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

Submission Identification Number (SID)		-	
Taxpayer's name	Social security	y number	
TANOOJ CHANDRA ADDAGUDU	866-93-	-1178	
Spouse's name	Spouse's soci	al security r	number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you ar	e author	izing.)
Enter whole dollars only on lines 1 through 5.			
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1 Adjusted gross income		1	72,071.
2 Total tax		2	8,624.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	10,372.
4 Amount you want refunded to you		4	1,748.
5 Amount you owe		5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a copy	y of your	return)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmit to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejet for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indic payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requirements and payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment of the payment (settlement) date. I also authorize the financial institutions involved in the payment of t	ter, or electro ction of the tra S. Treasury an cated in the ta n to debit the the authoriza ests must be processing of ayment. I furth	nic return of ansmission and its design of the entry to the received of the electroner acknowns.	originator (ERO), (b) the reason nated Financial on software for saccount. This voke (cancel) a no later than 2 pnic payment of wledge that the
Taxpayer's PIN: check one box only			$\overline{}$
I authorize GLOBAL TAXES LLC to enter or generate resignature on the income tax return (original or amended) I am now authorizing.	Ent	1 1 7 er five digits 't enter all a	
I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.			
Date Date	2/ 10/2020		
Spouse's PIN: check one box only			
I authorize ERO firm name signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) I am now if you are entering your own PIN and your return is filed using the Practitioner PIN method below.	Ento don ow authorizin		this box only
Spouse's signature ▶ Date ▶			
Practitioner PIN Method Returns Only—continue below			
Part III Certification and Authentication — Practitioner PIN Method Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 6 Don't ente	6 6 1 er all zeros	9 8 9
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submi requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Income.	tting this retui	rn in accor	dance with the
ERO's signature ▶ Date ▶			
ERO Must Retain This Form — See Instructions			

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

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	u checked the MFS box, enter the na	ame of y	ed filing separately (Mour spouse. If you ch		_				spou	ifying sur use (QSS) name if th	Ü
		on is a child but not your dependent										
Your first name	and mi	ddle initial	Last nar	me								ty number
TANOOJ (CHANI	DRA	ADDA	GUDU					-		93-117	
If joint return, s	pouse's	first name and middle initial	Last nar	me					s	pouse's	s social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			,	Apt. no.	Р	resider	ntial Election	on Campaign
29772 SQ	UIRE	E RD									ere if you,	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Stat	e	ZIP c	ode				ntly, want \$3 Checking a
NOVI					MI		483	375			ow will not	
Foreign country	y name		F	oreign province/state/c	count	У	Forei	gn postal co			or refund.	
											You	Spouse
Digital		ny time during 2022, did you: (a) reco	•				•	,	•		Yes	X No
Assets		ange, gift, or otherwise dispose of a eone can claim: You as a de					assei	r (See in	struct	10(18.)	<u> </u>	Z NO
Standard Deduction	_	Spouse itemizes on a separate retur				а ферепфені						
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn bef	ore Janua	ry 2, ⁻	1958	☐ Is bl	lind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip (4	l) Check th	e box	if qualif	ies for (see	instructions):
If more		rst name Last name		number		to you	·	Child ta	x crec	lit	Credit for ot	her dependents
than four												
dependents, see instruction:	s ——											
and check												
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions)						1a		80,016.
	b	Household employee wages not re	eported	on Form(s) W-2						1b		
Attach Form(s) W-2 here, Also	С	Tip income not reported on line 1a								1c		
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see ir	nstru	ctions)				1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom For	m 2441, line 26 .						1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instructi	ons) .			1	ή.			1h	-	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>1i</u>	i					
	Z	Add lines 1a through 1h	. ; .							1z		80,016.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interest				2b		15.
if required.	3a		3a			rdinary divide				3b		49.
	4a		4a			axable amoun				4b		
Standard Deduction for—	5a		5a			axable amoun				5b		
Single or	6a	,	6a			axable amoun	ıt			6b	-	
Married filing separately,	С	If you elect to use the lump-sum e							. 📙	_		
\$12,950	7	Capital gain or (loss). Attach Sche							. Ш	7	-	77.
Married filing jointly or	8	Other income from Schedule 1, lin								8		<u>-8,086.</u>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•						9	+	72,071.
\$25,900	10	Adjustments to income from Sche								10	-	
Head of household,	11	Subtract line 10 from line 9. This is	-	-						11	1	72 , 071.
\$19,400	12	Standard deduction or itemized								12	1	12,950.
If you checked any box under	13	Qualified business income deducti								13		10 050
Standard Deduction,	14	Add lines 12 and 13								14		12 , 950.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -u This is ye	our t	axable incom	ie .			15		59,121.

