Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

IIICIIIAI N	lever the Service								
Submis	ssion Identification Number (SID)								
Taxpayer	r's name	Social se	curity numb	oer					
YESH	WANTH REDDY CHIGULLA	880-	880-82-9796						
Spouse's	s name	Spouse's	social seci	urity nu	ımber				
Dout	Toy Detrive Information Toy Very Ending December 21 0000 //	-ntory one yo	0.00 011	th ori-	ring \				
Part	, ,	Enter year yo	u are au	trioriz	zing.)				
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
	Adjusted gross income		. 1		140.	517.			
	Total tax					448.			
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		. —			472.			
	Amount you want refunded to you					024.			
	Amount you owe		. 5						
Part I		nd keep a c	opy of y	our	returi	າ)			
return (o to send for any o Agent to payment authorize payment business taxes to persona	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I original or amended) I am now authorizing. I consent to allow my intermediate service provider, tr my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to territ, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations adays prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to all identification number (PIN) below is my signature for the income tax return (original or amende lic Funds Withdrawal Consent.	ansmitter, or eleor rejection of the U.S. Treasunt indicated in the stitution to debit minate the author requests mus on the processin the payment.	ectronic reine transmis ry and its one tax prep the entry porization. It t be receing of the el further ac	turn or ssion, design paratio this fo revolved no ectrons	riginato (b) the lated F on softwaccou oke (ca o later lic paya ledge t	or (ERO) reason inancial vare for nt. This ancel) a than 2 ment of hat the			
	yer's PIN: check one box only								
X	l authorize GLOBAL TAXES LLC to enter or gene	rate my PIN	2 9 7	7 9	6	as my			
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	rate my r m	Enter five don't ente		but	ao my			
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.								
Your si	gnature ► Date	.							
Snouse	e's PIN: check one box only								
Opouse	I authorize to enter or gene	rata my DINI				as my			
Ш	ERO firm name	rate my Fin	Enter five	digits.		as IIIy			
	signature on the income tax return (original or amended) I am now authorizing.		don't ente						
	I will enter my PIN as my signature on the income tax return (original or amended) I if you are entering your own PIN and your return is filed using the Practitioner PIN below.								
Spouse	e's signature ▶ Date	•							
	Practitioner PIN Method Returns Only—continue be	elow							
Part II	II Certification and Authentication — Practitioner PIN Method Only								
FRO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	$\begin{bmatrix} 2 & 2 & 4 \end{bmatrix}$	9 6 6	$\begin{vmatrix} 1 \end{vmatrix}$	9 8	9			
2110 0	= 11.71 11.1 Enter your on algit Enter followed by your five digit out oblicated in it.		enter all ze						
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual incovered to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I amments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provider	me tax return (o	original or return in a	ameno accord	lanće v				
ERO's	signature ▶ Date	•							
	ERO Must Retain This Form — See Instruction	ns							
	Don't Submit This Form to the IRS Unless Requested								

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

2022	
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OMB No. 1545-0074

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

Filing Status Check only	s 🗙 S	Single Married filing jointly	Marrie	ed filing separately (N	/IFS)	Head of	household (HOH)			ing survi (QSS)	/ing	
one box.		u checked the MFS box, enter the nation is a child but not your dependent		our spouse. If you cl	necke	ed the HOH or	QSS box, enter	the child	's na	me if the	qualifying	
Your first name	and mi	ddle initial	Last na	me				Your	socia	l security	number	
YESHWANT	CH RI	EDDY	CHIG	ULLA				880	880-82-9796			
		first name and middle initial	Last na								rity number	
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	•			n Campaign	
		GATEWAY DR					1135		Check here if you, or your spouse if filing jointly, want \$3			
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Stat	e	ZIP code		to go to this fund. Checking a			
SPARKS				NV 89						will not c	hange	
Foreign country name				Foreign province/state/o	county	У	Foreign postal code	e your t	_	refund.	Spouse	
Digital		ny time during 2022, did you: (a) rec							_			
Assets		ange, gift, or otherwise dispose of a					asset)? (See inst	ructions	.) L	_ Yes	⊠ No	
Standard Deduction	_	eone can claim:	•			a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	n before January	2, 1958	; [] Is blin	ıd	
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	ip (4) Check the	box if qua	alifies	for (see in	structions):	
If more	(1) Fi	rst name Last name		number		to you	Child tax	credit	Cre	edit for othe	er dependents	
than four]	
dependents, see instruction	s]	
and check	, —]	
here									1	L		
Income	1a	Total amount from Form(s) W-2, b	,	,				. 1	a	15	4,066.	
	b	Household employee wages not re						. 1	b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)										
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)										
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26										
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29										
If you did not	g	Wages from Form 8919, line 6 .							g			
get a Form W-2, see	h	Other earned income (see instruct	,					. 1	h		0.	
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>				1 -	1 066	
	<u>z</u>	Add lines 1a through 1h	 						lz	154	4,066.	
Attach Sch. B if required.	2a	·	2a	40.		axable interes			2b Bb		$\frac{1.}{44.}$	
	3a_		3a	40.		rdinary divide			-		44.	
Standard	4a 5a		4a 5a			axable amoun axable amoun			lb ib			
Standard Deduction for—	6a		6a			axable amoun			b b			
Single or	C	If you elect to use the lump-sum e		method check here				$\dot{\Box}$	JU			
Married filing separately,	7	Capital gain or (loss). Attach Schei		· ·	`	,		H	7		-94.	
\$12,950 Married filing	8	Other income from Schedule 1, lin							8	_1	3,500.	
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						_	9		0,517.	
Qualifying surviving spouse,	10	Adjustments to income from Sche		•				_	10		<i>,, ,</i>	
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11	141	0,517.	
household,	12	Standard deduction or itemized	-	-					2		2,950.	
\$19,400 If you checked	13	Qualified business income deduct		`	,	5-A			3		_,,,,,,,	
any box under Standard	14	Add lines 12 and 13							14	1:	2,950.	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer							15		7,567.	
SSC IIISII UCIIOIIS.												

