Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

| 2022 | | 2022 |
|------|--|------|
|------|--|------|

OMB No. 1545-0074

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

| _ | | Single X Married filing jointly | Marri | ed filing separatel | y (MFS) |) Head of | hous | ehold (HOF | l) 🗌 | | ifying surv | iving |
|---------------------------------|---------|-----------------------------------------------------------------------------|---------------|-----------------------|-----------|-----------------|-------|----------------|----------|----------------------------------------------------------|---------------------------|--------------------|
| Check only one box. | If vo | u checked the MFS box, enter the i | name of | vour spouse If vo | u check | red the HOH o | r 05' | Shov ente | r the c | | ise (QSS) | e aualifyina |
| ONC DOX. | | on is a child but not your depender | | your spouse. If yo | u cricor | ted the Horro | QU | J DOX, CITE | i tile c | illia 3 | name ii tir | o qualifying |
| Your first name | | , , | Last na | ame | | | | | Y | our soo | cial security | v number |
| RAHUL | aa | | | LIGUNDLA | | | | | | 732-97-7275 | | |
| | ouse's | first name and middle initial | Last na | | | | | | _ | Spouse's social security number | | |
| NIKITHA | J0400 0 | mot name and made initial | MANE | | | | | | ' | APPLIED FOR | | |
| | (numbe | r and street). If you have a P.O. box, se | | | | | | Apt. no. | _ | Presidential Election Campaign | | |
| 6409 BRE | • | | o in loti dot | 10110. | | | | 1126 | | Check here if you, or your | | |
| | | ce. If you have a foreign address, also c | omnlete s | snaces helow | Sta | ate. | 7IP | code | | spouse if filing jointly, want \$3 | | |
| | | oc. II you have a foreight address, also o | ompicio | spaces below. | T | | | 131 | | to go to this fund. Checking a box below will not change | | |
| FORT WORTH Foreign country name | | | | Foreign province/sta | | | _ | eign postal co | | | ow will not on or refund. | cnange |
| r oreign country | Hairie | | | Totelgii province/sta | ate/couri | ity | 1 016 | agri postai co | de ye | ar tax | You | Spouse |
| Dinital | Λ+ o.m | ustime during 2000 did your (a) re- | 2011/20/20 | a remard emend | | mont for prop | | w 00m (1000) | or (b) | ادما | | |
| Digital Assets | | y time during 2022, did you: (a) rec ange, gift, or otherwise dispose of | | | | | | | | | Yes | X No |
| | | eone can claim: You as a d | | | | a dependent | assc | i): (Oee ii): | Structi | Ji 13.) | | |
| Standard Deduction | _ | Spouse itemizes on a separate retu | | | | | | | | | | |
| Age/Blindness | You: | Were born before January 2, | 1958 [| Are blind | Spouse | : Was bo | rn be | fore Janua | ry 2, 1 | 958 | ☐ Is bli | nd |
| Dependents | s (see | instructions): | | (2) Social secu | uritv | (3) Relationsh | air | (4) Check th | e box i | f qualif | ies for (see i | instructions): |
| If more | • | rst name Last name | | number | , | to you | ' | Child ta | x credi | credit Credit for other dep | | er dependents |
| than four | | | | | | | | | | | | |
| dependents, | | | | | | | | | | | | <u> </u> |
| see instructions and check | s —— | | | | | | | | | | | <u> </u> |
| here | | | | | | | | | | | | <u> </u> |
| Income | 1a | Total amount from Form(s) W-2, I | oox 1 (se | ee instructions) | | | | | | 1a | 7 | 2,053. |
| income | b | Household employee wages not | reported | on Form(s) W-2 | | | | | | 1b | | |
| Attach Form(s) | С | Tip income not reported on line 1 | | . , | | | | | | 1c | | |
| W-2 here. Also attach Forms | d | Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | | | | | | | | 1d | | |
| W-2G and | е | | | | | | | | | 1e | | |
| 1099-R if tax | f | Employer-provided adoption benefits from Form 8839, line 29 | | | | | | | 1f | | | |
| was withheld. If you did not | q | Wages from Form 8919, line 6. | | • | | | | | | 1g | | |
| get a Form | h | Other earned income (see instructions) | | | | | | 1h | | 0. | | |
| W-2, see | i | Nontaxable combat pay election (see instructions) | | | | | | | | | | |
| instructions. | z | Add lines 1a through 1h | | | | | | | | 1z | 7 | 2,053. |
| Attach Sch. B | 2a | Tax-exempt interest | 2a | | b T | axable interes | t | | | 2b | | |
| if required. | 3a | Qualified dividends | 3a | 1. | | Ordinary divide | | | | 3b | | 1. |
| | 4a | IRA distributions | 4a | | | axable amoun | | | | 4b | | |
| Standard | 5a | Pensions and annuities | 5a | | | axable amoun | | | | 5b | | |
| Deduction for— | 6a | Social security benefits | 6a | | | axable amoun | | | | 6b | | |
| Single or Married filing | С | If you elect to use the lump-sum | | method, check he | | | | | | | | |
| separately, | 7 | Capital gain or (loss). Attach Sche | | · · | • | , | | | | 7 | 7 - | 3,000. |
| \$12,950 Married filing | 8 | Other income from Schedule 1, li | | | • | | • | | | 8 | | 8,233. |
| jointly or | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7 | | | | | • | | • | 9 | | 50,821. |
| Qualifying surviving spouse, | 10 | Adjustments to income from Sch | | | | | | | • | 10 | 1 | 0,021. |
| \$25,900 Head of | 11 | Subtract line 10 from line 9. This | • | | | | • | | • | 11 | - | 50,821. |
| household, | 12 | Standard deduction or itemized | • | | | | • | | • | 12 | | 25,900. |
| \$19,400 If you checked | 13 | Qualified business income deduc | | • | , | 95-Δ | • | | • | 13 | + | <u>J,900.</u> |
| any box under | 14 | Add lines 12 and 13 | | | | | • | | • | 14 | 1 7 | 25,900. |
| Standard Deduction, | 15 | Subtract line 14 from line 11. If ze | | | | | 16 | | | 15 | | 35,900. 34,921. |
| see instructions. | 10 | Capa act mic 14 HOIII mic 11. Il 26 | , O OI 168 | 55, 611161 -0 11115 | is your | CANGE IIICOII | .0 | | | 13 | 3 | ⊐, 2∠⊥. |