Form 1040 (2022	<u>2</u>)										Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🔲			16	8	8,624.
Credits	17	Amount from Schedule 2, lin	ne 3						17		
	18	Add lines 16 and 17							18	8	8,624.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19		
	20	Amount from Schedule 3, lin	ne 8						20		
	21	Add lines 19 and 20							21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	3	8,624.
	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	}	8,624.
Payments	25	Federal income tax withheld									
	а	Form(s) W-2				25a	10	,372	2.		
	b	Form(s) 1099				25b					
	С	Other forms (see instruction	s)			25c					
	d	Add lines 25a through 25c							25d	10	0,372.
If you have a	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return				26		
qualifying child,	27	Earned income credit (EIC)				27					
attach Sch. EIC.	28	Additional child tax credit fro	m Schedule 8812			28					
	29	American opportunity credit	from Form 8863	3, line 8		29					
	30	Reserved for future use .				30					
	31	Amount from Schedule 3, lin	ne 15			31					
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable	credits		32		
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	10	0,372.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	ınt you o	verpaid		34	-	1,748.
Herana	35a	Amount of line 34 you want			is attached, che	ck here		. [35a	-	1,748.
Direct deposit?	b	Routing number 0 7 4			c Type:	Checki	ng 🗌	Saving	ıs		
See instructions.	d	Account number 8 7 1	1 8 9 0	2 8							
	36	Amount of line 34 you want applied to your 2023 estimated tax									
Amount You Owe	37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions										
	38	Estimated tax penalty (see i	_	-		38			37		
Third Party		you want to allow another									
Designee		structions					Yes. C	omplet	te below.	X No	
Ü	De	signee's		Phone					entification		
	na	me		no.			num	ber (PIN	l)		
Sign		der penalties of perjury, I declare lief, they are true, correct, and com									
Here			ipicio. Decidiation	Date	. <i>, ,</i>	4304 011 4	ii iiiiOiiiiati		the IRS se	•	ŭ
	YO	ur signature		Date	Your occupation				rotection P		
Joint return?		7/1000		02/15/2023	DATA ENGI	NEER			ee inst.)		\Box
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	tion			the IRS se		
Keep a copy for your records.									lentity Prote ee inst.)	ection PIN,	enter it here
,		(212) 462 502							1131.)		
	_	one no. (312) 468-583		Email address	TANOOJCHAN		1AIL.CO			Check if:	
Paid		eparer's name	Preparer's signat		OHDER THE	Date	F /0000	PTIN	00700		
Preparer		YAM PRIYA RAM SACAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/15/2023 P02082									employed
Use Only		m's name GLOBAL TA			T 00016						55-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816			F	irm's EIN	84-3	171965

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
TANOOJ CHANDRA ADDAGUDU

Your social security number
866-93-1178

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	ch Schedule E .	5	-8,086.
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		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	\	80		
р		8p		
q	` ' '	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u		8u		
Z				
		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	-8,086.

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-basis gove		
	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:		
a	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans		
q	Contributions by certain chaplains to section 403(b) plans 24g		
•	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
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		
j	Housing deduction from Form 2555		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
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 . Enter here		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	 26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

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

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

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

Name(s) shown on return Your social security number 866-93-1178 TANOOJ CHANDRA ADDAGUDU Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with 2,673. 2,653. 31. 51. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 51. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with 287. 264. 23. Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 3. 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

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

BAA

26.

15

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

Part III Summary

16	Combine lines 7 and 15 and enter the result	16		77.
	• 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 line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains?			
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.			
	■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074 Attachment

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A

Name(s) shown on return

Social security number or taxpayer identification number

866-93-1178

TANOOJ CHANDRA ADDAGUDU

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions☐ (B) Short-term transactions	•	, ,	-			•	e)
(C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e)	If you enter an enter a c See the sep	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 Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	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	12/01/22	2,673.	2,653.	EW	31.	51.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), lir	lude on your ne 2 (if Box B	2,673.	2,653.		31.	51.

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

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

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

Social security number or taxpayer identification number 866-93-1178

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

Part II

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

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

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

✗ (D) Long-term transactions☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099)-B showing bas	•	,)
1 (a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
Description of property (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	01/01/20	12/01/22	287.	264.			23.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D	I here and inc is checked), lir	lude on your ne 9 (if Box E	287.	264.			23.

