8879 **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)	
Taxpayer's name	Social security number
RAMYA YADAV KAVUDA	058-41-4279
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 20	022 (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	
2 Total tax	
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	5
Part II Taxpayer Declaration and Signature Authorization (Be sure you Under penalties of perjury, I declare that I have examined a copy of the income tax return (original	
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in return (original or amended) I am now authorizing. I consent to allow my intermediate service proto send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or refor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I aut Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution payment of my federal taxes owed on this return and/or a payment of estimated tax, and the finar authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment can business days prior to the payment (settlement) date. I also authorize the financial institutions in taxes to receive confidential information necessary to answer inquiries and resolve issues relapersonal identification number (PIN) below is my signature for the income tax return (original or a Electronic Funds Withdrawal Consent.	vider, transmitter, or electronic return originator (ERO) eason for rejection of the transmission, (b) the reason thorize the U.S. Treasury and its designated Financial account indicated in the tax preparation software for incial institution to debit the entry to this account. This to terminate the authorization. To revoke (cancel) a cellation requests must be received no later than 2 volved in the processing of the electronic payment of ted to the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	or generate my PIN 1 4 2 7 9 as my
ERO firm name	Enter five digits, but don't enter all zeros
signature on the income tax return (original or amended) I am now authorizing.	
I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitione below.	
Your signature ▶	Date ►
Spouse's PIN: check one box only	
	or generate my PIN as my
ERO firm name	Enter five digits, but don't enter all zeros
signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amen if you are entering your own PIN and your return is filed using the Practitione below.	ded) I am now authorizing. Check this box only
Spouse's signature ▶	Date ▶
Practitioner PIN Method Returns Only—conti	
Part III Certification and Authentication — Practitioner PIN Method On	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN	. 2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that requirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Pinch Pi	at I am submitting this return in accordance with the
ERO's signature ▶	Date ▶
ERO Must Retain This Form — See Instru	

Don't Submit This Form to the IRS Unless Requested To Do So

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-007

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

Filing Status Check only one box.		Single Married filing jointly uchecked the MFS box, enter the n	_	ed filing separately (Noor spouse. If you ch		_				spou	ifying sur Ise (QSS) name if t		
	-	on is a child but not your dependent	-	, ,			,						, ,
Your first name	and mi	ddle initial	Last nar	me					Yo	ur so	cial securi	ty nur	nber
RAMYA YA	ADAV		KAVU	DA					0.5	58-4	11-427	9	
If joint return, s	pouse's	first name and middle initial	Last nar	me					Sp	ouse's	s social se	curity	number
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.			Apt. no.		Pro	esider	ntial Electi	on Ca	ampaign
10010 SI	KINNE	ER LAKE DRIVE					1624				ere if you		
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	paces below.	Stat	е	ZIP code				if filing joir this fund.		
JACKSON	/ILLE	3			FL		32246				ow will not		
Foreign countr	y name		F	Foreign province/state/o	count	У	Foreign postal	coc	е уо	ur tax	or refund		
											You		Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a			-		-				Yes	X	No
Standard		eone can claim: You as a de					, (
Deduction		Spouse itemizes on a separate retur											
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before Jan	uar	/ 2, 19	958	☐ Is b	lind	
Dependent	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check	the	box if	qualif	ies for (see	instru	uctions):
If more	(1) Fi	rst name Last name		number		to you	Child	tax	credit		Credit for of	ther de	pendents
than four												<u> </u>	
dependents, see instruction	s ——							L				<u>Ш</u>	
and check	. —							Ļ				ᆜ	
here]							L					
Income	1a	Total amount from Form(s) W-2, b	,	,				٠		1a		14,	100.
Attach Form(s)	b	Household employee wages not reported on Form(s) W-2								1b			
W-2 here. Also	C	Tip income not reported on line 1a (see instructions)								1c			
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							•	1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26								1e			
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29								1f			
If you did not	g	Wages from Form 8919, line 6 .						٠	٠	1g			
get a Form W-2, see	h	Other earned income (see instruct	,			1	· · · ·	٠	٠	1h			0.
instructions.	ı	Nontaxable combat pay election (see instr	ructions)		<u>1i</u>						1 1	1 0 0
	<u>z</u>	Add lines 1a through 1h		<u>.</u> .					٠	1z		<u> 14,</u>	100.
Attach Sch. B if required.	2a	' <u>-</u>	2a			axable interest		٠	•	2b			0.6
ii required.	3a	· ·	3a			rdinary divide				3b			26.
	4a		4a			axable amoun				4b			
Standard Deduction for—	5a	_	5a			axable amoun				5b			
Single or	6a	,	6a			axable amoun			Ė	6b			
Married filing separately,	_ C	If you elect to use the lump-sum e			•	•		٠					
\$12,950	7	Capital gain or (loss). Attach Sche						٠	Ш	7			737.
Married filing jointly or	8	Other income from Schedule 1, lin						٠	•	8			816.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		=				٠	٠	9	+ -1	∪ 3,	573.
\$25,900	10	Adjustments to income from Sche						٠	•	10			
Head of household,	11	Subtract line 10 from line 9. This is						•	•	11	1		<u>573.</u>
\$19,400	12	Standard deduction or itemized						٠	•	12	1	<u> 12, </u>	950.
If you checked any box under	13	Qualified business income deduct						٠	•	13		1 2	0.5.0
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If zer						٠	•	15			950.
see instructions.	13	Subtract line 14 HOITI IIIIE 11. II ZE	0 01 1633	3, GIRGI -0 IIIIS IS Y	oui L	uxabic IIICUII	ie	•	•	13		<i>1</i> ∪ , (623.