| Form 1040 (2022 | 2) | | | | | | | | Page 2 |
|------------------------------------|---------|--------------------------------------------------------------------------------|---------------------------------------|-------------------|------------------------------|------------------|---------------|-------|---------------------------|
| Tax and | 16 | Tax (see instructions). Check | if any from Form | (s): 1 881 | 4 2 🗌 4972 | 3 🗌 | | 16 | 3,780. |
| Credits | 17 | Amount from Schedule 2, lin | ie 3 | | | | [| 17 | |
| | 18 | Add lines 16 and 17 | | | | | [| 18 | 3,780. |
| | 19 | Child tax credit or credit for | other dependen | ts from Sched | ule 8812 | | [| 19 | |
| | 20 | Amount from Schedule 3, lin | ie 8 | | | | [| 20 | |
| | 21 | Add lines 19 and 20 | | | | | [| 21 | |
| | 22 | Subtract line 21 from line 18 | . If zero or less, | enter -0 | | | [| 22 | 3,780. |
| | 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 | 3,780. |
| Payments | 25 | Federal income tax withheld | | | | | | | |
| , | а | Form(s) W-2 | | | | 25a 9 | ,566. | | |
| | b | Form(s) 1099 | | | | 25b | | | |
| | С | Other forms (see instructions | | | | 25c | | | |
| | d | Add lines 25a through 25c | • | | | | [| 25d | 9,566. |
| | 26 | 2022 estimated tax payment | | | | | [| 26 | • |
| If you have a qualifying child, | 27 | Earned income credit (EIC) | | | | 27 | | | |
| attach Sch. EIC. | 28 | Additional child tax credit from | | | | 28 | | | |
| | 29 | American opportunity credit | from Form 8863 | 3. line 8 | | 29 | | | |
| | 30 | Reserved for future use . | | - | | 30 | | | |
| | 31 | Amount from Schedule 3, lin | e 15 | | | 31 | | | |
| | 32 | Add lines 27, 28, 29, and 31 | | | | indable credits | [| 32 | |
| | 33 | Add lines 25d, 26, and 32. T | , | | • | | <u> </u> | 33 | 9,566. |
| Defined | 34 | If line 33 is more than line 24 | · · · · · · · · · · · · · · · · · · · | | | | | 34 | 5,786. |
| Refund | 35a | Amount of line 34 you want | | | | • | . п Г | 35a | 5,786. |
| Direct deposit? | b | Routing number 0 3 1 | | | | _ | Savings | | |
| See instructions. | | Account number 3 6 1 | | | | | 92 | | |
| | 36 | Amount of line 34 you want | | | | 36 | | | |
| Amount | 37 | Subtract line 33 from line 24 | | | | | | | |
| You Owe | 0. | For details on how to pay, g | | | | | | 37 | |
| | 38 | Estimated tax penalty (see in | | | | 38 | | | |
| Third Party Designee | | you want to allow another structions | • | | rn with the IRS? | | mplete be | low. | X No |
| Ü | De | signee's | | Phone | | | nal identific | ation | |
| - | na | me | | no. | | numb | er (PIN) | | |
| Sign Here | | der penalties of perjury, I declare t lief, they are true, correct, and com | | | | | | | |
| TICIC | Yo | ur signature | | Date | Your occupation | | | | nt you an Identity |
| | | | | | MATERIALC | COTENETCE | (see in | | IN, enter it here |
| Joint return? See instructions. | Sn | ouse's signature. If a joint return, I | noth must sign | Date | MATERIALS Spouse's occupati | | | | nt your spouse an |
| Keep a copy for | Οþ | ouse's signature. If a joint return, i | John must sign. | Date | opouse s occupati | OII | | | ection PIN, enter it here |
| your records. | | | | | | | | st.) | |
| | Ph | one no. (214)850-896 | 6 | Email address | RAHUL.P220 | 5@GMAIL.CO | M | | |
| Doid | Pre | eparer's name | Preparer's signat | ture | | Date | PTIN | | Check if: |
| Paid | SYAM | M PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA | RAM SAGAR | GUPTA TALLAM | 04/28/2023 | P020827 | 703 | Self-employed |
| Preparer | Fir | m's name GLOBAL TA | XES LLC | | | | Phone | no. (| 678)965-9522 |
| Use Only | Fir | m's address 245 ROONE | Y CT E BRU | NSWICK N | J 08816 | | Firm's | EIN | 84-3171965 |
| Go to www.irs.go | ov/Forr | n1040 for instructions and the late | st information. | | BAA | REV 04/22/23 PRO | | | Form 1040 (2022) |