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

BAA REV 02/05/23 PRO Form **8949** (2022)

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 TANOOJ CHANDRA ADDAGUDU

Social security number or taxpayer identification number 866 - 93 - 1178

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

Part II

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

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

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

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Not	e above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS	

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

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate	If you enter an enter a c See the sep	f 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 combine the result
				instructions.	Code(s) from instructions	Amount of adjustment	with column (g).
ROBINHOOD SECURITIES LLC	01/01/22	12/31/22	4.	1.			3.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	I here and inclining is checked), lir	lude on your ne 9 (if Box E	4.	1.			3.

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

BAA REV 02/05/23 PRO Form **8949** (2022)

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

Go to www.irs.gov/ScheduleE for instructions and the latest information. Your social security number

Attachment Sequence No. 13

OMB No. 1545-0074

TAN	OOJ CHANDRA ADDAGUDU						866-9	3-1178	
Par	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal property rental income or loss from Form 4835 on page 2, line 40.			C. See	instru	ctions. If you a	are an indi	vidual, rep	ort farm
	Did you make any payments in 2022 that would require you t								s 🛚 No
В	If "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical address of each property (street, city, state, ZIP								
Α	3-167 KAGITHALA BAZAR, JAGGAIAHPET KR			י⊋ T ∩m	ZMD	HBV DBVU	ZCH TN	52117	
B	3 107 RAGIIIIADA BAZAR, OAGGATAIIFEI RR.	T DIIIV	7 DISI	NICI	, אואט.	IIVA FIVADI	TOIL TIN	<u>JZII /</u>	
C									
1b	Type of Property (from list below) 2 For each rental real estate proper above, report the number of fair re				Fa	ir Rental Days		nal Use nys	QJV
Α	personal use days. Check the QJ			Α		365		0	П
В	if you meet the requirements to fil	ile as a		B		303			
C	qualified joint venture. See instruc	ctions.		C					
	of Property:								
1	Single Family Residence Multi-Family Residence 3 Vacation/Short-Term Renta 4 Commercial	al	5 Land 6 Roya			Self-Rental Other (desc	ribe)		
						Propert	ies:		
Incor	ne:			Α		В			С
3	Rents received	3		5	20.				
4	Royalties received	4							
Ехре	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		8	84.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,0	27.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,8	43.				
15	Supplies	15		2,2					
16	Taxes	16							
17	Utilities	17		1,6	42.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,6	06.				
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	86.				
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (8,08	6.)	()	()
23a	Total of all amounts reported on line 3 for all rental proper	rties			23a		520.		
b	Total of all amounts reported on line 4 for all royalty prope				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d					23d				
е					23e	8	3,606.		
24	Income. Add positive amounts shown on line 21. Do not						. 24		
25	Losses. Add royalty losses from line 21 and rental real estate		-		nter to	tal losses he		(8,086.)
26	Total rental real estate and royalty income or (loss). C							,	, ,
_0	here. If Parts II, III, IV, and line 40 on page 2 do not a Schedule 1 (Form 1040), line 5. Otherwise, include this am	apply t	o you, a	also er	nter th	is amount o			-8,086.