			Pa	age	e 2	2
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						-
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1	8,	8	7	1	_	-
	8, 3, 3,	2	8	5		-
	3,	2	8	5		_
						-
						_
X No						

Form 1040 (2022) **Tax** (see instructions). Check if any from Form(s): **1** 8814 **2** 4972 3 16 16 Tax and **Credits** 17 Amount from Schedule 2, line 3 17 Add lines 16 and 17 18 18 19 Child tax credit or credit for other dependents from Schedule 8812 19 20 Amount from Schedule 3, line 8 20 21 Add lines 19 and 20 21 22 Subtract line 21 from line 18. If zero or less, enter -0-22 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23 Add lines 22 and 23. This is your total tax 24 24 **Payments** 25 Federal income tax withheld from: 18,871. Form(s) W-2 . 25a а Form(s) 1099 25b b Other forms (see instructions) 25c С 25d d Add lines 25a through 25c 26 2022 estimated tax payments and amount applied from 2021 return 26 If you have a 27 Earned income credit (EIC) 27 qualifying child, attach Sch. EIC. 28 Additional child tax credit from Schedule 8812 28 29 American opportunity credit from Form 8863, line 8. 29 30 30 31 Amount from Schedule 3, line 15 31 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 25d, 26, and 32. These are your total payments 33 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 Refund Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 35a Routing number 1 1 1 1 0 0 0 0 2 5 Direct deposit? b **c** Type: X Checking Savings See instructions. Account number 5 8 6 0 3 5 2 3 6 2 3 d 36 Amount of line 34 you want applied to your 2023 estimated tax . . . 36 Amount 37 Subtract line 33 from line 24. This is the amount you owe. You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions . 37 Estimated tax penalty (see instructions) Third Party Do you want to allow another person to discuss this return with the IRS? See instructions Yes. Complete below. Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and Sign belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Here If the IRS sent you an Identity Your signature Date Your occupation Protection PIN, enter it here (see inst.) SOFTWARE DEVELOPER Joint return? See instructions. If the IRS sent your spouse an Spouse's signature. If a joint return, both must sign. Date Spouse's occupation Keep a copy for Identity Protection PIN, enter it here your records. (see inst.) Phone no. (210)548 - 3103Email address RAMYA.Y005@GMAIL.COM Preparer's name Preparer's signature PTIN Check if: Date **Paid** Self-employed SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/22/2023 P02082703 **Preparer** Phone no. (678) 965-9522 GLOBAL TAXES LLC Firm's name Use Only

Firm's address

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's EIN

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. **01**

Department of the Treasury Internal Revenue Service

RAMYA YADAV KAVUDA

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 058-41-4279

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ch Schedule E .	5	-9,816.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()		
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
į	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
•••		8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR,	or 1040-NR, line 8	10	-9,816.

