

**FOR TAX YEAR 2022**

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

UPSILON TAX LLC  
16192 COASTAL HIGHWAY  
LEWES, DE 19958  
(209) 877-4566

## Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for participating in IRS e-file.

Taxpayer name

**JANARDHANARAO & SIVEKOTESWARAMMA CH**

Taxpayer address (optional)

**19017 WAXEN RD UNIT A**

**BOTHELL, WA 98012**

1.  Your federal income tax return for 2022 was filed electronically with the IRS Submission Processing Center. The electronic filing services were provided by UPSILON TAX LLC.
2.  Your return was accepted on \_\_\_\_\_ using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you. The Submission ID assigned to your return is \_\_\_\_\_.
3.  Your return was accepted on \_\_\_\_\_. Allow 4 to 6 weeks for the processing of your return. The Earned Income Credit or a dependent's exemption on your return may be reduced or disallowed due to a child's name and social security number mismatch.
4.  Your electronic funds withdrawal payment request was accepted for processing.
5.  Your electronic funds withdrawal payment request was not accepted for processing. Refer to the "If You Owe Tax" section.
6.  Your Form 4868, Application for Automatic Extension of Time to File U.S. Individual Income Tax Return, was accepted on \_\_\_\_\_. The Submission ID assigned to your extension is \_\_\_\_\_.

**DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS.  
IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.**

### If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at [www.irs.gov](http://www.irs.gov), or you can call the IRS toll-free at 1-800-829-1040.

### If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to [www.irs.gov](http://www.irs.gov) and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

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The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

### If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to [www.irs.gov/e-pay](http://www.irs.gov/e-pay).

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to [www.irs.gov](http://www.irs.gov). You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

### If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

### Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. **If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.**

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### Instructions for Electronic Return Originators

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**Line 2 - PIN Presence Indicator** - Check box 2 if the taxpayer entered a PIN or authorized the ERO to enter or generate the PIN for the taxpayer, and the Acknowledgement File PIN Presence Indicator is a "Practitioner PIN," "Self-Select PIN" or "Online Filer PIN." Form 8879, IRS *e-file* Signature Authorization, is required if the ERO enters or generates the PIN or if the Practitioner PIN method is used. **Use Form 8453, U.S. Individual Income Tax Transmittal for an IRS *e-file* Return, to send required paper forms or supporting documentation listed next to the form check boxes (do not send Forms W-2, W-2G, or 1099R).**

**Line 3 - Exception Processing** - Check box 3 if the Acknowledgement File Acceptance Code equals "Exception." The acceptance code indicates that this return has been previously rejected and this subsequent submission still has invalid data.

**Line 4 - Payment Acknowledgement Literal** - Check box 4 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field equals "Payment Request Received."

**Line 5 - Payment Acknowledgement Literal** - Check box 5 if the taxpayer requested to use electronic funds withdrawal to pay the balance due, and the Acknowledgement File Payment Acknowledgement Literal field does not equal "Payment Request Received." If box 5 is checked, inform the taxpayer that he/she must pay by check, money order, debit card, or credit card.

**Note:** EROs can use the Acknowledgement File information, translated by the transmitter, to complete Form 9325.

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying surviving spouse (QSS)  
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial <b>JANARDHANARAO</b>		Last name <b>CHAKKA</b>	Your social security number <b>712-21-6473</b>	
If joint return, spouse's first name and middle initial <b>SIVEKOTESWARAMMA</b>		Last name <b>CHAKKA</b>	Spouse's social security number <b>656-85-8761</b>	
Home address (number and street). If you have a P.O. box, see instructions. <b>19017 WAXEN RD UNIT A</b>			Apt. no.	<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. <b>BOTHELL</b>		State <b>WA</b>	ZIP code <b>98012</b>	
Foreign country name		Foreign province/state/county	Foreign postal code	

**Digital Assets** At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)  Yes  No

**Standard Deduction** **Someone can claim:**  You as a dependent  Your spouse as a dependent  
 Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** **You:**  Were born before January 2, 1958  Are blind **Spouse:**  Was born before January 2, 1958  Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here <input type="checkbox"/>	(1) First name		Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):	
						Child tax credit	Credit for other dependents
	<b>SUSHRUTAGOURI</b>		<b>CHAKKA</b>	<b>173-51-9127</b>	<b>DAUGHTER</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<b>HARSHITH SAYEE</b>		<b>CHAKKA</b>	<b>872-57-3083</b>	<b>SON</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

Income					
<b>1a</b>	Total amount from Form(s) W-2, box 1 (see instructions)	<b>1a</b>		<b>229,622</b>	
<b>b</b>	Household employee wages not reported on Form(s) W-2	<b>1b</b>			
<b>c</b>	Tip income not reported on line 1a (see instructions)	<b>1c</b>			
<b>d</b>	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	<b>1d</b>			
<b>e</b>	Taxable dependent care benefits from Form 2441, line 26	<b>1e</b>			
<b>f</b>	Employer-provided adoption benefits from Form 8839, line 29	<b>1f</b>			
<b>g</b>	Wages from Form 8919, line 6	<b>1g</b>			
<b>h</b>	Other earned income (see instructions)	<b>1h</b>			
<b>i</b>	Nontaxable combat pay election (see instructions)	<b>1i</b>			
<b>z</b>	Add lines 1a through 1h	<b>1z</b>		<b>229,622</b>	
<b>2a</b>	Tax-exempt interest	<b>2a</b>			
<b>3a</b>	Qualified dividends	<b>3a</b>	<b>5,117</b>		
<b>4a</b>	IRA distributions	<b>4a</b>			
<b>5a</b>	Pensions and annuities	<b>5a</b>			
<b>6a</b>	Social security benefits	<b>6a</b>			
<b>c</b>	If you elect to use the lump-sum election method, check here (see instructions)				<input type="checkbox"/>
<b>7</b>	Capital gain or (loss). Attach Schedule D if required. If not required, check here	<b>7</b>		<b>21,070</b>	
<b>8</b>	Other income from Schedule 1, line 10	<b>8</b>		<b>(14,136)</b>	
<b>9</b>	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>	<b>9</b>		<b>241,689</b>	
<b>10</b>	Adjustments to income from Schedule 1, line 26	<b>10</b>			
<b>11</b>	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>	<b>11</b>		<b>241,689</b>	
<b>12</b>	<b>Standard deduction or itemized deductions</b> (from Schedule A)	<b>12</b>		<b>29,041</b>	
<b>13</b>	Qualified business income deduction from Form 8995 or Form 8995-A	<b>13</b>			
<b>14</b>	Add lines 12 and 13	<b>14</b>		<b>29,041</b>	
<b>15</b>	Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b>	<b>15</b>		<b>212,648</b>	

Attach Sch. B if required.

**Standard Deduction for-**  
 • Single or Married filing separately, \$12,950  
 • Married filing jointly or Qualifying surviving spouse, \$25,900  
 • Head of household, \$19,400  
 • If you checked any box under Standard Deduction, see instructions.



Table with columns for line numbers (16-24) and amounts. Includes sections for Tax and Credits, with sub-rows for various tax items and their totals.

Table with columns for line numbers (25-33) and amounts. Includes sections for Payments, with sub-rows for federal income tax withheld, estimated tax payments, and other payments.

If you have a qualifying child, attach Sch. EIC.

Table with columns for line numbers (34-36) and amounts. Includes sections for Refund, with sub-rows for overpaid amount, routing number, and account number.

Table with columns for line numbers (37-38) and amounts. Includes sections for Amount You Owe, with sub-rows for amount owed and estimated tax penalty.

Third Party Designee section. Includes a checkbox for 'Yes' and 'No', and fields for Designee's name (SAI TEJA KUKUDALA), Phone no. (209-877-4566), and Personal identification number (PIN) (13246).

Sign Here section. Includes a declaration statement and signature fields for the preparer (SAI TEJA KUKUDALA) and spouse (58629), with dates and occupations.

Paid Preparer Use Only section. Includes fields for Preparer's signature (SAI TEJA KUKUDALA), name, firm's name (UPSILON TAX LLC), address, and phone number.

**SCHEDULE 1  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

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

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **01**

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

**JANARDHANARAO & SIVEKOTESWARANMA CHAKKA**

Your social security number

**712-21-6473**

**Part I Additional Income**

<b>1</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .	<b>1</b>	
<b>2a</b>	Alimony received . . . . .	<b>2a</b>	
<b>b</b>	Date of original divorce or separation agreement (see instructions): _____		
<b>3</b>	Business income or (loss). Attach Schedule C . . . . .	<b>3</b>	<b>(14,136)</b>
<b>4</b>	Other gains or (losses). Attach Form 4797 . . . . .	<b>4</b>	
<b>5</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . . . .	<b>5</b>	
<b>6</b>	Farm income or (loss). Attach Schedule F . . . . .	<b>6</b>	
<b>7</b>	Unemployment compensation . . . . .	<b>7</b>	
<b>8</b>	Other income:		
<b>a</b>	Net operating loss . . . . .	<b>8a</b>	( )
<b>b</b>	Gambling . . . . .	<b>8b</b>	
<b>c</b>	Cancellation of debt . . . . .	<b>8c</b>	
<b>d</b>	Foreign earned income exclusion from Form 2555 . . . . .	<b>8d</b>	( )
<b>e</b>	Income from Form 8853 . . . . .	<b>8e</b>	
<b>f</b>	Income from Form 8889 . . . . .	<b>8f</b>	
<b>g</b>	Alaska Permanent Fund dividends . . . . .	<b>8g</b>	
<b>h</b>	Jury duty pay . . . . .	<b>8h</b>	
<b>i</b>	Prizes and awards . . . . .	<b>8i</b>	
<b>j</b>	Activity not engaged in for profit income . . . . .	<b>8j</b>	
<b>k</b>	Stock options . . . . .	<b>8k</b>	
<b>l</b>	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 . . . . .	<b>8l</b>	
<b>m</b>	Olympic and Paralympic medals and USOC prize money (see instructions) . . . . .	<b>8m</b>	
<b>n</b>	Section 951(a) inclusion (see instructions) . . . . .	<b>8n</b>	
<b>o</b>	Section 951A(a) inclusion (see instructions) . . . . .	<b>8o</b>	
<b>p</b>	Section 461(l) excess business loss adjustment . . . . .	<b>8p</b>	
<b>q</b>	Taxable distributions from an ABL account (see instructions) . . . . .	<b>8q</b>	
<b>r</b>	Scholarship and fellowship grants not reported on Form W-2 . . . . .	<b>8r</b>	
<b>s</b>	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d . . . . .	<b>8s</b>	( )
<b>t</b>	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan . . . . .	<b>8t</b>	
<b>u</b>	Wages earned while incarcerated . . . . .	<b>8u</b>	
<b>z</b>	Other income. List type and amount: _____	<b>8z</b>	
<b>9</b>	Total other income. Add lines 8a through 8z . . . . .	<b>9</b>	
<b>10</b>	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	<b>10</b>	<b>(14,136)</b>

