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

2022

OMB No. 1545-0074

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

	s 🗌 S	Single X Married filing jointly	Marrie	ed filing separate	ly (MFS)	Head of	househo	old (HOH	H) [		fying survi	iving
Check only one box.	If vo	u checked the MFS box, enter the r	name of v	vour snouse If vo	u check	red the HOH or	r OSS h	ox ente	r the		se (QSS) name if the	e gualifying
ONE BOX.		on is a child but not your depender		your spouse. If ye	d Check		QOOD	ox, crite	1 1110	Crilia 3 i	iamo ii tin	5 qualifying
Your first name			Last na	me					1	our soc	ial security	number
									313-99-8541			
	spouse's	s first name and middle initial	Last na									urity number
SRIVANI			RACH							•	ED FOR	-
	(numbe	er and street). If you have a P.O. box, see					An	t. no.				n Campaign
200 LEIS	•						91				ere if you, o	
		ce. If you have a foreign address, also c	omplete s	paces below.	Sta	ite	ZIP cod					ly, want \$3
STONEHAI		,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MZ		0218			•	this fund. ( w will not (	Checking a
Foreign countr			ı	Foreign province/st				postal co			or refund.	Jiange
. o.o.g ooa	<i>y</i>			. o. o.g., p. o o., o.	a.c., 00a	-,	. orongin	poota. oc	,		You	Spouse
Digital	Δt ar	ny time during 2022, did you: (a) red	naiva (as	a reward award	or navr	ment for prope	rty or se	arvices)	. or (h	المء (د		
Assets		ange, gift, or otherwise dispose of									Yes	X No
Standard		eone can claim: You as a de				a dependent	4000171	(000				
Deduction	_	Spouse itemizes on a separate retu	•	•								
Age/Blindnes	s You:	Were born before January 2,	1958 _	Are blind	Spouse	: U Was bo			•		☐ Is blir	
Dependent				(2) Social sec	urity	(3) Relationsh	nip (4)	Check th	ie box	if qualifie	es for (see i	nstructions):
If more	(1) F	rst name Last name		number		to you		Child to	x cred	dit C	redit for oth	er dependents
than four dependents,												
see instruction	s ——											
and check _	, —											
here								L			<u>L</u>	
Income	1a	Total amount from Form(s) W-2, k	•	,						1a	9	5,860.
A44	b	Household employee wages not r		. ,						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c			
attach Forms	d	Medicaid waiver payments not re	•	. ,	ee instru	uctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26							1e			
was withheld.	f	Employer-provided adoption bene								1f		
If you did not	g	Wages from Form 8919, line 6.								1g		
get a Form W-2, see	h	Other earned income (see instruc	,							1h	_	0.
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i	<u> </u>				4	- 0.50
	Z	Add lines 1a through 1h								1z	1 9	5,860.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes				2b		
if required.	3a	Qualified dividends	3a			Ordinary divide				3b		0.
	4a	IRA distributions	4a			axable amoun				4b		
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun				5b		
Single or	6a	Social security benefits	6a			axable amoun	t			6b	_	
Married filing separately,	_ c	If you elect to use the lump-sum		*	`	,			. 📙	_	4	2 000
\$12,950	7	Capital gain or (loss). Attach Sche		•					. ⊔	7	+	3,000.
Married filing jointly or	8	Other income from Schedule 1, lin								8	<del></del>	0.060
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9	+ 9	2,860.
\$25,900	10	Adjustments to income from Scho	-							10	<u> </u>	
Head of household,	11	Subtract line 10 from line 9. This i	-	-						11		2,860.
\$19,400	12	Standard deduction or itemized		•	,					12	<del>+ 2</del>	5,900.
If you checked any box under	13	Qualified business income deduc								13	<del>  -</del>	
Standard Deduction,	14	Add lines 12 and 13								14		5,900.
see instructions.	15	Subtract line 14 from line 11. If ze	ero or les	s, enter -U This	is your	taxable incom	16 .			15	6	6,960.