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

Par	Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-ti-			
	officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
С	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8I from the			
	rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
		24c		
d		24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e		
f		24f		
g	, , , , , , , , , , , , , , , , , , , ,	24g		
h	Attorney fees and court costs for actions involving certain unlawful			
	·	24h		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect	- 41		
	F	24i		
j	<u> </u>	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	S.4.		
		24k		
Z	Other adjustments. List type and amount:			
05		24z	05	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .		00	
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

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

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

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

Name(s) shown on return Your social security number RAMYA YADAV KAVUDA 058-41-4279 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box B checked 451. 1,188. -737. 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -737. Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

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

Part III Summary

16	Combine lines 7 and 15 and enter the result	16		-737.
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18.			
	No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(737.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	▼ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

8949

Sales and Other Dispositions of Capital Assets

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return RAMYA YADAV KAVUDA Social security number or taxpayer identification number

058-41-4279

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

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

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

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

★ (B) Short-term transactions	s reported on	Form(s) 1099	9-B showing bas	•		•	7)
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	of any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
ROBINHOOD CRYPTO LLC	01/01/22	12/31/22	451.	1,188.			-737.
2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box	al here and inc e is checked), li i	elude on your ne 2 (if Box B	451.	1,188.			-737.

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.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. 13

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

17

18

19

20

21

22

Other (list)

Your social security number

RAMYA YADAV KAVUDA 058-41-4279 **Income or Loss From Rental Real Estate and Royalties** Part I Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions В 1a Physical address of each property (street, city, state, ZIP code) MALKAJGIRI HYDERABAD TELANGANA IN 500047 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Days **Davs** personal use days. Check the QJV box only Α Α 185 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 650. 3 Rents received . 4 Royalties received **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 1,010. 7 7 Cleaning and maintenance. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,156. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 3,100. 14 14 Repairs . . . 15 15 2,900. Supplies 16 16 Taxes

17

18

19

20

21

2,300.

10,466.

-9,816.

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2.

-9,816.

Depreciation expense or depletion

Total expenses. Add lines 5 through 19

Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must

file Form 6198

Deductible rental real estate loss after limitation, if any,

Department of the Treasury

Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. 858

Internal Revenue Service Name(s) shown on return Identifying number RAMYA YADAV KAVUDA 058-41-4279 2022 Passive Activity Loss Part I Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b 9,816.) c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . . **d** Combine lines 1a, 1b, and 1c 1d -9,816. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c (**d** Combine lines 2a, 2b, and 2c 2d Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used 3 -9,816. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 . . . 9,816. 5 Enter \$150,000. If married filing separately, see instructions 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 113,389. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 36,611. Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 18,306. 8 9 Enter the **smaller** of line 4 or line 8 9 9,816. Part III **Total Losses Allowed** 10 10 0. Total losses allowed from all passive activities for 2022. Add lines 9 and 10. See instructions to find 9,816. 11 Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Current year Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 9,816. 9,816. MALKAJGIRI

Total. Enter on Part I, lines 1a, 1b, and 1c

0.

9,816.