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

Schedule 1 (Form 1040) 2022

<b>Part II Adjustments to Income</b>			
<b>11</b>	Educator expenses . . . . .		<b>11</b>
<b>12</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .		<b>12</b>
<b>13</b>	Health savings account deduction. Attach Form 8889 . . . . .		<b>13</b> 0
<b>14</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .		<b>14</b>
<b>15</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .		<b>15</b>
<b>16</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .		<b>16</b>
<b>17</b>	Self-employed health insurance deduction . . . . .		<b>17</b>
<b>18</b>	Penalty on early withdrawal of savings . . . . .		<b>18</b>
<b>19a</b>	Alimony paid . . . . .		<b>19a</b>
<b>b</b>	Recipient's SSN . . . . .		
<b>c</b>	Date of original divorce or separation agreement (see instructions): _____		
<b>20</b>	IRA deduction . . . . .		<b>20</b>
<b>21</b>	Student loan interest deduction . . . . .		<b>21</b>
<b>22</b>	Reserved for future use . . . . .		<b>22</b>
<b>23</b>	Archer MSA deduction . . . . .		<b>23</b>
<b>24</b>	Other adjustments:		
<b>a</b>	Jury duty pay (see instructions) . . . . .	<b>24a</b>	
<b>b</b>	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit . . . . .	<b>24b</b>	
<b>c</b>	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m . . . . .	<b>24c</b>	
<b>d</b>	Reforestation amortization and expenses . . . . .	<b>24d</b>	
<b>e</b>	Repayment of supplemental unemployment benefits under the Trade Act of 1974 . . . . .	<b>24e</b>	
<b>f</b>	Contributions to section 501(c)(18)(D) pension plans . . . . .	<b>24f</b>	
<b>g</b>	Contributions by certain chaplains to section 403(b) plans . . . . .	<b>24g</b>	
<b>h</b>	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) . . . . .	<b>24h</b>	
<b>i</b>	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 . . . . .	<b>24i</b>	
<b>j</b>	Housing deduction from Form 2555 . . . . .	<b>24j</b>	
<b>k</b>	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) . . . . .	<b>24k</b>	
<b>z</b>	Other adjustments. List type and amount: _____	<b>24z</b>	
<b>25</b>	Total other adjustments. Add lines 24a through 24z . . . . .		<b>25</b>
<b>26</b>	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a . . . . .		<b>26</b> 0

**SCHEDULE 2  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Taxes**

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **02**

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

JANARDHANARAO & SIVEKOTESWARARMA CHAKKA

Your social security number

712-21-6473

<b>Part I Tax</b>			
<b>1</b>	Alternative minimum tax. Attach Form 6251 . . . . .	<b>1</b>	
<b>2</b>	Excess advance premium tax credit repayment. Attach Form 8962 . . . . .	<b>2</b>	
<b>3</b>	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 . .	<b>3</b>	0

<b>Part II Other Taxes</b>			
<b>4</b>	Self-employment tax. Attach Schedule SE . . . . .	<b>4</b>	
<b>5</b>	Social security and Medicare tax on unreported tip income. Attach Form 4137 . . . . .	<b>5</b>	
<b>6</b>	Uncollected social security and Medicare tax on wages. Attach Form 8919 . . . . .	<b>6</b>	
<b>7</b>	Total additional social security and Medicare tax. Add lines 5 and 6 . . . . .	<b>7</b>	
<b>8</b>	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here . . . . . <input type="checkbox"/>	<b>8</b>	
<b>9</b>	Household employment taxes. Attach Schedule H . . . . .	<b>9</b>	
<b>10</b>	Repayment of first-time homebuyer credit. Attach Form 5405 if required . . . . .	<b>10</b>	
<b>11</b>	Additional Medicare Tax. Attach Form 8959 . . . . .	<b>11</b>	1
<b>12</b>	Net investment income tax. Attach Form 8960 . . . . .	<b>12</b>	
<b>13</b>	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12 . . . . .	<b>13</b>	
<b>14</b>	Interest on tax due on installment income from the sale of certain residential lots and timeshares . . . . .	<b>14</b>	
<b>15</b>	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000 . . . . .	<b>15</b>	
<b>16</b>	Recapture of low-income housing credit. Attach Form 8611 . . . . .	<b>16</b>	

(continued on page 2)

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

Schedule 2 (Form 1040) 2022

EEA

**Part II Other Taxes** *(continued)*

<b>17</b> Other additional taxes:			
<b>a</b> Recapture of other credits. List type, form number, and amount:			
_____	<b>17a</b>		
<b>b</b> Recapture of federal mortgage subsidy. If you sold your home see instructions . . . . .	<b>17b</b>		
<b>c</b> Additional tax on HSA distributions. Attach Form 8889 . . . . .	<b>17c</b>		
<b>d</b> Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889 . . . . .	<b>17d</b>		
<b>e</b> Additional tax on Archer MSA distributions. Attach Form 8853 . . . . .	<b>17e</b>		
<b>f</b> Additional tax on Medicare Advantage MSA distributions. Attach Form 8853 . . . . .	<b>17f</b>		
<b>g</b> Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property . . . . .	<b>17g</b>		
<b>h</b> Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A . . . . .	<b>17h</b>		
<b>i</b> Compensation you received from a nonqualified deferred compensation plan described in section 457A . . . . .	<b>17i</b>		
<b>j</b> Section 72(m)(5) excess benefits tax . . . . .	<b>17j</b>		
<b>k</b> Golden parachute payments . . . . .	<b>17k</b>		
<b>l</b> Tax on accumulation distribution of trusts . . . . .	<b>17l</b>		
<b>m</b> Excise tax on insider stock compensation from an expatriated corporation . . . . .	<b>17m</b>		
<b>n</b> Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866 . . . . .	<b>17n</b>		
<b>o</b> Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR . . . . .	<b>17o</b>		
<b>p</b> Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund . . . . .	<b>17p</b>		
<b>q</b> Any interest from Form 8621, line 24 . . . . .	<b>17q</b>		
<b>z</b> Any other taxes. List type and amount: _____	<b>17z</b>		
_____			
<b>18</b> Total additional taxes. Add lines 17a through 17z . . . . .			<b>18</b>
<b>19</b> Reserved for future use . . . . .			<b>19</b>
<b>20</b> Section 965 net tax liability installment from Form 965-A . . . . .	<b>20</b>		
<b>21</b> Add lines 4, 7 through 16, and 18. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . . . .			<b>21</b>

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Itemized Deductions**

Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **07**

**Caution:** If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

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

Your social security number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.				
	1 Medical and dental expenses (see instructions)	1			
	2 Enter amount from Form 1040 or 1040-SR, line 11	2			
	3 Multiply line 2 by 7.5% (0.075)	3			
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-				4	
<b>Taxes You Paid</b>	5 State and local taxes.				
	a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <input checked="" type="checkbox"/>	5a	1,885		
	b State and local real estate taxes (see instructions)	5b	6,957		
	c State and local personal property taxes	5c			
	d Add lines 5a through 5c	5d	8,842		
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	8,842		
	6 Other taxes. List type and amount:	6			
7 Add lines 5e and 6				7	8,842
<b>Interest You Paid</b> <small>Caution: Your mortgage interest deduction may be limited. See instructions.</small>	8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>				
	a Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	15,073		
	b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b			
	c Points not reported to you on Form 1098. See instructions for special rules	8c			
	d Reserved for future use	8d			
	e Add lines 8a through 8c	8e	15,073		
9 Investment interest. Attach Form 4952 if required. See instructions	9	16			
10 Add lines 8e and 9				10	15,089
<b>Gifts to Charity</b> <small>Caution: If you made a gift and got a benefit for it, see instructions.</small>	11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	5,110		
	12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500	12			
	13 Carryover from prior year	13			
	14 Add lines 11 through 13				14
<b>Casualty and Theft Losses</b>	15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions				15
<b>Other Itemized Deductions</b>	16 Other - from list in instructions. List type and amount:				16
<b>Total Itemized Deductions</b>	17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12	17			29,041
	18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>				

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2022

**SCHEDULE B  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Interest and Ordinary Dividends**

Go to [www.irs.gov/ScheduleB](http://www.irs.gov/ScheduleB) for instructions and the latest information.  
Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **08**

Name(s) shown on return: **JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**  
Your social security number: **712-21-6473**

**Part I  
Interest**

(See instructions and the Instructions for Form 1040, line 2b.)

**Note:** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:  _____	1	
	<b>AMERITRADE CLEARING INC.</b>		1
	<b>FIDELITY</b>		14
	_____		
	_____		
	<b>INTEREST SUBTOTAL</b>		<b>15</b>
2	Add the amounts on line 1 . . . . .	2	15
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 . . . . .	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b . . . . .	4	15

**Note:** If line 4 is over \$1,500, you must complete Part III. **Amount**

**Part II  
Ordinary Dividends**

(See instructions and the Instructions for Form 1040, line 3b.)