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	(s): 1 881	4 2 4972	3 🗌		16	24,448.
Credits	17	Amount from Schedule 2, line 3					17	
	18	Add lines 16 and 17					18	24,448.
	19	Child tax credit or credit for other dependent	ts from Sched	ule 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	24,448.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax					24	24,448.
Payments	25	Federal income tax withheld from:						
-	а	Form(s) W-2			25a 3	0,472.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	30,472.
If you have a	26	2022 estimated tax payments and amount a	pplied from 20	21 return			26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812	!		28			
	29	American opportunity credit from Form 8863	3, line 8		29			
	30	Reserved for future use			30			
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments				33	30,472.
Refund	34	If line 33 is more than line 24, subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	6,024.
riciana	35a	Amount of line 34 you want refunded to you	ı. If Form 8888	is attached, chec	k here	🗌	35a	6,024.
Direct deposit?	b	Routing number 0 4 4 0 0 0 0	3 7	c Type: 🛛	Checking	Savings		
See instructions.	d	Account number 8 0 0 7 1 1 6	1 1 1					
	36	Amount of line 34 you want applied to your	2023 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This is the amo For details on how to pay, go to www.irs.gov	•				37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party Designee		you want to allow another person to disc				Complete b	pelow.	X No
· ·		signee's	Phone			sonal identi	fication I	
	na	me	no.		nun	nber (PIN)		
Sign Here		der penalties of perjury, I declare that I have examine ief, they are true, correct, and complete. Declaration of						
TICIC	Yo	ur signature	Date	Your occupation				nt you an Identity
					NIC TNIEED		ection Pl inst.)	N, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	SOFTWARE E				nt your spouse an
Keep a copy for your records.	Ор	ouse's signature. If a joint return, both must sign.	Date	opouse s occupation	on.	Iden		ection PIN, enter it here
	Ph	one no. (937)986-9354	Email address	CYASHWANTHRE	DDY@GMAIL.C	OM		
Doid	Pre	eparer's name Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/23/2023	P0208	2703	Self-employed
Preparer Use Only	Fir	m's name GLOBAL TAXES LLC				Phor	ne no. (678)965-9522
Use Only	Fin	m's address 245 ROONEY CT E BRU	NSWICK N	J 08816			's EIN	84-3171965
								1010

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

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

Name	cial se	ecurity number			
YESI	HWANTH REDDY CHIGULLA		880-8	32-97	96
Pai	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	ach Schedule	èΕ.	5	-13,500.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a ()		
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()		
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
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				
	instructions)	8m		-	
	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) Scholarship and fellowship grants not reported on Form W-2	8q 8r			
r	Nontaxable amount of Medicaid waiver payments included on Form	OI		-	
S	1040, line 1a or 1d	8s (١		
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
·	a nongovernmental section 457 plan	8t			
	Wages earned while incarcerated	8u			
	Other income. List type and amount:	- Gu			

Total other income. Add lines 8a through 8z

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-13,500.

