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

IIILEIIIAI	neverue dervice					
Submi	ission Identification Number (SID)					
Taxpaye	er's name		Social securit	y number		
	YAKAR REDDY BADDAM		331-37-	-		
	e's name		Spouse's soc		ty number	
		/ - -				
Part	-	2022 (Enter	year you a	re auth	orizing.)
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			اما	7.1	F 7 0
1	Adjusted gross income			1		<u>,578.</u>
2	Total tax			2		<u>,515.</u>
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099			3		,818.
4	Amount you want refunded to you			4	4	<u>,303.</u>
5 Dort	Amount you owe			5 <u></u>		
Part	Taxpayer Declaration and Signature Authorization (Be sure you penalties of perjury, I declare that I have examined a copy of the income tax return (origin					
to send for any Agent t payment authori payment business taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service production my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or y delay in processing the return or refund, and (c) the date of any refund. If applicable, I at to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution of my federal taxes owed on this return and/or a payment of estimated tax, and the finization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cases days prior to the payment (settlement) date. I also authorize the financial institutions to receive confidential information necessary to answer inquiries and resolve issues real identification number (PIN) below is my signature for the income tax return (original or	r reason for reject the U. on account indinancial institution ent to terminate ancellation required in the elated to the pelated to the pelated to the U. on the pelated to the U. on account of the U. on the	ection of the tr. S. Treasury as cated in the tale to debit the the authorizatests must be processing of ayment. I furt	ansmissind its deax prepare entry to ation. To receive the electer ackr	on, (b) the signated ration softhis according revoke (doing in the content of the	re reason Financial tware for bunt. This cancel) a er than 2 syment of that the
	onic Funds Withdrawal Consent.					
-	ayer's PIN: check one box only		7	8 6	5 3	
×		r or generate i	my PIN └── Ent	er five dig	gits, but	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizin	ng.	doı	n't enter à	all zeros	
	I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition below.					
Your s	signature ► B. Sriyaker	Date ► C	3/17/2023			
Spous	se's PIN: check one box only					
		r or generate i	my PINI			as my
	ERO firm name	or generate i	,	er five dig	aits, but	as my
	signature on the income tax return (original or amended) I am now authorizin I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition below.	ended) I am n	doı ow authorizir	n't enter a ng. Che	all zeros ck this b	
Spous	se's signature ▶	Date ►				
	Practitioner PIN Method Returns Only—con	tinue below				
Part	III Certification and Authentication — Practitioner PIN Method O	nly				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PI	IN. 2 2	2 4 9 Don't ente	6 6 1 er all zero	1 9 8 os	9
authori	by that the above numeric entry is my PIN, which is my signature for the electronic indivi- rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm the ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file	that I am subm	itting this retu	rn in acc	cordance	
FRO'∘	s signature ▶	Date ►				
	FRO Must Retain This Form — See Inst					

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

2022)
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OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.		Single Married filing jointly use the MFS box, enter the name		ed filing separately (N						spo	use (QSS	5)	fvina
		son is a child but not your dependent		,				,				·	, ,
Your first name	and m	iddle initial	Last nar	me						Your so	cial secu	ity numbo	er
SRIYAKAF	R REI	DDY	BADD	AM						331-	37-865	53	
If joint return, s	pouse's	s first name and middle initial	Last nar	me						Spouse	's social s	ecurity nu	mber
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				Apt. no.		Preside	ntial Elec	tion Camp	paign
712 NEWS	STEAL	D WAY								Check	here if you	ı, or your	
		ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP	code			if filing jo		
CARY					NC		27	519			this fund low will no		
Foreign country	/ name		F	Foreign province/state/o	count	У	Fore	eign postal c	ode		x or refund		
											You	Sp	ouse
Digital		ny time during 2022, did you: (a) rece	,				•		, .	. ,			
Assets		ange, gift, or otherwise dispose of a		<u>_</u>			asse	et)? (See ir	ıstru	ctions.)	Yes	⊠ No	
Standard Deduction		leone can claim: You as a de Spouse itemizes on a separate retur				a dependent							
Age/Blindness	You:	: Were born before January 2, 1	958	Are blind Spo	use:	: Was bor	rn be	fore Janu	ary 2	2, 1958	☐ Is b	olind	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip	(4) Check t	he b	ox if qual	ifies for (se	e instruction	ons):
If more	,	irst name Last name		number		to you	.	Child t	ax c	edit	Credit for o	other depen	ndents
than four													
dependents, see instructions													
and check	5 —												
here													
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						. 1a	ı	82,53	8.
	b	Household employee wages not re	eported	on Form(s) W-2						. 1k)		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)						. 10	;		
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see ir	nstru	ctions)				. 10	ı		
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 8839, line 29						. 11	:		
If you did not	g	Wages from Form 8919, line 6 .								. 19	1		
get a Form	h	Other earned income (see instruct	ions) .				,			. 11	1		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		<u>1</u> i							
	Z	Add lines 1a through 1h								. 1z	2	82,53	38.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interes	t			. 2k)	1	2.
if required.	3a	Qualified dividends	3a		b 0	rdinary divide	nds			. 3b)		
	4a	IRA distributions	4a		b Ta	axable amoun	t.			. 4t)		
Standard	5a	Pensions and annuities	5a		b Ta	axable amoun	t.			. 5b)		
• Single or	6a	Social security benefits	6a		b Ta	axable amoun	t.			. 6b)		
Married filing	С	If you elect to use the lump-sum e			•	,			. L				
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not requ	ıired,	check here			. [7		-2 , 97	12.
Married filing iointly or	8	Other income from Schedule 1, lin	e 10 .							. 8		-8,00	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	, and 8.	This is your total inc	ome					. 9		71,57	8.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, li	ine 26						. 10)		
Head of	11	Subtract line 10 from line 9. This is	your ac	djusted gross incon	ne					. 11		71,57	
household, \$19,400	12	Standard deduction or itemized								. 12	2	12,95	0.
If you checked any box under	13	Qualified business income deducti								. 13	3		
Standard	14	Add lines 12 and 13								. 14	1	12,95	
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	ıe			. 15	<u> </u>	58,62	18.