**Note:** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

5	List name of payer: _____ <b>FIDELITY</b>	5	5,118
	_____		
	_____		
	_____		
	_____		
	<b>DIVIDEND SUBTOTAL</b>		<b>5,118</b>
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b . . . . .	6	5,118

**Note:** If line 6 is over \$1,500, you must complete Part III.

**Part III  
Foreign Accounts and Trusts**

**Caution:** If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

		Yes	No
7a At any time during 2022, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions . . . . .	<input type="checkbox"/>		<b>X</b>
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements . . . . .	<input type="checkbox"/>		<b>X</b>
b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) are located: _____	<input type="checkbox"/>		
8 During 2022, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions . . . . .	<input type="checkbox"/>		<b>X</b>

**SCHEDULE C  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Profit or Loss From Business**  
(Sole Proprietorship)

Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **09**

Name of proprietor <b>JANARDHANARAO CHAKKA</b>		Social security number (SSN) <b>712-21-6473</b>
A Principal business or profession, including product or service (see instructions) <b>BOUTIQUE</b>		B Enter code from instructions <b>458110</b>
C Business name. If no separate business name, leave blank. <b>NEWERA-SOFTSOLUTIONS LLC</b>		D Employer ID number (EIN) (see instr.) <b>86-2380346</b>
E Business address (including suite or room no.) <b>19017 WAXEN RD UNIT A</b> City, town or post office, state, and ZIP code <b>BOTHELL, WA 98012</b>		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____		
G Did you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses . . . . .		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2022, check here . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Form(s) 1099? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part I Income			
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . . <input type="checkbox"/>	1	5,707
2	Returns and allowances . . . . .	2	750
3	Subtract line 2 from line 1 . . . . .	3	4,957
4	Cost of goods sold (from line 42) . . . . .	4	10,775
5	<b>Gross profit.</b> Subtract line 4 from line 3. . . . .	5	(5,818)
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .	6	
7	<b>Gross income.</b> Add lines 5 and 6 . . . . .	7	(5,818)

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8	Advertising . . . . .	8	750
9	Car and truck expenses (see instructions) . . . . .	9	
10	Commissions and fees . . . . .	10	
11	Contract labor (see instructions) . . . . .	11	
12	Depletion . . . . .	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .	13	
14	Employee benefit programs (other than on line 19) . . . . .	14	
15	Insurance (other than health) . . . . .	15	
16	Interest (see instructions):		
	a Mortgage (paid to banks, etc.) . . . . .	16a	
	b Other . . . . .	16b	
17	Legal and professional services . . . . .	17	
18	Office expense (see instructions) . . . . .	18	50
19	Pension and profit-sharing plans . . . . .	19	
20	Rent or lease (see instructions):		
	a Vehicles, machinery, and equipment . . . . .	20a	
	b Other business property . . . . .	20b	
21	Repairs and maintenance . . . . .	21	
22	Supplies (not included in Part III) . . . . .	22	250
23	Taxes and licenses . . . . .	23	
24	Travel and meals:		
	a Travel . . . . .	24a	
	b Deductible meals (see instructions) . . . . .	24b	200
25	Utilities . . . . .	25	
26	Wages (less employment credits) . . . . .	26	
27a	Other expenses (from line 48) . . . . .	27a	
27b	<b>Reserved for future use</b> . . . . .	27b	
28	<b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a. . . . .	28	1,250
29	Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	29	(7,068)
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. <b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . .	30	
31	<b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> . • If a loss, you <b>must</b> go to line 32.	31	(7,068)
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> . • If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.		
		32a	<input checked="" type="checkbox"/> All investment is at risk.
		32b	<input type="checkbox"/> Some investment is not at risk.



Name(s)

SSN

JANARDHANARAO CHAKKA

712-21-6473

Part III Cost of Goods Sold (see instructions)

Table with 2 columns: Description and Amount. Rows include: 33 Method(s) used to value closing inventory; 34 Was there any change in determining quantities, costs, or valuations; 35 Inventory at beginning of year; 36 Purchases less cost of items withdrawn; 37 Cost of labor; 38 Materials and supplies; 39 Other costs; 40 Add lines 35 through 39; 41 Inventory at end of year; 42 Cost of goods sold.

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business.

43 When did you place your vehicle in service for business purposes? (month/day/year)
44 Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:
a Business b Commuting (see instructions) c Other
45 Was your vehicle available for personal use during off-duty hours?
46 Do you (or your spouse) have another vehicle available for personal use?
47a Do you have evidence to support your deduction?
b If "Yes," is the evidence written?

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

Table with 2 columns: Description and Amount. Multiple empty rows for listing expenses.

48 Total other expenses. Enter here and on line 27a 48

**SCHEDULE C  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Profit or Loss From Business**  
(Sole Proprietorship)

Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **09**

Name of proprietor <b>SIVEKOTESWARAMMA CHAKKA</b>		Social security number (SSN) <b>656-85-8761</b>
A Principal business or profession, including product or service (see instructions) <b>BOUTIQUE</b>		B Enter code from instructions <b>458110</b>
C Business name. If no separate business name, leave blank. <b>NEWERA-SOFTSOLUTIONS LLC</b>		D Employer ID number (EIN) (see instr.) <b>86-2380346</b>
E Business address (including suite or room no.) <b>19017 WAXEN RD UNIT A</b> City, town or post office, state, and ZIP code <b>BOTHELL, WA 98012</b>		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____		
G Did you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses . . . . .		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2022, check here . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Form(s) 1099? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part I Income			
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked . . . . . <input type="checkbox"/>	1	5,707
2	Returns and allowances . . . . .	2	750
3	Subtract line 2 from line 1 . . . . .	3	4,957
4	Cost of goods sold (from line 42) . . . . .	4	10,775
5	<b>Gross profit.</b> Subtract line 4 from line 3. . . . .	5	(5,818)
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . .	6	
7	<b>Gross income.</b> Add lines 5 and 6 . . . . .	7	(5,818)

Part II Expenses. Enter expenses for business use of your home only on line 30.			
8	Advertising . . . . .	8	750
9	Car and truck expenses (see instructions) . . . . .	9	
10	Commissions and fees . . . . .	10	
11	Contract labor (see instructions) . . . . .	11	
12	Depletion . . . . .	12	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions) . . . . .	13	
14	Employee benefit programs (other than on line 19) . . . . .	14	
15	Insurance (other than health) . . . . .	15	
16	Interest (see instructions):		
	a Mortgage (paid to banks, etc.) . . . . .	16a	
	b Other . . . . .	16b	
17	Legal and professional services . . . . .	17	
18	Office expense (see instructions) . . . . .	18	50
19	Pension and profit-sharing plans . . . . .	19	
20	Rent or lease (see instructions):		
	a Vehicles, machinery, and equipment . . . . .	20a	
	b Other business property . . . . .	20b	
21	Repairs and maintenance . . . . .	21	
22	Supplies (not included in Part III) . . . . .	22	250
23	Taxes and licenses . . . . .	23	
24	Travel and meals:		
	a Travel . . . . .	24a	
	b Deductible meals (see instructions) . . . . .	24b	200
25	Utilities . . . . .	25	
26	Wages (less employment credits) . . . . .	26	
27a	Other expenses (from line 48) . . . . .	27a	
27b	<b>Reserved for future use</b> . . . . .	27b	
28	<b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27a. . . . .	28	1,250
29	Tentative profit or (loss). Subtract line 28 from line 7 . . . . .	29	(7,068)
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. <b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . .	30	
31	<b>Net profit or (loss).</b> Subtract line 30 from line 29. • If a profit, enter on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> . • If a loss, you <b>must</b> go to line 32.	31	(7,068)
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> . • If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.		
		32a	<input checked="" type="checkbox"/> All investment is at risk.
		32b	<input type="checkbox"/> Some investment is not at risk.

Name(s)

SSN

SIVEKOTESWARAMMA CHAKKA

656-85-8761

Part III Cost of Goods Sold (see instructions)

Table with 2 columns: Description and Amount. Rows include: 33 Method(s) used to value closing inventory; 34 Was there any change in determining quantities, costs, or valuations; 35 Inventory at beginning of year; 36 Purchases less cost of items withdrawn; 37 Cost of labor; 38 Materials and supplies; 39 Other costs; 40 Add lines 35 through 39; 41 Inventory at end of year; 42 Cost of goods sold.

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business.

43 When did you place your vehicle in service for business purposes? (month/day/year)
44 Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:
a Business b Commuting (see instructions) c Other
45 Was your vehicle available for personal use during off-duty hours?
46 Do you (or your spouse) have another vehicle available for personal use?
47a Do you have evidence to support your deduction?
b If "Yes," is the evidence written?

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

Table with 2 columns: Description and Amount. Multiple empty rows for listing expenses.

48 Total other expenses. Enter here and on line 27a 48

**SCHEDULE D**  
**(Form 1040)**

**Capital Gains and Losses**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/ScheduleD](http://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.

**2022**

Attachment  
Sequence No. **12**

Name(s) shown on return **JANARDHANARAO & SIVEKOTESWARANMA CHAKKA** Your social security number **712-21-6473**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 . . . .				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .	1,611	1,736		(125)
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .				
<b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss)</b> . Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2 . . . . .				<b>7</b> (125)

**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 lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 . . . .				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .	27,497	6,302		21,195
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .				
<b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .				<b>12</b>
<b>13</b> Capital gain distributions. See the instructions . . . . .				<b>13</b>
<b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .				<b>14</b> ( )
<b>15</b> <b>Net long-term capital gain or (loss)</b> . Combine lines 8a through 14 in column (h). Then, go to Part III on page 2 . . . . .				<b>15</b> 21,195

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

Schedule D (Form 1040) 2022

**Part III Summary**

<p><b>16</b> Combine lines 7 and 15 and enter the result . . . . .</p>	<p><b>16</b></p>	<p>21,070</p>
<ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li> </ul>		
<p><b>17</b> Are lines 15 and 16 <b>both</b> gains?  <input checked="" type="checkbox"/> <b>Yes.</b> Go to line 18.  <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.</p>		
<p><b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . .</p>	<p><b>18</b></p>	
<p><b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet . . . . .</p>	<p><b>19</b></p>	
<p><b>20</b> Are lines 18 and 19 both zero or blank and you are not filing Form 4952?  <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16. <b>Don't</b> complete lines 21 and 22 below.   <input checked="" type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.</p>		
<p><b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:  <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul> </p>	<p><b>21</b></p>	<p>( )</p>
<p><b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.</p>		
<p><b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?   <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.   <input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form8949](http://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.

**2022**

Attachment  
Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

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

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

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

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

- (A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (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 <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	<b>AMERITRADE</b>	<b>VARIOUS</b>	<b>12-31-2022</b>	<b>1,602</b>	<b>1,727</b>			<b>(125)</b>
	<b>FIDELITY</b>	<b>VARIOUS</b>	<b>12-31-2022</b>	<b>9</b>	<b>9</b>			
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked) . . . . .				<b>1,611</b>	<b>1,736</b>			<b>(125)</b>

**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.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side **Social security number or taxpayer identification number**  
**JANARDHANARAO & SIVEKOTESWARARMA CHAKKA** **712-21-6473**

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

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

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

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

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(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 <b>Note</b> below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	<b>FIDELITY</b>	<b>VARIOUS</b>	<b>12-31-2022</b>	<b>27,497</b>	<b>6,302</b>			<b>21,195</b>
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) . . . .				<b>27,497</b>	<b>6,302</b>			<b>21,195</b>

**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.

**SCHEDULE 8812**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Credits for Qualifying Children  
and Other Dependents**

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

Go to [www.irs.gov/Schedule8812](http://www.irs.gov/Schedule8812) for instructions and the latest information.