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
RAHUL PILLIGUNDLA & NIKITHA MANKAL

Your social security number
732-97-7275

| Par | Additional Income | | | |
|-----|--------------------------------------------------------------------------------|----------------------|----|---------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | | 1 | |
| 2a | Alimony received | | 2a | |
| b | Date of original divorce or separation agreement (see instructions): | | | |
| 3 | Business income or (loss). Attach Schedule C | | 3 | |
| 4 | Other gains or (losses). Attach Form 4797 | | 4 | |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta | ach Schedule E . | 5 | -8,233. |
| 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 | | |
| - 1 | Income from the rental of personal property if you engaged in the rental | | | |
| | for profit but were not in the business of renting such property | 81 | | |
| m | Olympic and Paralympic medals and USOC prize money (see | | | |
| | instructions) | 8m | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | |
| 0 | Section 951A(a) inclusion (see instructions) | 80 | | |
| р | Section 461(I) excess business loss adjustment | 8p | | |
| q | 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 | -8,233. |

Page 2 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 | | | | |
| | officials. Attach Form 2106 | | | 12 | |
| 13 | Health savings account deduction. Attach Form 8889 | | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form 3903 | | | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | | 16 | |
| 17 | Self-employed health insurance deduction | | | 17 | |
| 18 | Penalty on early withdrawal of savings | | | 18 | |
| 19a | Alimony paid | | | 19a | |
| b | Recipient's SSN | | | | |
| С | Date of original divorce or separation agreement (see instructions): | | | | |
| 20 | IRA deduction | | | 20 | |
| 21 | Student loan interest deduction | | | 21 | |
| 22 | Reserved for future use | | | 22 | |
| 23 | Archer MSA deduction | | | 23 | |
| 24 | Other adjustments: | | | | |
| а | Jury duty pay (see instructions) | 24a | | - | |
| b | Deductible expenses related to income reported on line 8I from the | | | | |
| | rental of personal property engaged in for profit | 24b | | - | |
| С | Nontaxable amount of the value of Olympic and Paralympic medals | | | | |
| | and USOC prize money reported on line 8m | 24c | | - | |
| d | Reforestation amortization and expenses | 24d | | - | |
| е | Repayment of supplemental unemployment benefits under the Trade | 04- | | | |
| | Act of 1974 | 24e 24f | | - | |
| f | Contributions to section 501(c)(18)(D) pension plans | 241 24g | | - | |
| g | Contributions by certain chaplains to section 403(b) plans Attorney fees and court costs for actions involving certain unlawful | 249 | | - | |
| h | discrimination claims (see instructions) | 24h | | | |
| | , | 2411 | | - | |
| 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 | | | |
| i | Housing deduction from Form 2555 | 24j | | | |
| J k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form | 2-1) | | 1 | |
| | 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 adjustments to income | | | | |
| | Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a | | | 26 | |
| | ВАА | REV 04/ | 22/23 PRO | Schedu | le 1 (Form 1040) 2022 |