2022 MICHIGAN Individual Income Tax Return MI-1040

	!2 MICHIGAN INDIV Irn is due April 18, 2023. ⊺					'n IVII-1U	40				ended Return ude Schedule AMD)]
	er's First Name	M.I.	Last Name	DIACK	IIIK.		2 Filer	s Full	Social Sec	curity	No. (Example: 123-45-6789	3)
TAI	NOOJ CHANDRA		ADDAGUDU	J								-,
lf a Jo	oint Return, Spouse's First Name	M.I.	Last Name					66		93	<u>— 1178</u>	700)
Home	Address (Number, Street, or P.O. Box	<u> </u>					3. Spou	ise's F	-ull Social	Secur	ity No. (Example: 123-45-6	789)
	772 SQUIRE RD	,							_			
	or Town		(State	ZIP Code		4. Scho	ol Dis	trict Code	(5 dig	its – see page 60)	
NO.	VI			ΜI	48375	5		63	3100			
5.	STATE CAMPAIGN FUND					6. FARME	RS, FIS	HER	MEN, OR	SEA	AFARERS	
	Check if you (and/or your spouse, filing a joint return) want \$3 of you to go to this fund. This will not incompour tax or reduce your refund.	ır taxes	. —	er ouse			heck this shing, or			our ii	ncome is from farming,	
7.	2022 FILING STATUS. Check one	e.				8. 2022 R	ESIDEN	CY S	TATUS.	Chec	k all that apply.	
a.	X Single	* If y	ou check box "c," o	comple	te	a. X	Resident					
b.	Married filing jointly		3 and enter spouse			b. \ \ \ \ \	lonreside	ent *			* If you check box "b" or "c," you must complete	ſ
											and include Schedule NR.	
C.	Married filing separately*					c P	art-Year	Resi	dent *			
9.	EXEMPTIONS. NOTE: If some	one els	e can claim you as	s a dep	endent, che	ck box 9e, en	ter 0 on l	line 9	a and en	ter \$	1,500 on line 9e (see ins	str.).
	a. Number of exemptions (see in	nstructi	ons)			9a.	1	x	\$5,000	9a.	5000	00
	b. Number of individuals who qua	alify for	one of the following	g speci	ial exemptio	ns: deaf,						
	blind, hemiplegic, paraplegic,c. Number of qualified disabled	-	-	-	-	-		X	\$2,900 \$400	9b. 9c.		00
	d. Number of Certificates of Still							X	\$5,000	9d.		00
	- Number of Columbiator of Cum	Direct in	on with the (ode in	iotidoti	01107	04] ^	ψο,σσσ	ou.		
	e. Claimed as dependent, see lii	ne 9 No	OTE above			9e.				9e.		00
	f. Add lines 9a, 9b, 9c, 9d and 9	e. Ent	er here and on line	e 15					Г	9f.	5000	00
10.	Adjusted Gross Income from y	our U.S	S. Form 1040 (see	instruc	ctions)				10.		72071	00
11.	Additions from Schedule 1, line 9). Inclu	de Schedule 1						11.			00
12.	Total. Add lines 10 and 11								12.		72071	00
13.	Subtractions from Schedule 1, lir	ne 30.	Include Schedule	e 1					13.			00
14.	Income subject to tax. Subtract	t line 1	3 from line 12. If li	ne 13 i	s greater th	an line 12, ent	ter "0"		14.		72071	00
15.	Exemption allowance. Enter an	nount f	rom line 9f or Sche	edule N	IR, line 19				15.		5000	00
16.	Taxable income. Subtract line 1	5 from	line 14. If line 15 i	is grea	ter than line	14, enter "0".			16.		67071	00
17.	Tax. Multiply line 16 by 4.25% (0	.0425)							17.		2851	00
ION-	REFUNDABLE CREDITS					AMOUNT	•		_		CREDIT	
18.	Income Tax Imposed by government Include a copy of the return (see		•		8a			00	18b.			00
19.	Michigan Historic Preservation Ta	ax Cre	dit (see instructions	s). 1	9a			00	19b.			00
20.	Income Tax. Subtract the sum of the sum of lines 18b and 19b is								20.		2851	00

2022 MI	-1040, Page 2 of 2		□:!':	- F.J. Ci-l C	a accepto e Niconala a	0.6.6	1	02 1170	٦		
			Filers	s Full Social S	ecurity Numbe	866		93 — 1178			
	Enter amount of Income Tax from lin							2851 0	0		
22.	Voluntary Contributions from Form 4	1642, line 6.	Include F	orm 4642			22.	0	0		
	USE TAX. Use tax due on Internet, Worksheet 1 (see instructions)						23.	0 0	0		
24	Total Tax Liability. Add lines 21, 22	and 23				24		2851 0	امر		
	NDABLE CREDITS AND PAYM		•••••			24.			의 ㄱ		
25.	Property Tax Credit. Include MI-10	040CR or M	II-1040CR-	2			25.	0	0		
26.	Farmland Preservation Tax Credit	t. Include M	II-1040CR	-5			26.		0		
				. [FEI	DERAL		MICHIGAN	\neg		
	Earned Income Tax Credit. Multiply enter result on line 27b					00	27b.	0	0		
	Michigan Historic Preservation Tax (_	3581		28.	i	0		
29.	Credit for allocated share of tax paid by an electing flow-through entity (see instructions)							0	0		
30.	Michigan tax withheld from Schedule	e W, line 6.	Include S	chedule W (do not subn	nit W-2s)	30.	3401 0	0		
31.	Estimated tax, extension payments	and 2021 or	odit forwa	rd			31.		0		
	2022 AMENDED RETURNS ONLY.								ᅴ		
	Amended returns must include Sch	nedule AMD	(see inst	ructions).		·					
	32a. If you had a refund and/or of negative number on line 32		on the origi	nal return, che	eck box 32a an	d enter this amount as	за				
	32b. If you paid with the original any additional tax paid afte						us 32c.	0	0		
33.	Total refundable credits and paymer	30, 31 and 32	c33.		3401 0	0					
	ND OR TAX DUE								_		
34.	If line 33 is less than line 24, subtraction	ct line 33 fro	m line 24.	If applicable	, see instruct	ions.					
	Include interest 00 and penalty 00							0	0		
35.	35. Overpayment. If line 33 is greater than line 24, subtract line 24 from line 33							550 0	0		
36.	Credit Forward. Amount of line 35 t	to be credite	ed to your 2	2023 estimat	ted tax for yo	ur 2023 tax return	36.	<u> 0</u>	0		
37.	Subtract line 36 from line 35					REFUND 37.		550 o	اه		
DIRE	CT DEPOSIT		ing Transit			Account Number		c. Type of Account	٦		
Deposi instituti and c.	t your refund directly to your financial on! See instructions and complete a, b	07400	0010		871189	9028	1.	X Checking 2. Savings			
	ased Taxpayer. If Filer and/or Spous							I declare under penalty of perjury that			
ENIE	R DATE OF DEATH ONLY. Example:	04-15-2022 (MINI-DD-YY	YY)		Preparer's PTIN, FEI		nation of which I have any knowledge.	\dashv		
Filer		Spouse	_	_		P02082703					
Taxpayer Certification. I declare under penalty of perjury that the and attachments is true and complete to the best of my knowledge.				e information in this return SYAM PRI			• • •	M SAGAR GUPTA TA			
Filer's Signature				00/45/0000		Preparer's Signature SYAM PRIY	a rai	M SAGAR GUPTA TA			
Spous	e's Signature			Date		Preparer's Business	Name, Ad	dress and Telephone Number	٦		
						GLOBAL TA		LLC			
							245 ROONEY CT				
							E BRUNSWICK NJ 08816 678-965-9522				