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	7,6	526.
Credits	17	Amount from Schedule 2, lir	ne 3				[	17		
	18	Add lines 16 and 17					[	18	7,6	526.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[	19		
	20	Amount from Schedule 3, lir	ne 8				[	20	7,5	500.
	21	Add lines 19 and 20					[	21		500.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[	22		126.
	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 <b>total tax</b>				[	24	1	126.
Payments	25	Federal income tax withheld								
,	а	Form(s) W-2				<b>25a</b>   14	,663.			
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						25d	14,6	563.
	26	2022 estimated tax paymen					–	26		
If you have a qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	2		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir	ne 15			31				
	32	Add lines 27, 28, 29, and 31				ndable credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments			[	33	14,6	563.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amour	nt you <b>overpaid</b>		34	14,5	537.
neiuliu	35a	Amount of line 34 you want	refunded to you	یا. If Form 8888	is attached, chec	k here	. 🗆 🗄	35a	14,5	537.
Direct deposit?	b	Routing number 0 8 1				_	Savings			
See instructions.	d	Account number 2 9 1	0 1 9 9	0 1 5 8	3   5   .   _					
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36				
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37		
100 OWC	38	Estimated tax penalty (see in				38		31		
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
Designee		structions					mplete bel		× No	
		signee's me		Phone no.			nal identifica er (PIN)	ation		$\Box$
Sign		der penalties of perjury, I declare t lief, they are true, correct, and com								
Here		ur signature		Date	Your occupation				nt you an Identi	
		ar orginataro			Tour occupation		Protect	ion Pl	IN, enter it here	
Joint return?					QUALITY EN	GINEER	(see ins	it.)		
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupati	on			nt your spouse	
your records.		HOME MAKER				(see ins		ection PIN, ente	r it nere	
		ono no / 01E\E02 217	<u> </u>	Email address	_		,			
		one no. (815)593-217 eparer's name	b Preparer's signat		rajesn.grm	52@gmail.com   Date	m PTIN		Check if:	
Paid		I PRIYA RAM SAGAR GUPTA TALLAM	'		מווסיים ייאד.ד.אווי		P020827	,03	Self-emp	loved
Preparer		m's name GLOBAL TA		אאטאט ויוהאי	OUFIA TALLIAM	02/23/2023			678)965-	
Use Only			Y CT E BRU	MOWICK M	J 08816		Firm's I		84-317	
Go to want in a		m1040 for instructions and the late		TAN MATCHE IN		DEV 00/40/00 DDC	1 11111 51	_11.4	Form <b>10</b> 4	
GO TO WWW.IIS.G	UV/1-0//	moso ioi manuchons and me late	ot ittiOtttidtiOtt.		BAA	REV 02/10/23 PRO			FORM I U	r <b>∵</b> (∠∪∠∠)

## SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

### **Additional Credits and Payments**

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

2022

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR RAJESH GURRAM & SRIVANI RACHA

Your social security number 313-99-8541

Pai	Nonretundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	
2	Credit for child and dependent care expenses from Form 2441 Form 2441	, line 11. Attach	2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695		5	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800	6a		
b	Credit for prior year minimum tax. Attach Form 8801	6b		
С	Adoption credit. Attach Form 8839	6c		
d	Credit for the elderly or disabled. Attach Schedule R	6d		
е	Alternative motor vehicle credit. Attach Form 8910	6e		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	<b>6f</b> 7,500.		
g	Mortgage interest credit. Attach Form 8396	6g		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h		
i	Qualified electric vehicle credit. Attach Form 8834	6i		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k		
-1	Amount on Form 8978, line 14. See instructions	61		
Z	Other nonrefundable credits. List type and amount:			
		6z		
7	Total other nonrefundable credits. Add lines 6a through 6z		7	7,500.
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-	SR, or 1040-NR,		
	line 20		8	7,500.
		(Co	ontinue	ed on page 2)

Schedule 3 (Form 1040) 2022 Page **2** 

Par	Other Payments and Refundable Credits			·
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g	Reserved for future use	13g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h		
Z	Other payments or refundable credits. List type and amount:			
		13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-line 31		15	

#### SCHEDULE D (Form 1040)

#### **Capital Gains and Losses**

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return
RAJESH GURRAM & SRIVANI RACHA

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.

Your social security number 313-99-8541

Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
lines	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949,	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	e dollars.	(sales price)	(or other basis)	line 2, colum		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	223,747.	465,171.	124,7	84.	-116,640.
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	( )
7	<b>Net short-term capital gain or (loss).</b> Combine lines 1a term capital gains or losses, go to Part II below. Otherwis			e any long-	7	-116,640.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets F	Held More Than	One Year	(see i	instructions)
lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	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 <b>Box D</b> checked	336.	1,933.	1,5	82.	-15.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with					

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

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

-15.

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 -116,655. • 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 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.