D. . . . 9

Form 8582 (20)	22)									Page 2		
Part V	Complete This Part Be	fore P	art I, Lines 2	a, 2b,	and 2c. S	See instru	ctions.			:		
_	Name of activity		Current year			Prior y	ears	Overall gain or loss				
			(a) Net income (line 2a)		(b) Net loss (line 2b)		lowed e 2c)	(d) Gain		(e) Loss		
	r on Part I, lines 2a, 2b, and 2											
Part VI	Use This Part if an Am	ount Is	s Shown on F	Part II,	Line 9. S	ee instruc	ctions.			1		
	Name of activity	ar to	rm or schedule nd line number be reported on ee instructions)	(a) Loss		(a) Loss		(b) Ratio (c) Special allowance		(c) Special allowance		(d) Subtract column (c) from column (a).
MALKAJG	MALKAJGIRI		E Ln 22		9,816.		0000	9,816.		0.		
					9,816.	1.0	0	9 , 81	6.	0.		
Part VII	Allocation of Unallowe	d Los	ses. See instri	uction	S.							
	Name of activity		Form or sche and line nun to be reporte (see instructi	nber ed on	(a) l	_OSS	(b) Ratio	(c	e) Unallowed loss		
Total . Part VIII	Allowed Losses. See in	structi						1.00				
	7 11101104 200001 000 11	1011 01011	Form or sche	adula.								
	Name of activity		and line nun to be reporte (see instruct	nber ed on	(a) l	_OSS	(b) Ur	nallowed loss	((c) Allowed loss		
									-			

Total

40201 1555

Utah State Tax Commission

Utah Individual Income Tax Return

All state income tax dollars support education, children and individuals with disabilities.

· Amended Return - enter code:

(see instructions)

2022 TC-40 INTUIT

Your Social Security No. 058414279 Spouse's Soc. Sec. No.

Your first name RAMYA YADAV Spouse's first name

Address

Your last name KAVUDA Spouse's last name Full-yr Resident? Y/N Ν

If deceased, complete page 3, Part 1

10010 SKINNER LAKE DRIVE, APT 1624

b

JACKSONVILLE FL32246

Telephone number 210-548-3103 Foreign country (if not U.S.)

1	Filing	Status	-	enter	code
---	--------	--------	---	-------	------

- 1 = Single
- 2 = Married filing jointly
 - 3 = Married filing separately
 - 4 = Head of household
 - 5 = Qualifying widow(er)

If using code 2 or 3, enter spouse's name and SSN above

2 Qualify	a Dei	pendents
-----------	-------	----------

- Dependents age 16 and under а
 - Other dependents
- O Total (add lines a and b) С

Dependents must be claimed for the child tax credit on your federal return. See instructions.

3 Election Campaign Fund

Does not increase your tax or reduce your refund.

Enter the code for the party of your choice.

Yourself

See instructions for

code letters or go to incometax.utah.gov/elect. If no contribution, enter N.

4 Federal adjusted gross income from federal return			• 4	103573
5 Additions to income from TC-40A, Part 1 (attach TC-40A, page 1)			• 5	
6 Total income - add line 4 and line 5			6	103573
7 State tax refund included on federal form 1040 , Schedule 1 , line 1 (if any)			• 7	
8 Subtractions from income from TC-40A, Part 2 (attach TC-40A, page 1)			• 8	
9 Utah taxable income/loss - subtract the sum of lines 7 and 8 from line 6			• 9	103573
10 Utah tax - multiply line 9 by 4.85% (.0485) (not less than zero)			• 10	5023
11 Utah personal exemption (multiply line 2c by \$1,802)	• 11	0		
12 Federal standard or itemized deductions	• 12	12950	is o	ectronic filing quick, easy and
13 Add line 11 and line 12	13	12950		free, and will d up your refund.
14 State income tax included in federal itemized deductions	• 14		To	o learn more,
15 Subtract line 14 from line 13	15	12950	1	go to tap.utah.gov
16 Initial credit before phase-out - multiply line 15 by 6% (.06)	• 16	777		
17 Enter: \$15,548 (if single or married filing separately); \$23,322 (if head of household); or \$31,096 (if married filing jointly or qualifying widower)	• 17	15548		•
18 Income subject to phase-out - subtract line 17 from line 9 (not less than zero)	18	88025		
19 Phase-out amount - multiply line 18 by 1.3% (.013)	• 19	1144		
20 Taxpayer tax credit - subtract line 19 from line 16 (not less than zero)			• 20	0
21 If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.)	• 21			
22 Utah income tax - subtract line 20 from line 10 (not less than zero)		•	• 22	5023