OMB No. 1545-0074

**2022**

Attachment  
Sequence No. **47**

Name(s) shown on return

Your social security number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

**Part I Child Tax Credit and Credit for Other Dependents**

<b>1</b>	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . . . . .	<b>1</b>	<b>241,689</b>
<b>2a</b>	Enter income from Puerto Rico that you excluded . . . . .	<b>2a</b>	
<b>b</b>	Enter the amounts from lines 45 and 50 of your Form 2555 . . . . .	<b>2b</b>	
<b>c</b>	Enter the amount from line 15 of your Form 4563 . . . . .	<b>2c</b>	
<b>d</b>	Add lines 2a through 2c . . . . .	<b>2d</b>	
<b>3</b>	Add lines 1 and 2d . . . . .	<b>3</b>	<b>241,689</b>
<b>4</b>	Number of qualifying children under age 17 with the required social security number . . . . .	<b>4</b>	<b>2</b>
<b>5</b>	Multiply line 4 by \$2,000 . . . . .	<b>5</b>	<b>4,000</b>
<b>6</b>	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number . . . . .	<b>6</b>	
<b>Caution:</b> Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.			
<b>7</b>	Multiply line 6 by \$500 . . . . .	<b>7</b>	
<b>8</b>	Add lines 5 and 7 . . . . .	<b>8</b>	<b>4,000</b>
<b>9</b>	Enter the amount shown below for your filing status. • Married filing jointly-\$400,000 • All other filing statuses-\$200,000 } . . . . .	<b>9</b>	<b>400,000</b>
<b>10</b>	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. }	<b>10</b>	<b>0</b>
<b>11</b>	Multiply line 10 by 5% (0.05) . . . . .	<b>11</b>	
<b>12</b>	Is the amount on line 8 more than the amount on line 11? <input type="checkbox"/> <b>No. STOP.</b> You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. <input checked="" type="checkbox"/> <b>Yes.</b> Subtract line 11 from line 8. Enter the result.	<b>12</b>	<b>4,000</b>
<b>13</b>	Enter the amount from the <b>Credit Limit Worksheet A</b> . . . . .	<b>13</b>	<b>36,350</b>
<b>14</b>	Enter the smaller of line 12 or 13. <b>This is your child tax credit and credit for other dependents.</b> . . . . .	<b>14</b>	<b>4,000</b>

**Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.**

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2022



Part II-A Additional Child Tax Credit for All Filers

Caution: If you file Form 2555, you cannot claim the additional child tax credit.

15 Check this box if you do not want to claim the additional child tax credit... 16a Subtract line 14 from line 12... 16b Number of qualifying children under 17... 17 Enter the smaller of line 16a or line 16b... 18a Earned income... 18b Nontaxable combat pay... 19 Is the amount on line 18a more than \$2,500?... 20 Multiply the amount on line 19 by 15% (0.15) and enter the result... Next, on line 16b, is the amount \$4,500 or more?...

Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico

21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6... 22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13... 23 Add lines 21 and 22... 24 1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. } 25 Subtract line 24 from line 23. If zero or less, enter -0-... 26 Enter the larger of line 20 or line 25... Next, enter the smaller of line 17 or line 26 on line 27.

Part II-C Additional Child Tax Credit

27 This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28... 27 0

## Investment Interest Expense Deduction

Go to [www.irs.gov/Form4952](http://www.irs.gov/Form4952) for the latest information.  
 Attach to your tax return.

Name(s) shown on return <b>JANARDHANARAO &amp; SIVEKOTESWARAMMA CHAKKA</b>	Identifying number <b>712-21-6473</b>
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### Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2022 (see instructions) . . . . .	1	18
2	Disallowed investment interest expense from 2021 Form 4952, line 7 . . . . .	2	
3	<b>Total investment interest expense.</b> Add lines 1 and 2 . . . . .	3	18

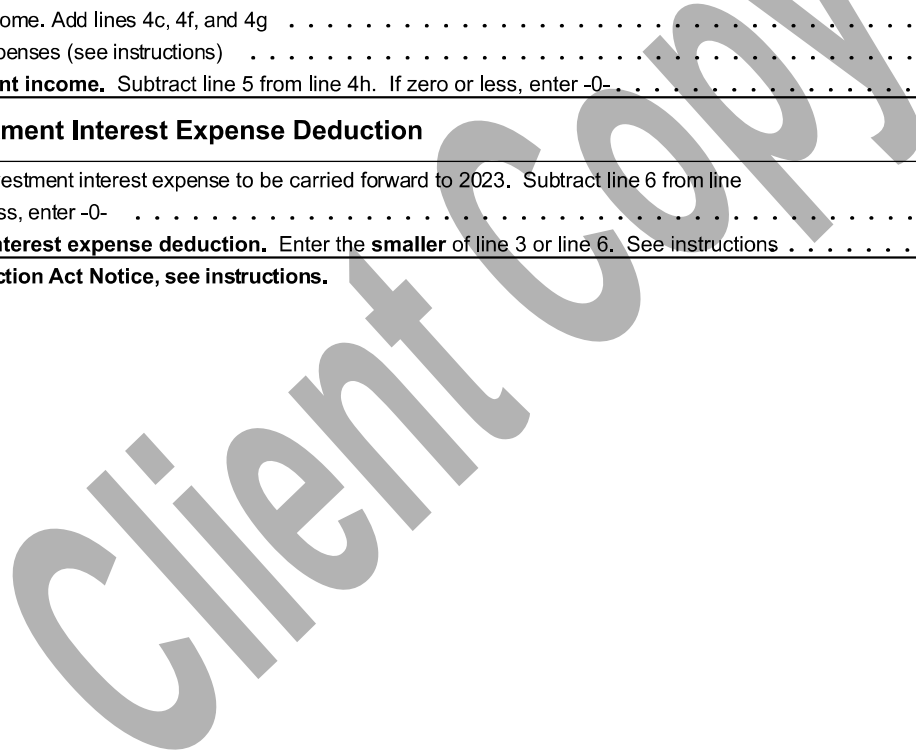
### Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) . . . . .	4a	5,133	
b	Qualified dividends included on line 4a . . . . .	4b	5,117	
c	Subtract line 4b from line 4a . . . . .	4c		16
d	Net gain from the disposition of property held for investment . . . . .	4d		
e	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . .	4e		
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 instructions . . . . .	4g		
h	Investment income. Add lines 4c, 4f, and 4g . . . . .	4h		16
5	Investment expenses (see instructions) . . . . .	5		
6	<b>Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0- . . . . .	6		16

### Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line 3. If zero or less, enter -0- . . . . .	7	2
8	<b>Investment interest expense deduction.</b> Enter the <b>smaller</b> of line 3 or line 6. See instructions . . . . .	8	16

For Paperwork Reduction Act Notice, see instructions.



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

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions.

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

712-21-6473

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

Table with 13 rows for HSA contributions and deductions. Includes checkboxes for Self-only and Family coverage. Values include 7,300 for lines 3, 5, 6, 8, 11, and 13.

Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

Table with 7 rows for HSA distributions. Values include 1,389 for lines 14a, 14c, 15, and 17b, and 0 for line 16.

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

Table with 4 rows for income and tax. Values include 18, 19, 20, and 21.

**Qualified Business Income Deduction  
Simplified Computation**

**2022**

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.  
Go to [www.irs.gov/Form8995](http://www.irs.gov/Form8995) for instructions and the latest information.

Attachment  
Sequence No. **55**

Name(s) shown on return

Your taxpayer identification number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

**Note.** You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.  
Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	Schedule C: NEWERA-SOFTSOLUTIONS LLC	86-2380346	(7,068)
ii	Schedule C: NEWERA-SOFTSOLUTIONS LLC	86-2380346	(7,068)
iii			
iv			
v			
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 (14,136)	
3	Qualified business net (loss) carryforward from the prior year	3 (3,780)	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4 0	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5 0
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 0	
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 ( )	
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8 0	
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9 0
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10 0
11	Taxable income before qualified business income deduction (see instructions)	11 212,648	
12	Net capital gain (see instructions)	12 26,187	
13	Subtract line 12 from line 11. If zero or less, enter -0-	13 186,461	
14	Income limitation. Multiply line 13 by 20% (0.20)		14 37,292
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)		15 0
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-		16 (17,916)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-		17 (0)

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

Form **8995** (2022)

EEA

Amount from Form 1040, line 11..... 241,689  
Amount from Form 1040, line 12..... 29,041

Line 11 above is the difference between these amounts..... 212,648

## Paid Preparer's Due Diligence Checklist

*Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),  
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and  
Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status*  
**To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.  
Go to [www.irs.gov/Form8867](http://www.irs.gov/Form8867) for instructions and the latest information.**

Taxpayer name(s) shown on return <b>JANARDHANARAO &amp; SIVEKOTESWARAMMA CHAKKA</b>	Taxpayer identification number <b>712-21-6473</b>
Preparer's name <b>SAI TEJA KUKUDALA</b>	Preparer tax identification number <b>P02383770</b>

### Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply).  EIC  CTC/ACTC/ODC  AOTC  HOH

	Yes	No	N/A
<b>1</b> Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you? (See instructions if relying on prior year earned income.) . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2</b> If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s) . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4</b> Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>a</b> Did you make reasonable inquiries to determine the correct, complete, and consistent information? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.) . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5</b> Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s) . . . . . List those documents provided by the taxpayer, if any, that you relied on: _____ _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6</b> Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7</b> Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year? . . . . . <b>(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>a</b> Did you complete the required recertification Form 8862? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>8</b> If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part II</b>	<b>Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)</b>		
	Yes	No	N/A
<b>9a</b> Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? <b>(If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)</b> . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b> Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part III</b>	<b>Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)</b>		
	Yes	No	N/A
<b>10</b> Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11</b> Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>12</b> Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part IV</b>	<b>Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)</b>	
	Yes	No
<b>13</b> Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

<b>Part V</b>	<b>Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)</b>	
	Yes	No
<b>14</b> Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

**Part VI Eligibility Certification**

**You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:**

- A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);
- B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- C. Submit Form 8867 in the manner required; **and**
- D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under *Document Retention*.
  - 1. A copy of this Form 8867.
  - 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
  - 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
  - 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
  - 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

**If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).**

<b>15</b> Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete? . . . . .	Yes	No
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions.  
 Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.  
 Go to [www.irs.gov/Form8959](http://www.irs.gov/Form8959) for instructions and the latest information.