Form 1040 (202	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from	Form(s): 1 881	4 2 4972	3 🗌		16	8,515.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	8,515.
	19	Child tax credit or credit for other depe	ndents from Sched	lule 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	8,515.
	23	Other taxes, including self-employment	·	•			23	0.
	24	Add lines 22 and 23. This is your total	tax				24	8,515.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25 a 1	2,818.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	12,818.
If you have a	26	2022 estimated tax payments and amo	unt applied from 20	021 return	.,		26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule	8812		28			
	29	American opportunity credit from Form	8863, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are		-			32	
	33	Add lines 25d, 26, and 32. These are yo	our total payments				33	12,818.
Refund	34	If line 33 is more than line 24, subtract	ine 24 from line 33	. This is the amou	ınt you overpaid	١	34	4,303.
	35a	Amount of line 34 you want refunded t		8 is attached, che	ck here	\square	35a	4,303.
Direct deposit?	b	Routing number 0 8 1 9 0 4		c Type:	Checking [Savings		
See instructions.	d	Account number 0 0 2 9 1 3	7 2 2 4	2 8				
	36	Amount of line 34 you want applied to	your 2023 estimat	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the For details on how to pay, go to www.ii					37	
	38	Estimated tax penalty (see instructions)			38			
Third Party Designee		you want to allow another person to				Complete	below.	X No
		signee's	Phone	•		rsonal identi	ification	
		ne	no.			mber (PIN)		
Sign Here		der penalties of perjury, I declare that I have exief, they are true, correct, and complete. Declar						
11010	Yo	ur signature	Date	Your occupation				nt you an Identity
l-i-t0				SOFTWARE	CMCTMCCD		inst.)	IN, enter it here
Joint return? See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, both must si	gn. Date	Spouse's occupat		Iden		nt your spouse an ection PIN, enter it here
	Ph	one no. (708) 289-2890	Email address	SRIYAKAR.1	3B@GMAIL.C	OM		
Daid	Pre	eparer's name Preparer's	signature		Date	PTIN		Check if:
Paid	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PR	IYA RAM SAGAR	GUPTA TALLAM	03/16/2023	P0208	2703	Self-employed
Preparer		m's name GLOBAL TAXES LLC						678) 965-9522
Use Only		m's address 245 ROONEY CT E		J 08816			ı's EIN	84-3171965
Co to ununuimo o	/F	a 10.40 few instructions and the latest information		544				F 1040 (0000)

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

SRIYAKAR REDDY BADDAM

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

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

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

our soc	ial security number
	Sequence No. 01
	Attachment

331-37-8653

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. Atta	ach Schedule E .	5	-8,000.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r	-	
S	Nontaxable amount of Medicaid waiver payments included on Form	_ /		
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
_	T. I.	8z		
9	Total other income. Add lines 8a through 8z		9	0.000
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NK, line 8	10	-8,000.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b	asis governmen	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			
16	Self-employed SEP, SIMPLE, and qualified plans			
17	Self-employed health insurance deduction			
18	Penalty on early withdrawal of savings			
19a	Alimony paid			
b	Recipient's SSN	·	_	
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction			
21	Student loan interest deduction		_	
22	Reserved for future use			
23	Archer MSA deduction		23	
24	Other adjustments:	_		
а	, , , , , , , , , , , , , , , , , , ,	4a		
b	Deductible expenses related to income reported on line 8l from the			
		4b		
С	Nontaxable amount of the value of Olympic and Paralympic medals	4.		
-1	· · · · · · · · · · · · · · · · · · ·	4c		
d		4d		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	4e		
f		4f		
g		4g		
_	Attorney fees and court costs for actions involving certain unlawful			
		4h		
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			
		24i		
j		24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		4k		
Z	Other adjustments. List type and amount:	_		
		4z		
25	Total other adjustments. Add lines 24a through 24z			
26	Add lines 11 through 23 and 25. These are your adjustments to income . E			
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	<u></u>	26	

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.