Refund, credit, or zero returns. Mail your return to:

Michigan Department of Treasury, Lansing, MI 48956 Pay amount on line 34 (see instructions). Mail your check and return to: Michigan Department of Treasury, Lansing, MI 48929

2022 MICHIGAN Withholding Tax Schedule

Issued under authority of Public Act 281 of 1967, as amended.

Type or print in blue or black ink.

Attachment 13

INSTRUCTIONS: If you had Michigan income tax withheld in 2022, you must complete a *Withholding Tax Schedule* (Schedule W) to claim the withholding on your *Individual Income Tax Return* (MI-1040, line 30). Report military pay in Table 1 and military retirement benefits and taxable railroad retirement benefits (both Tier 1 and Tier 2) in Table 2 even if no Michigan tax was withheld. Include your completed Schedule W with Form MI-1040. See complete instructions on page 2 of this form. If you need additional space, include another Schedule W.

1. Filer's First Name		Last Name	2. Filer's Full Social Security No. (Example: 123-45-6789)		
TANOOJ CHANDRA		ADDAGUDU	866 — 93 — 1178		
If a Joint Return, Spouse's First Name	M.I.	Last Name	3. Spouse's Full Social Security No. (Example: 123-45-6789)		

TABLE 1: MICHIGAN TAX WITHHELD OR MILITARY PAY REPORTED ON W-2, W-2G or CORRECTED W-2 FORMS

	_				_		$\overline{}$
/	4	В	C	D		E	
Enter "X" for: Filer or Spouse		Employer's identification number (Example: 38-1234567)	Box c — Employer's name	Box 1 — Wages, tips, other compensation		Box 17 — Michigan income tax withheld	
X		85-2808692	SYSPRO IT SOLUIT	80016	00	3401	00
					00		00
					00		00
					00		00
					00		00
Enter	Table	1 Subtotal from additional Sche	[00		
4.	4. SUBTOTAL. Enter total of Table 1, column E						

TABLE 2: MICHIGAN TAX WITHHELD OR MILITARY RETIREMENT BENEFITS AND RAILROAD RETIREMENT BENEFITS (BOTH TIER 1 AND TIER 2) REPORTED ON 1099 FORMS

Α	В	С	D	E
Enter "X" for: Filer or Spouse	1 (= 1 00 100 1507)	Payer's name	Taxable pension distribution, misc. income, etc. (see inst.)	Michigan income tax withheld
			00	0
			00	0
			00	0
			00	0
			00	0
Enter Table	2 Subtotal from additional Sche	dule W forms (if applicable)		0
5. SUB	TOTAL. Enter total of Table 2, co	olumn E	5.	0
6. TOT	AL. Add lines 4 and 5. Enter her	3401 0		

REV 01/21/23 PRO