## 8949

#### **Sales and Other Dispositions of Capital Assets**

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

OMB No. 1545-0074 Attachment

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

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

Sequence No. 12A

Name(s) shown on return				Social	secui	rity number o	r taxpayer identifica	ation number		
RAJESH GURRAM & SRIVANI RACHA 313-99-8541										
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 1	er you receive 1099-B. Either	ed any Form(s) 109 will show whether	99-B or substi er your basis (i	itute usua	statement(s lly your cosi	t) from your broke t) was reported to	r. A substitute the IRS by your		
Part I Short-Term. Transainstructions). For load				eld 1 year c	or le	ss are ger	nerally short-te	rm (see		
<b>Note:</b> You may agg reported to the IRS Schedule D, line 1a	regate all sl and for whi	hort-term tr ch no adjus	ansactions rep stments or cod	es are requ	ıirec	i. Enter th	e totals directly	y on		
You <i>must</i> check Box A, B, <i>or</i> C to complete a separate Form 8949, profer one or more of the boxes, com	page 1, for ea	ch applicabl	e box. If you have	/e more shoi	rt-te	rm transac				
<ul><li>☒ (A) Short-term transactions</li><li>☐ (B) Short-term transactions</li><li>☐ (C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•			•	e)		
1 (a) Description of property	(b) Date acquired	<b>(c)</b> Date sold or	(d) Cost or of See the No and see Cost (see instructions) in the see			(e) Cost or other basi See the <b>Note</b> belo	t or other basis the <b>Note</b> below see <i>Column</i> (e) the separate nstructions.		if 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.)		in the separate instructions.	separate (f)				(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/22	223,747.	465,17	1.	W	124,784.	-116,640.		

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) .

465,171. 223,747.

124,784.

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 RAJESH GURRAM & SRIVANI RACHA

Social security number or taxpayer identification number 313-99-8541

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.

<ul><li>✗ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li><li>☐ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas	•		•	e)
(a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a 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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
Robinhood Securities LLC	01/01/22	12/31/22	336.	1,933.	W	1,582.	-15.
2 Totals. Add the amounts in columns negative amounts). Enter each tota 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) .

1,582.

336.

1,933.

### **Investment Interest Expense Deduction**

Go to www.irs.gov/Form4952 for the latest information. Attach to your tax return.

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

Attachment Sequence No. **51** 

Identifying number

OMB No. 1545-0191

RAJE	SH GURRAM & SRIVANI RACHA	313-99-	-8541
Pari	Total Investment Interest Expense		
1	Investment interest expense paid or accrued in 2022 (see instructions)	. 1	1,087.
2	Disallowed investment interest expense from 2021 Form 4952, line 7	. 2	
3	Total investment interest expense. Add lines 1 and 2		1,087.
Part	II Net Investment Income		
4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	o.	
b	Qualified dividends included on line 4a		
С	Subtract line 4b from line 4a	. 4c	0.
d	Net gain from the disposition of property held for investment 4d		
е	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment. See instructions		
f	Subtract line 4e from line 4d	. 4f	0.
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instruction	ns 4g	
h	Investment income. Add lines 4c, 4f, and 4g	. 4h	0.
5	Investment expenses (see instructions)	. 5	
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0	. 6	0.
Part	III Investment Interest Expense Deduction		
7	Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from lin 3. If zero or less, enter -0-		1,087.
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	. 8	0.
For Pa	perwork Reduction Act Notice, see page 4. BAA REV 02/10/23 PRO	'	Form <b>4952</b> (2022)

# Form **8936** (Rev. January 2023)

**Qualified Plug-in Electric Drive Motor Vehicle Credit** 

(Including Qualified Two-Wheeled Plug-in Electric Vehicles and New Clean Vehicles)

Attach to your tax return.

Go to www.irs.gov/Form8936 for instructions and the latest information.

Note: This credit is for qualified plug-in electric drive motor vehicles placed in service before 2023, qualified two-wheeled plug-in electric vehicles acquired before but placed in service in 2022, and new clean vehicles placed in service after 2022. See separate

OMB No. 1545-2137

Attachment Sequence No. **69** 

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

RAJESH GURRAM & SRIVANI RACHA

**c** Tentative credit. Multiply line 4a by line 4b . . . .

Identifying number 313-99-8541

instructions for vehicle definitions and other requirements. **Tentative Credit** Use a separate column for each vehicle. If you need more columns, (a) Vehicle 1 (b) Vehicle 2 use additional Forms 8936 and include the totals on lines 12 and 19. HONDA 1 Year, make, and model of vehicle . . . 1 ACCORD HYBRID SPORT 2 Vehicle identification number (see instructions) 2 1HGCV3F24NA013068 3 Enter date vehicle was placed in service (MM/DD/YYYY) 3 08/15/2022 If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see 4a instructions . . . . . . . . . . . . . . . 7,500. Phase-out percentage (see instructions) . . . . . 4b 100.00 % %

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

4c

Par	Credit for Business/Investment Use Part of	Vehi	cle		
5	Business/investment use percentage (see instructions)	5		%	%
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6			
7	Section 179 expense deduction (see instructions) .	7			
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 10% (0.10)	9			
10	Maximum credit per vehicle	10	2	2,500	2,500
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11			
12	Add columns (a) and (b) on line 11			12	
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)			13	
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Schamount on Form 3800, Part III, line 1y	nedule	e K. All others, report this	14	

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

7,500.