9

10

8z

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis governr			
	officials. Attach Form 2106	L	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	L	23	
24	Other adjustments:			
а	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit			
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses			
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24g			
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)			
İ	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect tax law violations			
j	Housing deduction from Form 2555			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
_	1041)			
Z	Other adjustments. List type and amount:			
25			25	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-on, little 10, or Form 1040-inn, little 10a		20	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

	(s) shown on return SHWANTH REDDY CHIGULLA				social se 1 – 8 2 –	ecurity number 9796
Did y	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additional			× No		<u> </u>
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (s	ee ins	tructions)
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)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	3,100.	3,194.			-94.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (lo	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions		-		6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-94.
Pai	t II Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Year	(see	instructions)
lines	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustme to gain or los		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949 line 2, colur		combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	-	-		14	(
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	olumn (h). Then, a	o to Part III		

on the back . .

BAA

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** -94. 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 94.) 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

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

2022 Attachment Sequence No. 12A

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

YESHWANTH REDDY CHIGULLA

Social security number or taxpayer identification number

880-82-9796

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.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (B) Short-term transactions☐ (C) Short-term transactions	•	٠,	•	sis wasn't report	ed to the IF	RS	
1 (a) Description of property	(b) Date acquired		(d) Proceeds	(e) Cost or other basis See the Note below and see <i>Column</i> (e)	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e	
(Example: 100 sh. XYZ Co.)	(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).
Wealthfront Brokerage LLC	01/01/22	12/31/22	2,606.	2,696.			-90.
Wealthfront Brokerage LLC	01/01/22	12/31/22	486.	490.			-4.
Robinhood Securities LLC	01/01/22	12/31/22	8.	8.			0.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	3,100.	3,194.			-94.

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.

OMB No. 1545-0074

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

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

Attachment Sequence No. **13**

Your social security number

YESI	HWANTH REDDY CHIGULLA						880-8	2-9796	
Par									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use	Schedule	C . See	instru	ctions. If you a	are an indiv	/idual, rep	ort farm
Α	Did you make any payments in 2022 that would require you	to file	Form(s) 1	0992.5	ee ins	tructions		□ Ve	s X No
	If "Yes," did you or will you file required Form(s) 1099? .								
	Physical address of each property (street, city, state, ZIF			<u> </u>			<u> </u>		
1a									
A	R K Nagar, Anantapur ANDHRA PRADESH I	IN 51	L5001						
В									
С							_		
1b		For each rental real estate property listed above, report the number of fair rental an personal use days. Check the QJV box of the property of the party of the party of the party of the property of the party of the property of the property of the party of the pa				ir Rental Days	Personal Use Days		QJV
Α						365	Da	ys 0	
B	if you meet the requirements to f			A B		303			
C	qualified joint venture. See instru	ictions	S.	С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren	tal	5 Land	l	7	Self-Rental			
	Multi-Family Residence 4 Commercial		6 Roya		-	Other (desci	ribe)		
						Properti	es:		
Incor				Α	00.	В			С
3 4	Rents received	3		0	00.				
Expe	Royalties received	4							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,5	00.				
8	Commissions	8		, -					
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,2	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		3,6					
15	Supplies	15		3,0	00.				
16	Taxes	16		4 0	0.0				
17	Utilities	17		4,8	00.				
18	Depreciation expense or depletion	18							
19	Other (list) Total expenses. Add lines 5 through 19	19		1 / 1	0.0				
20		20		14,1	00.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must								
	file Form 6198	21		-13,5	00.				
22	Deductible rental real estate loss after limitation, if any,	- -							
	on Form 8582 (see instructions)	22	(13,50	0.)	()	(,
23a	Total of all amounts reported on line 3 for all rental prope	$\overline{}$			23a		600.		
b	Total of all amounts reported on line 4 for all royalty properties				23b				
С	Total of all amounts reported on line 12 for all properties				23c				
d	Total of all amounts reported on line 18 for all properties				23d				
е	Total of all amounts reported on line 20 for all properties				23e	14	,100.		
24	Income. Add positive amounts shown on line 21. Do no		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat							(13,500.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, IV, and line 40 on page 2 do not a						1 1		12 500
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	HOUNT		ai ON III	110 4 I	on page 2	. 26		-13,500.

Passive Activity Loss Limitations

See separate instructions. Attach to Form 1040, 1040-SR, or 1041.