402		Utah Individual ssn 0584142	Income Tax Ref	t urn (continu Last name KAV	•	II	NTUIT	TC-40 2022		Pg. 2
23	Enter tax	x from TC-40, page 1,	line 22					23		5023
24	Apportio	nable nonrefundable o	credits from TC-40A, Pa	rt 3 (attach TC-40A	, page 1)			• 24		
	Non or F	Part-year resident, com	e 24 from line 23 (not lean plete and enter the UTA ple credits from TC-40A	AH TAX from TC-40		. 1)		• 25		1635
				, Part 4 (attach TC-	40A, page	: 1)		• 26		
27	Subtract	line 26 from line 25 (n	ot less than zero)					27		1635
28	Voluntar	y contributions from To	C-40, page 3, Part 4 (at	tach TC-40, page 3)			• 28		
29	AMEND	ED RETURN ONLY - p	previous refund					• 29		
30	Recaptu	re of low-income hous	ing credit					• 30		
31	Utah use	e tax						• 31		
32	Total tax	x, use tax and additio	ons to tax (add lines 27	through 31)				32		1635
33	Utah inc	ome tax withheld show	vn on TC-40W, Part 1 (a	attach TC-40W, pag	je 1)			• 33		1669
34	Credit fo	r Utah income taxes p	repaid from TC-546 and	d 2021 refund appli	ed to 2022			• 34		
35	Pass-thr	ough entity withholding	g tax shown on TC-40W	/, Part 3 (attach TC	-40W, pag	e 2)		• 35		
36	Mineral _I	production withholding	tax shown on TC-40W,	Part 2 (attach TC-	40W, page	2)		• 36		
37	AMEND	ED RETURN ONLY - p	previous payments					• 37		
38	Refunda	ble credits from TC-40	A, Part 5 (attach TC-40	A, page 2)				• 38		
39	Total wit	hholding and refundab	le credits - add lines 33	through 38				39		1669
			m line 32 (not less than	zero)		44		• 40		
41 42	•	and interest (see instru DUE - PAY THIS AMO	UNT - add line 40 and l	ine 41		41		• 42		
43	REFUNI	D - subtract line 32 from	m line 39 (not less than	zero)				• 43		34
44		-	fund (not greater than li	ne 43)				• 44		
45	DIRECT		MAINING REFUND - pr		mation (se		•	count type: •	checking X	savings •
	er penalties N Your si		ne best of my knowledge ar	nd belief, this return ar	1	nying schedules are ti		and complete.		ate
HER	RE				Opouse's S	T				aic
	d Party signee	Name of designee (if any)) you authorize to discuss t	nis return		Designee's telephone	e number	Designee PIN •		
D	aid	Preparer's signature		Date	2	Preparer's telephone		Preparer's PTIN		0 0 7 0 0
			<u>RAM SAGAR G</u> LOBAL TAXES		3	67896595	<u> </u>	Preparer's EIN	PUZU	82703
Sec	ction	and address 2	45 ROONEY CI		. -			•	8431	71965
Attach	h TC-40 pa		BRUNSWICK a deceased taxpayer, are fi	ling a fiscal year retur		IJ 08816 form 8886, are making	y voluntary	contributions, wa	nt to depos	sit into a