Name(s) shown on return

Your social security number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

**Part I Additional Medicare Tax on Medicare Wages**

1 Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5 . . . . .	1	250,122		
2 Unreported tips from Form 4137, line 6 . . . . .	2			
3 Wages from Form 8919, line 6 . . . . .	3			
4 Add lines 1 through 3 . . . . .	4	250,122		
5 Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying surviving spouse . . . . . \$200,000	5	250,000		
6 Subtract line 5 from line 4. If zero or less, enter -0- . . . . .	6			122
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II . . . . .	7			1

**Part II Additional Medicare Tax on Self-Employment Income**

8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) . . . . .	8			
9 Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying surviving spouse . . . . . \$200,000	9			
10 Enter the amount from line 4 . . . . .	10			
11 Subtract line 10 from line 9. If zero or less, enter -0- . . . . .	11			
12 Subtract line 11 from line 8. If zero or less, enter -0- . . . . .	12			
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III . . . . .	13			

**Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation**

14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions) . . . . .	14			
15 Enter the following amount for your filing status: Married filing jointly . . . . . \$250,000 Married filing separately . . . . . \$125,000 Single, Head of household, or Qualifying surviving spouse . . . . . \$200,000	15			
16 Subtract line 15 from line 14. If zero or less, enter -0- . . . . .	16			
17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV . . . . .	17			

**Part IV Total Additional Medicare Tax**

18 Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V . . . . .	18			1
--	----	--	--	---

**Part V Withholding Reconciliation**

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6 . . . . .	19	4,078		
20 Enter the amount from line 1 . . . . .	20	250,122		
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages . . . . .	21	3,627		
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages . . . . .	22			451
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions) . . . . .	23			
24 <b>Total Additional Medicare Tax withholding.</b> Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions) . . . . .	24			451

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

# IRS e-file Signature Authorization

OMB No. 1545-0074

**2022**

- ▶ ERO must obtain and retain completed Form 8879.
- ▶ Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name <b>JANARDHANARAO CHAKKA</b>	Social security number <b>712-21-6473</b>
Spouse's name <b>SIVEKOTESWARAMMA CHAKKA</b>	Spouse's social security number <b>656-85-8761</b>

**Part I Tax Return Information - Tax Year Ending December 31, 2022** (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

**Note:** Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1 Adjusted gross income	1	241,689
2 Total tax	2	32,351
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	35,816
4 Amount you want refunded to you	4	3,465
5 Amount you owe	5	

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

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

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

Refund will be deposited to: RTN=125000024 Acct=138130539287

I authorize UPSILON TAX LLC to enter or generate my PIN 90467 as my signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

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

I authorize UPSILON TAX LLC to enter or generate my PIN 58629 as my signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

Enter five digits, but don't enter all zeros

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ \_\_\_\_\_ 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. 561678-13246  
 Don't enter all zeros

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

ERO's signature ▶ SAI TEJA KUKUDALA Date ▶ 04-18-2023

**ERO Must Retain This Form - See Instructions  
 Don't Submit This Form to the IRS Unless Requested To Do So**



**Elections**

(This page is e-filed with the return. Include it if paper-filing.)

**2022** PG01

Name(s) as shown on return

Your Social Security Number

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

712-21-6473

Title: Section 1.263(a)-1(f) de minimis safe harbor election  
Name: JANARDHANARAO CHAKKA  
Address: 19017 WAXEN RD UNIT A, BOTHELL, WA 98012  
TIN: 712-21-6473  
Statement: Taxpayer is making the de minimis safe harbor election under Section 1.263(a)-1(f).

Client Copy

**Elections**

(This page is e-filed with the return. Include it if paper-filing.)

**2022** PG02

Name(s) as shown on return

Your Social Security Number

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

712-21-6473

Title: Section 1.263(a)-1(f) de minimis safe harbor election

Name: SIVEKOTESWARAMMA CHAKKA

Address: 19017 WAXEN RD UNIT A, BOTHELL, WA 98012

TIN: 656-85-8761

Statement: Taxpayer is making the de minimis safe harbor election under Section 1.263(a)-1(f).

Client Copy



**Federal Income Tax Withheld**

(This page is not filed with the return. It is for your records only.)

**2022 PG01**

Name(s) as shown on return

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

Tax ID Number

**712-21-6473**

Description

Amount

**W2 - MICROSOFT CORPORATION**

35,365

**W-2 Subtotal**

35,365

**Form 8959**

451

**Other Withholding Subtotal**

451

**Total Withholdings**

35,816

Client Copy

		<b>a</b> Employee's social security number <b>712-21-6473</b>		OMB No. 1545-0008		Safe, accurate, FAST! Use		IRS e-file		Visit the IRS website at www.irs.gov/efile	
<b>b</b> Employer identification number (EIN) <b>91-1144442</b>				<b>1</b> Wages, tips, other compensation <b>229,622</b>		<b>2</b> Federal income tax withheld <b>35,365</b>					
<b>c</b> Employer's name, address, and ZIP code <b>MICROSOFT CORPORATION</b>  <b>1 MICROSOFT WAY</b> <b>REDMOND WA 980526399</b>				<b>3</b> Social security wages <b>147,000</b>		<b>4</b> Social security tax withheld <b>9,114</b>					
				<b>5</b> Medicare wages and tips <b>250,122</b>		<b>6</b> Medicare tax withheld <b>4,078</b>					
				<b>7</b> Social security tips		<b>8</b> Allocated tips					
<b>d</b> Control number				<b>9</b>		<b>10</b> Dependent care benefits					
<b>e</b> Employee's first name and initial <b>JANARDHANA RAO CHAKKA</b>  <b>19017 WAXEN RD UNIT A</b> <b>BOTHELL WA 98012</b>  <b>f</b> Employee's address and ZIP code				<b>11</b> Nonqualified plans		<b>12a</b> See instructions for box 12 <b>C</b>   <b>376</b>					
				<b>13</b> Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		<b>12b</b>   <b>20,500</b>					
				<b>14</b> Other		<b>12c</b>   <b>7,300</b>					
						<b>12d</b>   <b>19,800</b>					
<b>15</b> State		<b>16</b> State wages, tips, etc.		<b>17</b> State income tax		<b>18</b> Local wages, tips, etc.		<b>19</b> Local income tax		<b>20</b> Locality name	

Form **W-2** Wage and Tax Statement

**2022**

Department of the Treasury-Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return.  
This information is being furnished to the Internal Revenue Service.

EEA The information on this Form W-2 was used to prepare the taxpayer's 2022 Federal tax return by UPSILON TAX LLC

Client Copy

## Computation of Regular Tax

(This page is not filed with the return. It is for your records only.)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

### STATEMENT FOR LINE 16 OF FORM 1040

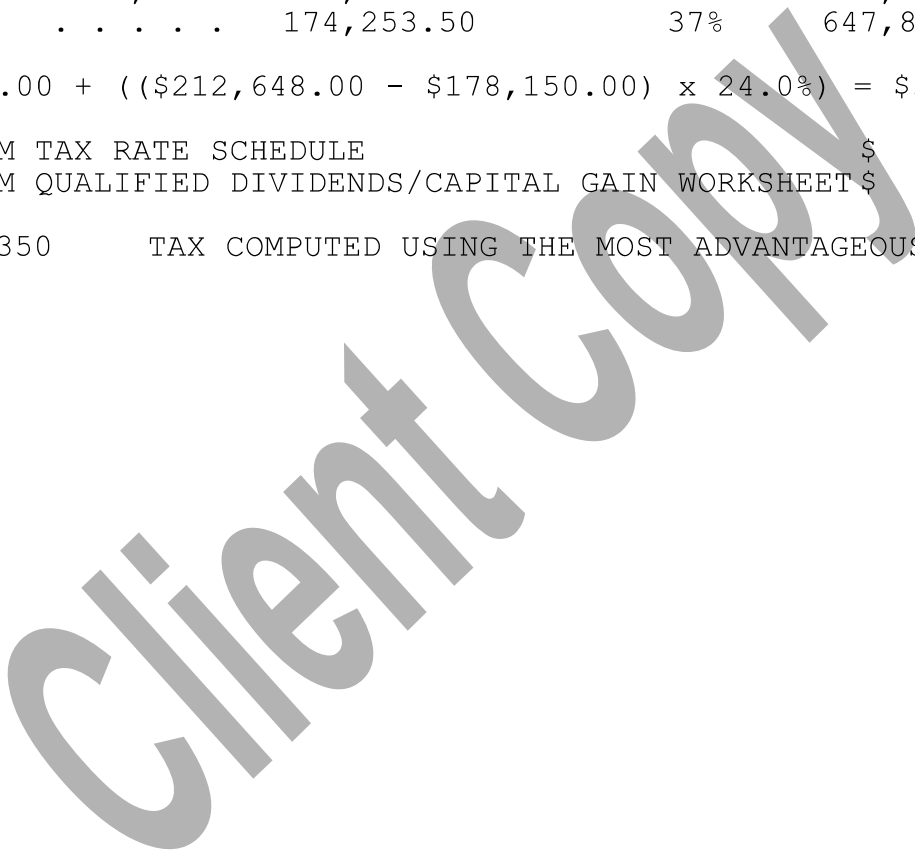
TAX RATE SCHEDULE FOR MARRIED FILING JOINT FILING STATUS  
IF TAXABLE INCOME IS

OVER	BUT NOT OVER	PAY	PLUS	% ON EXCESS	OF THE AMOUNT OVER
0	20,550	0.00		10%	0
20,550	83,550	2,055.00		12%	20,550
83,550	178,150	9,615.00		22%	83,550
<b>178,150</b>	<b>340,100</b>	<b>30,427.00</b>		<b>24%</b>	<b>178,150</b>
340,100	431,900	69,295.00		32%	340,100
431,900	647,850	98,671.00		35%	431,900
647,850	. . . . .	174,253.50		37%	647,850

$$\$30,427.00 + ((\$212,648.00 - \$178,150.00) \times 24.0\%) = \$38,707$$

TAX FROM TAX RATE SCHEDULE	\$ 38,707
TAX FROM QUALIFIED DIVIDENDS/CAPITAL GAIN WORKSHEET	\$ 36,350

\$ 36,350      TAX COMPUTED USING THE MOST ADVANTAGEOUS METHOD ALLOWED



# Schedule D Tax Worksheet

(Keep for Your Records)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

**Complete this worksheet only if line 18 or line 19 of Schedule D is more than zero and lines 15 and 16 of Schedule D are gains or if you file Form 4952 and you have an amount on line 4g, even if you don't need to file Schedule D. Otherwise, complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16, (or in the instructions for Form 1040-NR, line 16) to figure your tax. Before completing this worksheet, complete Form 1040, 1040-SR, or 1040-NR through line 15.**

**Exception: Don't** use the Qualified Dividends and Capital Gain Tax Worksheet or this worksheet to figure your tax if:

- Line 15 or line 16 of Schedule D is zero or less **and** you have no qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a; **or**
  - Form 1040, 1040-SR, or 1040-NR, line 15, is zero or less.
- Instead, see the instructions for Form 1040, line 16 (or Form 1040-NR, line 16).

