Check box and enter amount. See instructions		53 <b>S STANDARD</b>	<b>53</b> 25	,900 0				
	54	If you checked box 53S and claim charitable contributions check 54C	Complete page 3. See ins	structions	54	0				
	55	Arizona taxable income: Subtract lines 53 and 54 from line 52. If less than a	zero, enter "0"		55 143	,0050				
ă	56	Compute the tax using amount from line 55 and Tax Tables X and Y			56 4	,0150				
f	57	Tax from recapture of credits from Arizona Form 301, Part 2, line 32			. 57	0				
Ce	58	Subtotal of tax: Add lines 56 and 57. Enter the total				,0150				
Balance of Tax	59	Dependent Tax Credit. See instructions				0				
ä	60	Family income tax credit (from the worksheet - see instructions)				0				
	61	Nonrefundable credits from Arizona Form 301, Part 2, line 64				0				
	62	Balance of tax: Subtract lines 59, 60 and 61 from line 58. If the sum of lines				,015 0				
		2022 AZ income tax withheld	,			,560 0				
dits	63									
S		i4         2022 AZ estimated tax payments64a         00         Claim of Right 64b         00         Add 64a and 64b . 64c								
able	65									
Total Payments and Refundable Credits	66	Increased Excise Tax Credit (from the worksheet - see instructions)				0				
	67	Other refundable credits: Check the box(es) and enter the total amount		<b>1</b> ∐308-I 67 <b>2</b> ∐349		0				
-	68					<u>,560</u>				
Overpayment	69	<b>TAX DUE:</b> If line 62 is larger than line 68, subtract line 68 from line 62. Enter	•			0				
ayn	70	<b>OVERPAYMENT:</b> If line 68 is larger than line 62, subtract line 62 from line 68	<ol><li>Enter amount of overpaym</li></ol>	ent	. 70	545 <b>0</b>				
verp	71	Amount of line 70 to be applied to 2023 estimated tax			.71	0 0				
Ó	72	Balance of overpayment: Subtract line 71 from line 70. Enter the difference			.72	545 <b>0</b>				
ifts	73	- 83 Voluntary Gifts to: Solutions Teams Assigned to Schools	00 Arizona Wildlife							
Gi		Child Abuse Prevention	00 Political Gift		<u>)</u>					
tary		Neighbors Helping Neighbors <b>78</b> 000 Special Olympics	00 Veterans' Donations	Fund 80 00	<u>)</u>					
Inn		I Didn't Pay Enough Fund81 00 Sustainable State Parks and Road Fund	00 Spay/Neuter of Anin	nals <b>83</b> 00						
Voluntary G	84	Political Party (if amount is entered on line 77- check only one): 841 Demo			-					
	85	Estimated payment penalty			. 85	0				
Penalty	86	861 Annualized/Other 862 Farmer or Fisherman 863 Form 221 includ								
Pen	87	Add lines 73 through 83 and 85; enter the total			87	0				
_	88	<b>REFUND:</b> Subtract line 87 from line 72. If less than zero, enter amount owed				545 <b>0</b>				
ő	00	Direct Deposit of Refund: Check box 88A if your deposit will be ultimately pla				J4J   <b>U</b>				
Ň		C C Checking or ROUTING NUMBER ACCOUNT NU								
Amount Owed		98 S Savings 1 2 2 1 0 0 0 2 4 9 1 0 1	L 3 5 3 1 3							
Amo	89	AMOUNT OWED: Add lines 69 and 87. Make check payable to Arizona D	enertment of Devenues write		20	0				
	09	ANOUNT OWED. Add lines by and or. Make check payable to Anzona D	epartment of Revenue, while	your SSN on payment.	09					
		Jnder penalties of perjury, I declare that I have read this return and any	documente with it and t	a the heat of my kn	owledge and belief	thoy are				
צ	t	rue, correct and complete. Declaration of preparer (other than taxpayer) is based	on all information of which p	reparer has any knowle	dge.	uley ale				
НЕКП	≯			SOFTWARE ENG	INEER					
		OUR SIGNATURE		CCUPATION						
פֿ	≁			SOFTWARE DEVI	SLOPER					
NDIO	ţ	SPOUSE'S SIGNATURE SYAM PRIYA RAM SAGAR GUPTA TALLAM 03102023	DATE S GLOBAL TAXES L	POUSE'S OCCUPATION						
Ц	Ī	PAID PREPARER'S SIGNATURE DATE	FIRM'S NAME (PREPARER'S I							
EAGE		245 ROONEY CT	,	84-31719	65					
	Ī	PAID PREPARER'S STREET ADDRESS		PAID PREPARER'S						
ц		E BRUNSWICK NJ 08816		(678)965	-9522					
Ч Г Ц	-	PAID PREPARER'S CITY STATE ZIP CODE		PAID PREPARER'S		I				