Non and Part-year Resident Schedule

Residency Status: • X Nonresident: Home state abbreviation: FL

40206 SSN 058-41-4279

Last name KAVUDA

TC-40B 2022

to

Part-vear resident from:

mm/dd/yy mm/dd/yy Col. B - TOTAL Income Col. A - UTAH Wages, salaries, tips, etc. (1040 line 1z) 33715 114100 1 2 Taxable interest income (1040 line 2b) 0 26 3 Ordinary dividends (1040 line 3b) IRAs, pensions and annuities - taxable amount (1040 lines 4b and 5b) 4 5 Social Security benefits - taxable amount (1040 line 6b) 6 Taxable refunds/credits/offsets of state/local income taxes (1040, Schedule 1, line 1) 7 Alimony received (1040, Schedule 1, line 2a) 8 Business income or loss (1040, Schedule 1, line 3) 9 Capital gain or loss (1040, line 7) 0 -73710 Other gains or losses (1040, Schedule 1, line 4) 11 Rental real estate, royalties, partnerships, S corps, trusts, etc. (1040, Schd 1, line 5) 0 -9816 12 Farm income or loss (1040, Schedule 1, line 6) Unemployment compensation (1040, Schedule 1, line 7) 13 Other income (1040, Schedule 1, line 9) 14 15 Additions to income from TC-40A, Part 1 (Utah portion only in Utah column) Reserved 16 17 Reserved 18 Total income/loss - add lines 1 through 17 for both columns A and B 33715 103573 Col. B - TOTAL Adjustments Col. A - UTAH Educator expenses (1040, Schedule 1, line 11) 19 20 Certain bus. expenses of reservists, performing artists, etc. (1040, Schd 1, line 12) Health savings account deduction (1040, Schedule 1, line 13) 21 Moving expenses (1040, Schedule 1, line 14) - col. A only expenses moving into Utah 22 23 Deductible part of self-employment tax (1040, Schedule 1, line 15) 24 Self-employed SEP, SIMPLE and qualified plans (1040, Schedule 1, line 16) 25 Self-employed health insurance deduction (1040, Schedule 1, line 17) 26 Penalty on early withdrawal of savings (1040, Schedule 1, line 18) 27 Alimony paid (1040, Schedule 1, line 19a) 28 IRA deduction (1040, Schedule 1, line 20) Student loan interest deduction (1040, Schedule 1, line 21) 29 30 Reserved 31 Reserved State tax refund included on federal form 1040, Schedule 1, line 1 32 Subtractions from income from TC-40A, Part 2 (Utah portion only in Utah column) 33 34 Reserved 35 Reserved 36 (see instructions): 37 Total adjustments - add lines 19 through 36 for both columns A and B 38 Subtract line 37 from line 18 for both columns A and B 33715 103573 Line 38, column B must equal TC-40, line 9 Non or Part-year Resident Utah Tax Divide line 38 column A by line 38 column B (to 4 decimal places, not more than 1.0000 or less than 0.0000) 39 0.3255 39 Subtract TC-40, line 24 from TC-40, line 23 and enter the result (not less than zero) here 5023 40 40 41 UTAH TAX - Multiply line 40 by the decimal on line 39. Enter on TC-40, page 2, line 25 • 41 1635

INTUIT

TC-40W 2022

Pg. 1

40209 ssn 058-41-4279

7

Last name KAVUDA

Line Explanations **IMPORTANT** 1 Employer/payer ID number from W-2 box "b" or 1099 Do not send your W-2s or 1099s with your return. Instead enter Utah withholding ID number from W-2 box "15" or 1099 W-2 or 1099 information below, but only if there is Utah withholding (14 characters, ending in WTH, no hyphens) on the form. 3 Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or Employee's Social Security number from W-2 box "a" or 1099 1099s with Utah withholding tax. 5 Utah wages or income from W-2 box "16" or 1099 7 Utah withholding tax from W-2 box "17" or 1099 Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. First W-2 or 1099 Second W-2 or 1099 1 812273516 1 14644615003WTH (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 TECHSMART GLOBAL INC 666 PLAINSBORO RD 1116 PLAINSBORO NJ08536 4 4 5 058414279 6 33715. 7 1669. Third W-2 or 1099 Fourth W-2 or 1099 1 1 2 (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 3 4 4 5 5 6 6

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: 1669.

Submit page ONLY if data entered.

Attach completed schedule to your Utah Income Tax Return.

Do not attach W-2s or 1099s to your Utah return.

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