1. Enter your taxable income from Form 1040, 1040-SR, or 1040-NR, line 15. (However, if you are filing Form 2555 (relating to foreign earned income), enter instead the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions for Form 1040, line 16.) . . . . .	<b>1.</b>		<b>212,648</b>
2. Enter your qualified dividends from Form 1040, 1040-SR, or 1040-NR, line 3a . . . . .	<b>2.</b>	<b>5,117</b>	
3. Enter the amount from Form 4952 (used to figure investment interest expense deduction), line 4g . . . . .	<b>3.</b>		
4. Enter amount from Form 4952, line 4e* . . . . .	<b>4.</b>		
5. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5.</b>		
6. Subtract line 5 from line 2. If zero or less, enter -0-**. . . . .	<b>6.</b>	<b>5,117</b>	
7. Enter the <b>smaller</b> of line 15 or line 16 of Sch. D . . . . .	<b>7.</b>	<b>21,070</b>	
8. Enter the <b>smaller</b> of line 3 or line 4 . . . . .	<b>8.</b>		
9. Subtract line 8 from line 7. If zero or less, enter -0-**. . . . .	<b>9.</b>	<b>21,070</b>	
10. Add lines 6 and 9 . . . . .	<b>10.</b>	<b>26,187</b>	
11. Add lines 18 and 19 of Schedule D**. . . . .	<b>11.</b>		
12. Enter the <b>smaller</b> of line 9 or line 11 . . . . .	<b>12.</b>		
13. Subtract line 12 from line 10 . . . . .	<b>13.</b>	<b>26,187</b>	
14. Subtract line 13 from line 1. If zero or less, enter -0- . . . . .	<b>14.</b>	<b>186,461</b>	
15. Enter:			
• \$41,675 if single or married filing separately;			
• \$83,350 if married filing jointly or qualifying widow(er); or	<b>15.</b>	<b>83,350</b>	
• \$55,800 if head of household.			
16. Enter the <b>smaller</b> of line 1 or line 15 . . . . .	<b>16.</b>	<b>83,350</b>	
17. Enter the <b>smaller</b> of line 14 or line 16 . . . . .	<b>17.</b>	<b>83,350</b>	
18. Subtract line 10 from line 1. If zero or less, enter -0- . . . . .	<b>18.</b>	<b>186,461</b>	
19. Enter the <b>smaller</b> of line 1 or:			
• \$170,050 if single or married filing separately;			
• \$340,100 if married filing jointly or qualifying widow(er); or	<b>19.</b>	<b>212,648</b>	
• \$170,050 if head of household.			
20. Enter the <b>smaller</b> of line 14 or line 19 . . . . .	<b>20.</b>	<b>186,461</b>	
21. Enter the <b>larger</b> of line 18 or line 20 . . . . .	<b>21.</b>	<b>186,461</b>	
22. Subtract line 17 from line 16. This amount is taxed at 0% . . . . .	<b>22.</b>		
<b>If lines 1 and 16 are the same, skip lines 23 through 43 and go to line 44. Otherwise, go to line 23.</b>			
23. Enter the <b>smaller</b> of line 1 or line 13 . . . . .	<b>23.</b>	<b>26,187</b>	
24. Enter the amount from line 22. (If line 22 is blank, enter -0-.) . . . . .	<b>24.</b>		
25. Subtract line 24 from line 23. If zero or less, enter -0- . . . . .	<b>25.</b>	<b>26,187</b>	
26. Enter:			
• \$459,750 if single;			
• \$258,600 if married filing separately;			
• \$517,200 if married filing jointly or qualifying widow(er); or	<b>26.</b>	<b>517,200</b>	
• \$488,500 if head of household.			
27. Enter the smaller of line 1 or line 26 . . . . .	<b>27.</b>	<b>212,648</b>	
28. Add lines 21 and 22 . . . . .	<b>28.</b>	<b>186,461</b>	
29. Subtract line 28 from line 27. If zero or less, enter -0- . . . . .	<b>29.</b>	<b>26,187</b>	
30. Enter the <b>smaller</b> of line 25 or line 29 . . . . .	<b>30.</b>	<b>26,187</b>	

## Schedule D Tax Worksheet - Continued

(Keep for your records)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

31. Multiply line 30 by 15% (0.15) . . . . .	31.	3,928
32. Add lines 24 and 30 . . . . .	32.	26,187
<b>If lines 1 and 32 are the same, skip lines 33 through 43 and go to line 44. Otherwise, go to line 33.</b>		
33. Subtract line 32 from line 23 . . . . .	33.	
34. Multiply line 33 by 20% (0.20) . . . . .	34.	
<b>If Schedule D, line 19, is zero or blank, skip lines 35 through 40 and go to line 41. Otherwise, go to line 35.</b>		
35. Enter the <b>smaller</b> of line 9 above or Schedule D, line 19 . . . . .	35.	
36. Add lines 10 and 21 . . . . .	36.	
37. Enter the amount from line 1 above . . . . .	37.	
38. Subtract line 37 from line 36. If zero or less, enter -0- . . . . .	38.	
39. Subtract line 38 from line 35. If zero or less, enter -0- . . . . .	39.	
40. Multiply line 39 by 25% (0.25) . . . . .	40.	
<b>If Schedule D, line 18, is zero or blank, skip lines 41 through 43 and go to line 44. Otherwise, go to line 41.</b>		
41. Add lines 21, 22, 30, 33, and 39 . . . . .	41.	
42. Subtract line 41 from line 1 . . . . .	42.	
43. Multiply line 42 by 28% (0.28) . . . . .	43.	
44. Figure the tax on the amount on <b>line 21</b> . If the amount on line 21 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 21 is \$100,000 or more, use the Tax Computation Worksheet . . . . .	44.	32,422
45. Add lines 31, 34, 40, 43, and 44 . . . . .	45.	36,350
46. Figure the tax on the amount on <b>line 1</b> . If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet . . . . .	46.	38,707
47. <b>Tax on all taxable income (including capital gains and qualified dividends)</b> . Enter the <b>smaller</b> of line 45 or line 46. Also, include this amount on Form 1040, 1040-SR, or 1040-NR, line 16. (If you are filing Form 2555, don't enter this amount on Form 1040 or 1040-SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet in the Instructions for Form 1040.) . . . . .	47.	36,350

\*If applicable, enter instead the smaller amount you entered on the dotted line next to line 4e of Form 4952.

\*\*If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet in the instructions for Form 1040, line 16, before completing this line.



Name(s) as shown on return

Tax ID Number

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

712-21-6473

Interest and Dividends

- 1. Enter any amount from Form 1040 or 1040-SR, line 2b ... 1. 15
2. Enter any amount from Form 1040 or 1040-SR, line 2a, plus any amount on Form 8814, line 1b ... 2.
3. Enter any amount from Form 1040 or 1040-SR, line 3b ... 3. 5,118
4. Enter the amount from Schedule 1 (Form 1040), line 8z, that is from Form 8814 if you are filing that form to report your child's interest and dividend income on your return. (If your child received an Alaska Permanent Fund dividend, use Worksheet 2, on the next page, to figure the amount to enter on this line.) ... 4.

Capital Gain Net Income

- 5. Enter the amount from Form 1040 or 1040-SR, line 7. If the amount on that line is a loss, enter -0- ... 5. 21,070
6. Enter any gain from Form 4797, Sales of Business Property, line 7. If the amount on that line is a loss, enter -0-. (But, if you completed lines 8 and 9 of Form 4797, enter the amount from line 9 instead.) ... 6.
7. Subtract line 6 of this worksheet from line 5 of this worksheet. (If the result is less than zero, enter -0-.) ... 7. 21,070

Royalties and Rental Income From Personal Property

- 8. Enter any royalty income from Schedule E, line 4, plus any income from the rental of personal property shown on Schedule 1 (Form 1040), line 8l. Subtract any expenses from Schedule E, line 20 related to royalty income, and any expenses from the rental of personal property deducted on Schedule 1, line 24z. (If the result is less than zero, enter -0-) ... 8.

Passive Activities

- 9. Enter the total of any net income from passive activities (such as income included on Schedule E, lines 26, 29a (col. (h)), 34a (col. (d)), or 40) and the total of any losses from passive activities (included on Schedule E, lines 26, 29b (col. (g)), 34b (col. (c)), or 40). (See instructions below for line 9.) (if zero or less, enter -0-) ... 9. 0
10. Adjustment from EIC screen ... 10.
11. Add the amounts on lines 1, 2, 3, 4, 7, 8, 9 and 10. Enter the total. This is your Investment Income ... 11. 26,203
12. Is the amount on line 11 more than \$10,300?
[X] Yes. You can't take the credit.
[ ] No. Go to Step 3 of the Form 1040 and 1040-SR instructions for line 27 to find out if you can take the credit (unless you are using this publication to find out if you can take the credit; in that case, go to Rule 7, next).

Instructions for line 9. In figuring the amount to enter on line 9, don't take into account any royalty income (or loss) included on line 26 of Schedule E or any amount included in your earned income. To find out if the income on line 26 or line 40 of Schedule E is from a passive activity, see the Schedule E instructions. If any of the rental real estate income (or loss) included on Schedule E, line 26, isn't from a passive activity, enter "NPA" and the amount of that income (or loss) on the dotted line next to line 26.

## State and Local General Sales Tax Deduction Worksheet - Line 5a

(This page is not filed with the return. It is for your records only.)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

**Before you begin:** See the instructions for line 1 of the worksheet if you:

- Lived in more than one state during 2022, or
- Had any **nontaxable** income in 2022.

1. Enter your **state** general sales taxes from the 2022 Optional State Sales Tax Table . . . . . **1.** 1,885

**Next.** If, for all of 2022, you lived only in Connecticut, the District of Columbia, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Jersey, or Rhode Island, skip lines 2 through 5, enter -0- on line 6, and go to line 7. Otherwise, go to line 2.

2. Did you live in Alaska, Arizona, Arkansas, Colorado, Georgia, Illinois, Louisiana, Mississippi, Missouri, New York, North Carolina, South Carolina, Tennessee, Utah, or Virginia in 2022?