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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

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

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return Your social security number 732-97-7275 RAHUL PILLIGUNDLA & NIKITHA MANKAL Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 9,415. 31,133. 2,209. -19,509. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -19,509.Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for

which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with

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

4,909.

1,214.

BAA

11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss)

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

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

-3,054.

-3,054.

641.

11

12

13

14

15

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -22,563. • 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 amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 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. and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 3,000.) • (\$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 qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074 Attachment

Social security number or taxpayer identification number

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

RAHUL PILLIGUNDLA & NIKITHA MANKAL

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

732-97-7275

Sequence No. 12A

| Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b | tion as Form | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------|-------------------------------------|--------------------------------------------------------|--------------------------------------------------------------|----------------------------------------|---------------------------------------------------------|
| Short-Term. Transinstructions). For lo | ng-term tra | nsactions, s | see page 2. | - | | - | · |
| Note: You may agg reported to the IRS Schedule D, line 1a | and for whi | ich no adjus | stments or cod | les are required | d. Enter th | e totals directly | / on |
| You must check Box A, B, or C I complete a separate Form 8949, properties of the boxes, compared to the boxes, compared to the boxes. | page 1, for ea | ach applicabl | e box. If you have | ve more short-te | rm transac | | |
| ✗ (A) Short-term transactions☐ (B) Short-term transactions☐ (C) Short-term transactions | reported on | Form(s) 1099 | 9-B showing bas | • | | • | 9) |
| 1 (a) | (b) | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below | Adjustment, i If you enter an enter a c See the sep | (h) Gain or (loss) Subtract column (e) | |
| Description of property (Example: 100 sh. XYZ Co.) | Date acquired (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 | 9,415. | 31,133. | W | 2,209. | -19,509. |
| | | | | | | | |
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| | | | | | | | |

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.

9,415.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) .

31,133.

REV 04/22/23 PRO

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side RAHUL PILLIGUNDLA & NIKITHA MANKAL

Social security number or taxpayer identification number 732-97-7275

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

Part II

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

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

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

| ✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions | reported on l | 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 | if any, to gain or loss amount in column (g), ode in column (f). parate instructions. | (h) Gain or (loss) Subtract column (e) from column (d) and | |
| (Example: 100 sh. XYZ Ćo.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see instructions) | and see Column (e) in the separate instructions. | (f) Code(s) from instructions | (g) Amount of adjustment | combine the result with column (g). | |
| ROBINHOOD SECURITIES LLC | 01/01/22 | 12/31/22 | 1,214. | 4,909. | W | 641. | -3,054. | |
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| Totals. Add the amounts in columns negative amounts). Enter each total Schedule D. line 8b (if Box D above) | al here and inc | lude on your | | | | | | |

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

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

1,214.

4,909.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 732-97-7275 RAHUL PILLIGUNDLA & NIKITHA MANKAL Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) PLOT NO 120A JANAKI ENCLAVE COLONY KARMANGHAT, HYDERABAD, TELANGANA IN 500035 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs** Davs personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 631. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,845. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,633. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,587. 14 14 Repairs . . . 15 Supplies 15 1,210. 16 16 Taxes 17 17 1,589. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 8,864. 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 -8,233. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,233.) 23a Total of all amounts reported on line 3 for all rental properties 631. Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 8,864. Total of all amounts reported on line 20 for all properties 23e

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8,233.

-8,233.

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

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

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

here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 ...

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Application for IRS Individual Taxpayer Identification Number

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only.