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#### **Credit for Personal Use Part of Vehicle** Part III (a) Vehicle 1 (b) Vehicle 2 15 If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 7,500. blank and go to line 18 . . . . . . . . . . . 15 16 Multiply line 15 by 10% (0.10) . . . . . . . . . 16 17 Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10 . . . . . . . . . . . . . . . 17 18 For vehicles with four or more wheels placed in service before 2023, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17. For vehicles placed in service after 7,500. 2022, see instructions 18 19 Add columns (a) and (b) on line 18 19 7,500. 20 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18 20 7,626. 21 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions) 21 22 Subtract line 21 from line 20. If zero or less, enter -0- and stop here. You cannot claim 7,626. 22 23 Personal use part of credit. Enter the smaller of line 19 or line 22 here and on Schedule 3 (Form 1040), line 6f. If line 22 is smaller than line 19, see instructions . . . 7,500. 23

REV 02/10/23 PRO Form **8936** (Rev. 1-2023)



# Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents.
 ▶ See separate instructions.

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: iis form if you have, or are eligib	ole to get, a U.S.	social sec	urity number (S	SN).		ply for a new ITIN new 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>b</b> Nonresident	alien filing a U.S. federal tax return	1									
c U.S. residen	t alien (based on days present in	the United States	s) filing a U.	S. federal tax retu	ırn						
d Dependent of	of U.S. citizen/resident alien	d, enter relationsh	ip to U.S. cit	tizen/resident alie	n (see instr	ructions) >					
e X Spouse of U		d or <b>e,</b> enter name		TN of U.S. citizer	/resident a	lien (see ins					
	,	AJESH GURRA					313-99-8541				
_	alien student, professor, or resear		ederal tax re	turn or claiming	an exceptio	n					
_	spouse of a nonresident alien holdi	ng a U.S. visa									
h U Other (see in	on for <b>a</b> and <b>f</b> : Enter treaty country			and treaty a	rticlo numb						
Name	<b>1a</b> First name		lle name	and treaty a	Last n						
(see instructions)	SRIVANI				RAC						
Name at birth if	1b First name	Midd	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. 200 LEISURE LN Apt 91									
Address	City or town, state or province, and country. Include ZIP code or postal code where appropriate.  STONEHAM MA USA 02180										
Foreign (non- U.S.) Address	3 Street address, apartment nur	3 Street address, apartment number, or rural route number. <b>Don't use a P.O. box number.</b>									
(see instructions)	City or town, state or province, and country. Include postal code where appropriate.										
Birth Information	4 Date of birth (month / day / year) 03/28/1998	Country of birth INDIA		City and state of	r province	(optional)	5				
	6a Country(ies) of citizenship	6b Foreign tax I.I	) number (it	any) 6c Tyn	a (if any) ni	umber, and expiration date					
Other Information	INDIA		`								
	6d Identification document(s) sub		ictions)	Passport	Driver's	license/Sta	ate I.D.				
	USCIS documentation	U Other				Date of en	•				
	leaved by TNDTA	o.: T4793229	_	OF /20	/2020	the United					
	Issued by: INDIA N  6e Have you previously received			p. date: 05/28		(MM/DD/Y	Y Y Y ):				
	No/Don't know. Skip lin		mai Revenue	e Service Murribe	r (IRSN)?						
	Yes. Complete line 6f. If		st on a sheet	and attach to th	s form (see	e instruction	is).				
	6f Enter ITIN and/or IRSN ▶ 17		7. 011 4 011001		RSN	, mon donon	and				
	name under which it was issu	ıed ▶		•			arra				
	Tiamo ando, willon it was lost	First	name	Middle	name		Last name				
	6g Name of college/university or	company (see ins	tructions) 🕨								
	City and state ▶			Length	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	e, correct, a	nd complete	. I authorize the IRS to share				
Keep a copy for your records.	Signature of applicant (if dele	egate, see instruct	tions)	Date (month / day	//year)	Phone num	ber				
your records.	Name of delegate, if applical	ole (type or print)		Delegate's relation to applicant	onship	Parent Power of	Court-appointed guardian				
	Signature			Date (month / day	//year)	n ower or Phone	accomog				
Acceptance					· · · · -	Fax					
Agent's	Name and title (type or print)		Name of co	ompany	EIN		PTIN				
Use ONLY	<b>7</b>	(7)			Office co						