OMB No. 1545-1008 Attachment Sequence No. **858**

Identifying number

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

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

YESI	HWANTH REDDY CHIGULLA				880	-82-	-9796
Pa	rt I 2022 Passive Activity Loss	3			•		
	Caution: Complete Parts IV ar	d V before comple	eting Part I.				
	al Real Estate Activities With Active Parance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b	Activities with net income (enter the a Activities with net loss (enter the amo	unt from Part IV, c	olumn (b))	1b ()		
С	Prior years' unallowed losses (enter the)		
d	Combine lines 1a, 1b, and 1c					1d	
All O	ther Passive Activities						
2a b c	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the	unt from Part V, co	olumn (b))	2b (0. 0.) -445.)		
d	Combine lines 2a, 2b, and 2c					2d	-445.
3	Combine lines 1d and 2d. If this line i all losses are allowed, including any losses on the forms and schedules no	s zero or more, sto prior year unallow	op here and inclu	de this form with y I on line 1c or 2c.	our return;	3	-445.
	If line 3 is a loss and: • Line 1d is a lead		zero or more), sk	ip Part II and go to	line 10.		
	on: If your filing status is married filing	separately and yo	ou lived with your	spouse at any tim	e during the	year,	do not complete
	I. Instead, go to line 10.						
Par	t II Special Allowance for Rer						
	Note: Enter all numbers in Par	<u> </u>		tions for an examp	le.		
4 5	Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ			5		4	
6	Enter modified adjusted gross income	-		<u> </u>			
Ū	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.						
7	Subtract line 6 from line 5			7			
8	Multiply line 7 by 50% (0.50). Do not en	nter more than \$25	,000. If married filing		nstructions	8	
9	Enter the smaller of line 4 or line 8						0.
Par	Total Lacaca Allawad	<u> </u>				9	
10	Add the income, if any, on lines 1a an	d 2a and enter the	total			10	0.
10 11	Add the income, if any, on lines 1a an Total losses allowed from all passiv	d 2a and enter the eactivities for 20	total		ons to find	10	
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to	d 2a and enter the e activities for 20 ax return	e total		ons to find		0.
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv	d 2a and enter the e activities for 20 ax return	e total		ons to find	10	
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to	d 2a and enter the e activities for 20 ax return e Part I, Lines 1 Currer	e total	nd 10. See instructions. See instructions. Prior years	ons to find	10	
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to t IV Complete This Part Before	d 2a and enter the e activities for 20 ax return e Part I, Lines 1	e total	nd 10. See instructi	ons to find	10 11	0.
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to t IV Complete This Part Before	d 2a and enter the e activities for 20 ax return e Part I, Lines 1 Currer (a) Net income	e total	d 10. See instructions. See instructions. Prior years (c) Unallowed	ons to find	10 11	0. in or loss
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to t IV Complete This Part Before	d 2a and enter the e activities for 20 ax return e Part I, Lines 1 Currer (a) Net income	e total	d 10. See instructions. See instructions. Prior years (c) Unallowed	ons to find	10 11	0. in or loss
11	Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to t IV Complete This Part Before	d 2a and enter the e activities for 20 ax return e Part I, Lines 1 Currer (a) Net income	e total	d 10. See instructions. See instructions. Prior years (c) Unallowed	ons to find	10 11	0. in or loss

BAA

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

Page **2**

Part V Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instruc	ctions.					
Name of activity		Currer	Prior yea		ears	Overall g		ain or loss			
Name of activity	(a	Net income (line 2a)	1 (d) iil)	Net loss ne 2b)	(c) Unall loss (lin		(d) Gain		(e) Loss		
R K Nagar,	0.			0.	445.				445.		
3,											
Total. Enter on Part I, lines 2a, 2b, and 2c		0.		0.		445.					
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II,	Line 9. S	ee instruc	tions.					
Name of activity	an to l	rm or schedule d line number be reported on the instructions)	d line number be reported on (a) L		(b) Ratio		ss (b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).
Total			ustion	•	1.00)					
Part VII Allocation of Unallowed L	OSS			S.							
Name of activity		Form or sche and line nur to be reporte (see instruct	nber ed on	(a) L	Loss (b) Ratio		(c	e) Unallowed loss			
R K Nagar,		E Ln 2	2	445.		1.00000000		445.			
it it itagar,					113.	1	1.0000000		110.		
Total					445.		1.00		445.		
Part VIII Allowed Losses. See instru	ucti	ons.									
Name of activity	Form or schedule and line number to be reported on (see instructions) (a) Loss (b) Una		mber ed on (a) Loss (b) Unallower) Loss (b) Unallowed los		nallowed loss	((c) Allowed loss		
R K Nagar,		E Ln 2:	2		445.		445.		0.		
-5 ,							•				
Total					445.		445.		0.		