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service Name(s) shown on return Your social security number 331-37-8653 SRIYAKAR REDDY BADDAM

_					-	
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, 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.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	2 , 250.	2,518.			-268.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (le	ose) from Forms 1	68/1 6781 and 88	124	4	
	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	,			5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	y, from line 8 of y	our Capital Loss	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-268.
Par	t II Long-Term Capital Gains and Losses—Ger					
	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen	ts	(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	77.	2,781.			-2,704.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	, from line 13 of y	our Capital Loss	Carryover	14	(
15	Net long-term capital gain or (loss). Combine lines 8a				-	

on the back.

BAA

Schedule D (Form 1040) 2022 Page 2

Part III Summary -2,972. 16 Combine lines 7 and 15 and enter the result 16 • 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 2,972.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

Department of the Treasury Internal Revenue Service

Part I

Social security number or taxpayer identification number

331-37-8653

SRIYAKAR REDDY BADDAM

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.

instructions). For long-term transactions, see page 2.

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

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 Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions ROBINHOOD SECURITIES LLC 01/01/22 12/31/22 2,250. 2,518. -268. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

2,250.

-268.

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) .

2,518.

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 $SRIYAKAR\ REDDY\ BADDAM$

Social security number or taxpayer identification number 331-37-8653

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.

(E) Long-term transactions (F) Long-term transactions (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•			,
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	77.	2,781.			-2,704.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8h (if Roy D. above	al here and inc	lude on your					

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

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

-2,704.

77.

2,781.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s	shown on return						Your soc	ial security	number
SRIY	AKAR REDDY BADDAM						331-3	7-8653	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C. See	instruc	tions. If you	are an indi	vidual, rep	ort farm
Α [Did you make any payments in 2022 that would require you	to file	Form(s) 1	099? S	See ins	tructions .		. \(\text{Ye} \)	s X No
1a	Physical address of each property (street, city, state, ZIF								
Α	5-313, BHONGIR ROAD, YADADRI MOTHKUR MAN		•	ICANA	TNI	508277			
B	3-313, BHONGIK KOAD, IADADKI MOTHKOK MAK	IDAL	, 111141	IGANA	TIN	000277			
C									
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair in the following state of the fo				1	r Rental Days		nal Use ays	QJV
Α	personal use days. Check the Qu	JV bo	x only	Α		365		0	П
В	if you meet the requirements to f			В					
С	qualified joint venture. See instru	ction	S.	С					
Туре	of Property:				-				-
1	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	lties	8	Other (desc	ribe)		
			1			Propert			
Incon	201			Α		В	162.		С
3	Rents received	3			50.				
4	Royalties received	4			30.				
Exper									
5 5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		9	50.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,2	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,7	50.				
15	Supplies	15		1,9	50.				
16	Taxes	16							
17	Utilities	17		1,5	50.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,4	50.				
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		-8,0	00.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(8,00	00.)()	()
23a	Total of all amounts reported on line 3 for all rental prope				23a		450.		
b	Total of all amounts reported on line 4 for all royalty properties.	erties			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		3,450.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat							(8,000.)
26	Total rental real estate and royalty income or (loss). Ohere. If Parts II, III, IV, and line 40 on page 2 do not a								

26

-8,000.