- No.** Enter -0-.
- Yes.** Enter your base **local** general sales taxes from the 2022 Optional Local Sales Tax Tables. . . . . **2.** \_\_\_\_\_

3. Did your locality impose a **local** general sales tax in 2022? Residents of California and Nevada, see the instructions for line 3 of the worksheet.

- No.** Skip lines 3 through 5, enter -0- on line 6, and go to line 7.
- Yes.** Enter your **local** general sales tax rate, but omit the percentage sign. For example, if your local general sales tax rate was 2.5%, enter 2.5. If your local general sales tax rate changed or you lived in more than one locality in the same state during 2022, see the instructions for line 3 of the worksheet . . . . . **3.** \_\_\_\_\_

4. Did you enter -0- on line 2?

- No.** Skip lines 4 and 5 and go to line 6.
- Yes.** Enter your **state** general sales tax rate (shown in the table heading for your state), but omit the percentage sign. For example, if your state general sales tax rate is 6%, enter 6.0 . . . . . **4.** \_\_\_\_\_

5. Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places) . . . . . **5.** \_\_\_\_\_

6. Did you enter -0- on line 2?

- No.** Multiply line 2 by line 3.
- Yes.** Multiply line 1 by line 5. If you lived in more than one locality in the same state during 2022, see the instructions for line 6 of the worksheet. . . . . **6.** \_\_\_\_\_

7. Enter your state and local general sales taxes paid on specified items, if any. See the instructions for line 7 of the worksheet . . . . . **7.** \_\_\_\_\_

8. **Deduction for general sales taxes.** Add lines 1, 6, and 7. Enter the result here and the total from all your state and local general sales tax deduction worksheets, if you completed more than one, on Schedule A, line 5a.

Be sure to check the **box** on that line . . . . . **8.** 1,885

**Optional Sales Tax Table Computation**

State: **WA**

Income:	241,689			
Family Size:*	4			
Amount from table:	1,885			
Days:	365			
Deduction:	1,885			

\* "Over 5" is the maximum number in family size for the optional sales tax tables in Schedule A Instructions. Returns with a family size of 6 or more will display a "6" on this line.

# IRA Deduction Worksheet - Schedule 1, Line 20

**Form 1040**

(This page is not filed with the return. It is for your records only.)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARANMA CHAKKA**

**712-21-6473**

**Before you begin:**

- Be sure you have read the instructions for this line. You may not be able to use this worksheet.
- Figure any write-in adjustments to be entered on Schedule 1, line 24z (see the instructions for Schedule 1, line 24z).
- If you are married filing separately and you lived apart from your spouse for all of 2022, enter "D" on the dotted line next to Schedule 1, line 20. If you don't, you may get a math error notice from the IRS.

	Your IRA	Spouse's IRA
<b>1a.</b> Were you covered by a retirement plan (see <i>Were You Covered by a Retirement Plan?</i> )? . . . . .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>b.</b> If married filing jointly, was your spouse covered by a retirement plan? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p><b>Next.</b> If you checked "No" on line 1a (and "No" on line 1b if married filing jointly), skip lines 2 through 6, enter the applicable amount below on line 7a (and line 7b, if applicable), and go to line 8.</p> <ul style="list-style-type: none"> <li>• \$6,000, if under age 50 at the end of 2022.</li> <li>• \$7,000, if age 50 or older at the end of 2022.</li> </ul> <p>Otherwise, go to line 2.</p>		
<b>2.</b> Enter the amount shown below that applies to you.		
<ul style="list-style-type: none"> <li>• Single, head of household, or married filing separately and you <b>lived apart</b> from your spouse for all of 2022, enter \$78,000.</li> <li>• Qualifying surviving spouse, enter \$129,000.</li> <li>• Married filing jointly, enter \$129,000 in both columns. But if you checked "No" on either line 1a or 1b, enter \$214,000 for the person who wasn't covered by a plan.</li> <li>• Married filing separately and you lived with your spouse at any time in 2022, enter \$10,000.</li> </ul>	<b>2a.</b> <u>129,000</u>	<b>2b.</b> <u>214,000</u>
<b>3.</b> Enter the amount from Form 1040 or 1040-SR, line 9 . . . . .	<b>3.</b> <u>241,689</u>	
<b>4.</b> Enter the total of the amounts from Schedule 1, lines 11 through 19a, plus 23 and 25 . . . . .	<b>4.</b> _____	
<b>5.</b> Subtract line 4 from line 3. If married filing jointly, enter the result in both columns. . . . .	<b>5a.</b> <u>241,689</u>	<b>5b.</b> <u>241,689</u>
<b>6.</b> Is the amount on line 5 less than the amount on line 2?		
<input checked="" type="checkbox"/> <b>No. STOP!</b> None of your IRA contributions are deductible. For details on nondeductible IRA contributions, see Form 8606.		
<input type="checkbox"/> <b>Yes.</b> Subtract line 5 from line 2 in each column. Follow the instruction below that applies to you.		
<ul style="list-style-type: none"> <li>• If single, head of household, or married filing separately, and the result is \$10,000 or more, enter the applicable amount below on line 7 for that column and go to line 8.                             <ul style="list-style-type: none"> <li>i. \$6,000, if under age 50 at the end of 2022.</li> <li>ii. \$7,000, if age 50 or older at the end of 2022.</li> </ul> </li> <li>If the result is less than \$10,000, go to line 7.</li> <li>• If married filing jointly or qualifying surviving spouse, and the result is \$20,000 or more (\$10,000 or more in the column for the IRA of a person who wasn't covered by a retirement plan), enter the applicable amount below on line 7 for that column and go to line 8.                             <ul style="list-style-type: none"> <li>i. \$6,000, if under age 50 at the end of 2022.</li> <li>ii. \$7,000 if age 50 or older at the end of 2022.</li> </ul> </li> </ul> <p>Otherwise, go to line 7.</p>	<b>6a.</b> _____	<b>6b.</b> _____

## IRA Deduction Worksheet - Continued

**Form 1040**

(This page is not filed with the return. It is for your records only.)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**Your IRA**

**Spouse's IRA**

7. Multiply lines 6a and 6b by the percentage below that applies to you. If the result isn't a multiple of \$10, increase it to the next multiple of \$10 (for example, increase \$490.30 to \$500). If the result is \$200 or more, enter the result. But if it is less than \$200, enter \$200.

- Single, head of household, or married filing separately, multiply by 60% (0.60) (or by 70% (0.70) in the column for the IRA of a person who is age 50 or older at the end of 2022).
- Married filing jointly or qualifying surviving spouse, multiply by 30% (0.30) (or by 35% (0.35) in the column for the IRA of a person who is age 50 or older at the end of 2022). But if you checked "No" on either line 1a or 1b, then in the column for the IRA of the person who wasn't covered by a retirement plan, multiply by 60% (0.60) (or by 70% (0.70) if age 50 or older at the end of 2022).

7a. \_\_\_\_\_ 7b. \_\_\_\_\_

8. Enter the total of your (and your spouse's if filing jointly):

- Wages, salaries, tips, etc. Generally, this is the amount reported in box 1 of Form W-2. Exceptions are explained earlier in these instructions for line 20.
- Alimony and separate maintenance payments reported on Schedule 1, line 2a.
- Nontaxable combat pay. This amount should be reported in box 12 of Form W-2 with code Q or reported on Form 1040, line 1i.

8. 229,622

9. Enter the earned income you (and your spouse if filing jointly) received as a self-employed individual or a partner. Generally, this is your (and your spouse's if filing jointly) net earnings from self-employment if your personal services were a material income-producing factor, minus any deductions on Schedule 1, lines 15 and 16. If zero or less, enter -0-. For more details, see Pub. 590-A . . . . . 9.

9. \_\_\_\_\_

10. Add lines 8 and 9 . . . . . 10. 229,622

**CAUTION!** *If married filing jointly and line 10 is less than \$12,000 (\$13,000 if one spouse is age 50 or older at the end of 2022; \$14,000 if both spouses are age 50 or older at the end of 2022), stop here and use the worksheet in Pub. 590-A to figure your IRA deduction.*

11. Enter traditional IRA contributions made, or that will be made by the due date of your 2022 return not counting extensions (April 18, 2023, for most people), for 2022 to your IRA on line 11a and to your spouse's IRA on line 11b . . . . . 11a. \_\_\_\_\_ 11b. \_\_\_\_\_

12. On line 12a, enter the **smallest** of line 7a, 10, or 11a. On line 12b, enter the **smallest** of line 7b, 10, or 11b. This is the most you can deduct. Add the amounts on lines 12a and 12b and enter the total on Schedule 1, line 20. Or, if you want, you can deduct a smaller amount and treat the rest as a nondeductible contribution (see Form 8606) . . . . . 12a. \_\_\_\_\_ 12b. \_\_\_\_\_

Credit Limit Worksheet A

Schedule 8812

(This page is not filed with the return. It is for your records only.)

2022

Name(s) as shown on return

Tax ID Number

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

712-21-6473

Credit Limit Worksheet A

1. Enter the amount from Line 18 of your Form 1040, 1040-SR, or 1040-NR . . . . . 1. 36,350

2. Add the following amounts (if applicable) from:

- Schedule 3, Line 1
Schedule 3, Line 2
Schedule 3, Line 3
Schedule 3, Line 4
Schedule 3, line 6d
Schedule 3, line 6e
Schedule 3, line 6f
Schedule 3, line 6l
Form 5695, line 30

Enter the total. 2.

3. Subtract line 2 from line 1 . . . . . 3. 36,350

Complete Credit Limit Worksheet B only if you meet all of the following.

- 1. You are claiming one or more of the following credits.
a. Mortgage interest credit, Form 8396.
b. Adoption credit, Form 8839.
c. Residential clean energy credit, Form 5695, Part I.
d. District of Columbia first-time homebuyer credit, Form 8859.

- 2. You are not filing Form 2555.
3. Line 4 of Schedule 8812 is more than zero.

4. If you are not completing Credit Limit Worksheet B, enter -0-; otherwise, enter the amount from Credit Limit Worksheet B . . . . . 4. 0

5. Subtract line 4 from line 3. Enter here and on Schedule 8812, line 13 . . . . . 5. 36,350

# Carryover Worksheet

## List of items that will carryover to the 2023 tax return

(This page is not filed with the return. It is for your records only.)