OMB No. 1545-0074

Application type (check one box):

| Before you begin • Don't submit th | ı: is form if you have, or are eligib | ole to get, a U.S. | social sec | urity number (S | SN). | | pply for a new ITIN enew an existing ITIN | | | | |
|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|----------------------------------|--------------|---------------------------------------------------|----------------------------------------------|--|--|--|--|
| | ubmitting Form W-7. Read the ederal tax return with Form W | | | | | | | | | | |
| a Nonresident | alien required to get an ITIN to cla | im tax treaty bene | efit | | | | | | | | |
| b Nonresident | alien filing a U.S. federal tax return | 1 | | | | | | | | | |
| | t alien (based on days present in | | _ | | | | | | | | |
| d Dependent of | of U.S. citizen/resident alien | d, enter relationsh | ip to U.S. cit | izen/resident alie | n (see instr | ructions) 🕨 | | | | | |
| e X Spouse of U | | d or e, enter name | | TN of U.S. citizen | /resident a | lien (see in: | ′ | | | | |
| | · | AHUL PILLIO | | | | | 732-97-7275 | | | | |
| _ | alien student, professor, or resear | | ederal tax re | turn or claiming a | ın exceptic | n | | | | | |
| _ | spouse of a nonresident alien holdi | ng a U.S. visa | | | | | | | | | |
| h U Other (see in | on for a and f : Enter treaty country | | | and treaty a | tiolo numb | | | | | | |
| Name | 1a First name | | lle name | and treaty a | Last n | | | | | | |
| (see instructions) | NIKITHA | 1 | | | MAN | | | | | | |
| Name at birth if | 1b First name | Mido | lle name | | Last n | ame | | | | | |
| different ► | | | | | | | | | | | |
| Applicant's Mailing | • | 2 Street address, apartment number, or rural route number. If you have a P.O. box, see separate instructions. 6409 BREEZE BAY PT Apt 1126 | | | | | | | | | |
| Address | City or town, state or province, and country. Include ZIP code or postal code where appropriate. FORT WORTH TX USA 76131 | | | | | | | | | | |
| Foreign (non- U.S.) Address | 3 Street address, apartment number, or rural route number. Don't use a P.O. box number. | | | | | | | | | | |
| (see instructions) | City or town, state or province, and country. Include postal code where appropriate. | | | | | | | | | | |
| Birth Information | 4 Date of birth (month / day / year) 06/21/1994 | Country of birth INDIA | | City and state o | r province | (optional) | 5 Male | | | | |
| | 6a Country(ies) of citizenship | | tax I.D. number (if any) 6c Type of U.S. visa | | | | | | | | |
| Other Information | INDIA | | | | | | | | | | |
| | 6d Identification document(s) submitted (see instructions) | | | | | | | | | | |
| | USCIS documentation OtherDate of entry into | | | | | | | | | | |
| | Issued Issue TNDTA | v6020110 | _ | 02/12 | /2022 | the United | | | | | |
| | Issued by: INDIA No.: X6039110 Exp. date: 02/12/2033 (MM/DD/YYYY): | | | | | | | | | | |
| | 6e Have you previously received an ITIN or an Internal Revenue Service Number (IRSN)? ☑ No/Don't know. Skip line 6f. | | | | | | | | | | |
| | Yes. Complete line 6f. If | | st on a sheet | and attach to thi | s form (see | e instruction | ns). | | | | |
| | 6f Enter ITIN and/or IRSN ▶ 17 | | | | RSN | | and | | | | |
| | name under which it was issu | ıed ▶ | | | | | | | | | |
| | First name Middle name Last name | | | | | | | | | | |
| | 6g Name of college/university or company (see instructions) ▶ | | | | | | | | | | |
| | City and state ► | | | Length o | of stay ▶ | | | | | | |
| Sign Here | Under penalties of perjury, I (applic documentation and statements, and information with my acceptance agent | to the best of my | knowledge a | nd belief, it is true | , correct, a | nd complete | e. I authorize the IRS to share | | | | |
| Keep a copy for your records. | Signature of applicant (if dele | egate, see instruct | Date (month / day | / year) | Phone num | ber | | | | | |
| your records. | Name of delegate, if applical | ole (type or print) | | Delegate's relation to applicant | nship | Parent Court-appointed guardia Power of attorney | | | | | |
| A | Signature | | | Date (month / day | / year) | Phone | | | | | |
| Acceptance | | | | | · · · · - | Fax | | | | | |
| Agent's | Name and title (type or print) | | Name of co | ompany | EIN | | PTIN | | | | |
| Use ONLY | | | | Office co | Office code | | | | | | |