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

D-40 < Stap	le All	Pages	of Yo	our	022	_		įna D	ncome Departmen	-		DOR Use Only			
		r vear 2		e or fiscal year	beginning				ended Return and ending			Are you a ve	eteran?	Yes No	<u>X</u>
		r rei		BADI		1			and onding			1	se a veteran?	Yes No	
712 CARY		STEAL		Y MECKL					Your St Spouse's St	SN: 3313' SN:	78653	, ,	inted an automation income tax return		, I
Filing		$\overline{}$	1. Sin			2. Marri	ed Filing	Jointly		ied Filing Sep	arately	2022 lederal	Yes No		+0:
100				ad of Househo			fying Wid					Year spou			
1 '	•			C. for the enti ent for the er	•		Yes X Yes L	No No	\neg	Return for de Return for de			Date of death Date of death		
N.C. E	Educa	tion End	dowme	ent Fund: Yo	u may co	ntribute					-	ng a contribu	ıtion or designa	_	
									NC-EDU and y (See instruc			0. about the Fu		your overpayr	nent
☐ Se	elect b	ox if yo	u, or i	f married filin	g jointly,	our spo	use wer	e out c	of the country	on April 15,	2023, ar	nd a U.S. citi	zen or resident		
∐ Se	elect b	ox if re	turn is	filed and sig	ned by E	kecutor,	Adminis	trator,	or Court-Appo	ointed Perso	nal Repr	esentative.			
FS :	1	PP	Y		DT	N	OC	N	TPRES	Y S	SPRES	N	VT N	SVT	N
BADD		712		27519	DS	N	EA	N	TD			SD		FDEXT	N
SRIY	AKA	R RE	EDD		BADD	MA				33137	8653		MECKL		
												NC	27519		
712	NEW	STE	AD V	VAY						CARY	-				
06			715	578		16			0		26C		0		
07				0		18	Y		0		26E		0		0201
09				0		20A			3551		EU				5002
10A				0		20B			0		27		0		
10B				0		21A			0		29		0		
11	S	Y	I	N		21B			0		30		0		
11			127	750		21C			0		31		0		
13			000	000		21D			0		32		0		
14			588	328		26A			0		34		615		
15			29	936		26B			0						
TN	7	0828	3928	390		PN	6	789	659522		PP	P02	082703		
		urn B ify that I h owledge a		Mined this return f, they are true, o	and accomporrect, and o		nedules an	61 statem		Check he to discuss	re if you a	authorize the N n and attachn	O North Carolina Denents with the pai	d preparer belov	renue w.
Your Sign	ature					Date	Spou	use's Sigr	nature (If filing join	nt return, both m	ust sign.)	Date	7082892 Contact Phone	2890 No. (Include area	code)
PAID PRE	PAREF	R USE ON	LY If	prepared by a p	erson other t	han taxpay	er, this cer	tification	is based on all info	ormation of whic	ch the prepa	rer has any knov	wledge.		\dashv
CVVM	ד סס	- עע	ZM C	SAGAR GU	ח יייםו	3 16	23	6720	659522				P0208:	2703	
Paid Prep			AIM S	DAGAK GU	E.T O	Date			ntact Phone Numb	er (Include area	a code)			N, SSN, or PTIN	<u> </u>
	If y	ou ARE	NOT d						F REVENUE, P. 0V to: N.C. DE)1 , RALEIGH, NC 2	7640-0640	

Name	(First 10 Characters) BADDAM Your Social Security Number	33137	378653	
	D-400 Line-by-Line Information			
6.	Federal Adjusted Gross Income	6.	71578	
7.	Additions to Federal Adjusted Gross Income	7.	(
8.	Add Lines 6 and 7	8.	7157	
9.	Deductions From Federal Adjusted Gross Income	9.	7137	
10.	Child Deduction	0.		
	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	(
	b. Enter the amount of the child deduction	10b.	(
11.	N.C. Standard Deduction	11.	-	
11.	N.C. Itemized Deduction	11.		
11.	Deduction amount	11.	1275	
12.	a. Add Lines 9, 10b, and 11	12a.	1275	
	b. Subtract Line 12a from Line 8	12b.	5882	
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.000	
14.	N.C. Taxable Income	14.	5882	
15.	N.C. Income Tax	15.	293	
16.	Tax Credits	16.		
17.	Subtract Line 16 from Line 15	17.	293	
18.	Consumer Use Tax	18.		
	You certify that no Consumer Use Tax is due			
19.	Add Lines 17 and 18	19.	293	
A1 41-	Carolina Income Tax Withheld			
<u>North</u>				
North 20a.	Your tax withheld	20a.	355	
20a. 20b.	Spouse's tax withheld	20a. 20b.	355	
20a. 20b. Other	Spouse's tax withheld Tax Payments	20b.		
20a. 20b. Other 21a.	Spouse's tax withheld Tax Payments 2022 estimated tax	20b. 21a.		
20a. 20b. Other 21a. 21b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension	20b. 21a. 21b.		
20a. 20b. Other 21a. 21b. 21c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership	21a. 21b. 21c.		
20a. 20b. Other 21a. 21b. 21c. 21d.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.		
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	21a. 21b. 21c. 21d. 22.		
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	21a. 21b. 21c. 21d. 22. 23.		
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds	21a. 21b. 21c. 21d. 22. 23. 24.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23	21a. 21b. 21c. 21d. 22. 23. 24. 25.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Spouse's tax withheld Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Income Tax Pay this Amount Overpayment	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amou	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 29. 30.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to: Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund N.C. Breast and Cervical Cancer Control Program	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	355 355	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28. Amount 29. 30. 31.	Tax Payments 2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to: Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.		