**2022**

Name(s) as shown on return

Tax ID Number

**JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA**

**712-21-6473**

### Itemized Deductions

Carryover Amount

Contributions subject to 100% of AGI limitations . . . . .	_____
Contributions subject to 60% of AGI limitations . . . . .	_____
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property) . . . . .	_____
Contributions subject to 30% of AGI limitations . . . . .	_____
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property) . . . . .	_____
Taxable state and local refunds to Schedule 1 (Form 1040) line 1 . . . . .	_____
State/local taxes paid in 2023 to flow to the Schedule A . . . . .	_____
State donations and contributions carryover . . . . .	_____
State overpayment applied to next year . . . . .	_____

### Expenses

Office in home operating expenses . . . . .	_____
Office in home excess casualty losses and depreciation . . . . .	_____
Disallowed investment interest expense . . . . . AMT _____ 2 Reg. Tax _____ 2	_____
Section 179 expense . . . . .	_____
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use . . . . .	_____
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use . . . . .	_____

### Losses

Short-term capital loss . . . . . AMT _____ Reg. Tax _____	
Long-term capital loss . . . . . AMT _____ Reg. Tax _____	
Net operating loss . . . . . AMT _____ Reg. Tax _____	
Excess business loss from Form 461 (becomes part of NOL next year) . . . . . AMT _____ Reg. Tax _____	
Qualified REIT and PTP loss carryover . . . . .	_____
QBI loss carryover . . . . .	<b>17,916</b>
Nonrecaptured net section 1231 losses from WK_1231C . . . . . AMT _____ Reg. Tax _____	

### Credits

Mortgage interest credit . . . . .	_____
Credit for prior year minimum tax . . . . .	_____
Foreign Tax credit . . . . . AMT _____ Reg. Tax _____	
District of Columbia first time home owner's credit . . . . .	_____
Residential clean energy credit . . . . .	_____

### Other

Preparer Fee . . . . .	_____
Overpayment applied to next year's estimates . . . . .	_____
Estimated Tax Payment 1 _____ Estimated Tax Payment 2 _____	
Estimated Tax Payment 3 _____ Estimated Tax Payment 4 _____	
Federal tax liability for 2210 calculation . . . . .	<b>32,351</b>
State tax liability for state 2210 calculation . . . . .	_____
IRA basis . . . . . Taxpayer _____ Spouse _____	
Disaster distributions taxable in 2023 . . . . . Taxpayer _____ Spouse _____	
Disaster distributions taxable in 2024 . . . . . Taxpayer _____ Spouse _____	
Excess repayments from 8915-F . . . . . Taxpayer _____ Spouse _____	

### Passive Activity

_____	_____
-------	-------

### At Risk Limitations

_____	_____
-------	-------

**FOR ALT MIN TAX PURPOSES ONLY**  
**Investment Interest Expense Deduction**

Go to [www.irs.gov/Form4952](http://www.irs.gov/Form4952) for the latest information.  
**Attach to your tax return.**

Name(s) shown on return <b>JANARDHANARAO &amp; SIVEKOTESWARARMA CHAKKA</b>	Identifying number <b>712-21-6473</b>
---	--

**Part I Total Investment Interest Expense**

<b>1</b>	Investment interest expense paid or accrued in 2022 (see instructions)	<b>1</b>	<b>18</b>
<b>2</b>	Disallowed investment interest expense from 2021 Form 4952, line 7	<b>2</b>	
<b>3</b>	<b>Total investment interest expense.</b> Add lines 1 and 2	<b>3</b>	<b>18</b>

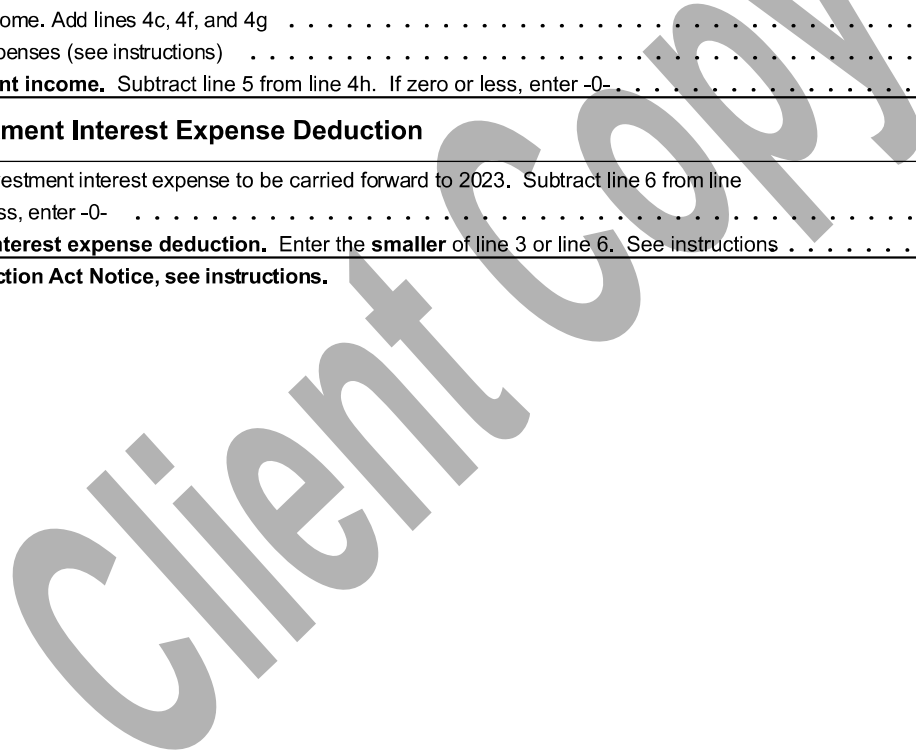
**Part II Net Investment Income**

<b>4a</b>	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	<b>4a</b>	<b>5,133</b>	
<b>b</b>	Qualified dividends included on line 4a	<b>4b</b>	<b>5,117</b>	
<b>c</b>	Subtract line 4b from line 4a	<b>4c</b>		<b>16</b>
<b>d</b>	Net gain from the disposition of property held for investment	<b>4d</b>		
<b>e</b>	Enter the <b>smaller</b> of line 4d or your net capital gain from the disposition of property held for investment. See instructions	<b>4e</b>		
<b>f</b>	Subtract line 4e from line 4d	<b>4f</b>		<b>0</b>
<b>g</b>	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions	<b>4g</b>		
<b>h</b>	Investment income. Add lines 4c, 4f, and 4g	<b>4h</b>		<b>16</b>
<b>5</b>	Investment expenses (see instructions)	<b>5</b>		
<b>6</b>	<b>Net investment income.</b> Subtract line 5 from line 4h. If zero or less, enter -0-	<b>6</b>		<b>16</b>

**Part III Investment Interest Expense Deduction**

<b>7</b>	Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line 3. If zero or less, enter -0-	<b>7</b>	<b>2</b>
<b>8</b>	<b>Investment interest expense deduction.</b> Enter the <b>smaller</b> of line 3 or line 6. See instructions	<b>8</b>	<b>16</b>

For Paperwork Reduction Act Notice, see instructions.



**TAX RETURN COMPARISON  
2020 / 2021 / 2022**

**2022**

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return <b>JANARDHANARAO &amp; SIVEKOTESWARANMA CHAKKA</b>		Identifying number 712-21-6473		
	2020	2021	2022	Difference 2021-2022
Filing Status . . . . .		Married Joint	Married Joint	
Number of Dependents . . . . .		2	2	
<b>Income</b>				
Wages, salaries, tips, etc. . . . .		222,720	229,622	6,902
Taxable interest and dividends . . . . .		4,265	5,133	868
Taxable state and local refunds . . . . .				
Alimony . . . . .				
Business income (loss) . . . . .			(14,136)	(14,136)
Gains (losses) . . . . .			21,070	21,070
Pensions and IRA distributions . . . . .				
Rent and royalty income (loss) . . . . .				
Part, S-corps, trusts income (loss) . . . . .		(3,780)		3,780
Farm income (loss) . . . . .				
Unemployment compensation . . . . .				
Total SS benefits received . . . . .				
Taxable SS benefits . . . . .				
Other income (loss) . . . . .				
<b>Total Income</b> . . . . .		223,205	241,689	18,484
<b>Adjusted Gross Income</b>				
Half of self-employment tax . . . . .				
IRA deduction . . . . .				
Other adjustments . . . . .				
<b>Total Adjusted Gross Income</b> . . . . .		223,205	241,689	18,484
<b>Deductions</b>				
Medical deductions . . . . .				
State and local taxes . . . . .		8,346	8,842	496
Interest . . . . .		12,584	15,089	2,505
Contributions . . . . .		6,500	5,110	(1,390)
Employee business expenses . . . . .				
Standard or other deductions . . . . .				
<b>Total deductions claimed</b> . . . . .		27,430	29,041	1,611
<b>Qualified Business Income Deduction</b> . . . . .				
<b>Tax and Credits</b>				
<b>Taxable Income</b> . . . . .		195,775	212,648	16,873
Tax . . . . .		34,644	36,350	1,706
Credits . . . . .		1	4,000	3,999
Self-employment tax . . . . .				
Other taxes . . . . .			1	1
<b>Total Tax</b> . . . . .		34,643	32,351	(2,292)
<b>Payments</b>				
Withholdings . . . . .		35,844	35,816	(28)
Estimated tax payments . . . . .				
Earned income credit . . . . .				
Other payments and credits . . . . .		1,930		(1,930)
Estimated tax penalty . . . . .				
<b>Overpayment</b> . . . . .		3,131	3,465	334
Overpayment Applied . . . . .				
<b>Refund</b> . . . . .		3,131	3,465	334
<b>Balance Due</b> . . . . .				
Marginal tax rate . . . . .		24.00	24.00	
Effective tax rate . . . . .		17.70	17.09	(0.61)



**Account Transaction Summary**

**2022**

Name(s) as shown on return

Your ID Number

JANARDHANARAO & SIVEKOTESWARAMMA CHAKKA

XXX-XX-6473

Account #1

**Financial Institution** BANK OF AMERICA  
**Routing Transit Number** 125000024  
**Account Number** 138130539287  
**Account Type** checking

Federal Main Form  
Federal Deposit 3,465

**Net Deposit** 3,465

Client Copy

PLEASE VERIFY BANK INFORMATION

- 1. Bank Name
- 2. Bank Routing Transit Number
- 3. Bank Account Number
- 4. Bank Account Type

**This information is used to deposit your refund or to pay any amount due. If you have provided incorrect information, or you have closed the account, you are responsible.**

I have reviewed the above information and certify that this information is correct and authorize UPSILON TAX LLC to use this account.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature (If Married Filing Jointly)

\_\_\_\_\_  
Date