# 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

Submi	ission Identification Number (SID)									
Taxpayer's name					Social security number					
VEN	KATA SIVA NAGENDR KOKKILIGADDA	660	-80-	9329	ı					
Spouse	's name	Spouse	e's soci	al secu	rity numb	er				
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enti-	 er year y	ou ar	e aut	horizin	g.)				
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	12	5,1	17.			
2	Total tax		. [	2	2	0,7	56.			
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		.	3	2	5,5	74.			
4	Amount you want refunded to you		.	4		4,8	18.			
5	Amount you owe			5						
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a	copy	of y	our ret	urn)				
return ( to send for any Agent t paymer authori paymer busines taxes t person	owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I about a mended) I am now authorizing. I consent to allow my intermediate service provider, trans a my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for receipt in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial transplant of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminant, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days 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 the all identification number (PIN) below is my signature for the income tax return (original or amended) I	mitter, or ejection of U.S. Treadicated in tion to de the au quests me e process payment	electro f the tra sury an the ta bit the thoriza ust be sing of . I furth	nic returnismostics ansmission its district district district and its district distr	urn originate earations of this according the control of the contr	nator of the red oftwa count (can ater the caymon	(ERO) eason ancial are for . This cel) a han 2 ent of at the			
	nic Funds Withdrawal Consent.					7				
-	yer's PIN: check one box only		0	9 3	2 9					
×	I authorize GLOBAL TAXES LLC to enter or generate FRO firm name	my PIN	Ente	er five o	ligits, but	das ∷	s my			
	signature on the income tax return (original or amended) I am now authorizing.		don	't enter	all zeros					
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN med below.									
Your s	signature ▶ Date ▶									
Snous	se's PIN: check one box only					_				
Ороц	I authorize to enter or generate	my DIN					s my			
	ERO firm name	z iiiy i iiv		er five o	ligits, but	_	3 IIIy			
	signature on the income tax return (original or amended) I am now authorizing.				all zeros					
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN med below.									
Spous	e's signature ▶ Date ▶									
	Practitioner PIN Method Returns Only—continue below	N								
Part	III Certification and Authentication — Practitioner PIN Method Only						_			
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2	2 2 4	9 6	5 6		8 9	9			
		סם	ıı ı ente	an zei	US					
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of	mitting th	is retu	rn in a	ccordanc					
ERO's	s signature ▶ Date ▶									
	ERO Must Retain This Form — See Instructions									
	Don't Submit This Form to the IRS Unless Requested To	Do So								

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.

If you checked the MRS 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   Last name   Vour social security number    Your first name and middle initial   Last name   Spouse's first name and middle initial   Last name   Spouse's first name and middle initial   Last name   Spouse's social security number    Home address (number and street), if you have a P.O. box, see instructions.   Apt. no.   Presidential Election Campaign    210 GREEN PARROT RD   City, town, or post office. If you have a P.O. box, see instructions.   State   ZIP code   FL   3.256    Tack SNON'LLLE   Foreign post address, also complete spaces below.   State   ZIP code   FL   3.256    Tack SNON'LLLE   Standard   Standa	Filing Status Check only	<b>X</b> S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	household (HC	OH)		ifying sun	viving	
VENIKATA SIVA NAGENDR   KOKKILIGADDA   Last rame   Spouse's social security number   Spouse   State   ZIP code   Spouse's first number   State   ZIP code   Spouse's first number   Spouse   State   ZIP code   Spouse   State   ZIP code   Spouse   State   ZIP code   Spouse   State   State   ZIP code   Spouse   State		•	•	•	our spouse. If you	check	ed the HOH or	QSS box, en	ter the c		, ,	ne qualifying	
If joint return, spouse's first name and middle initial   Last name   Last name   Last name   Apt. no.   Presidential Election Campaign   Check there in fyou, or your spouse of first name and street). If you have a foreign address, also complete spaces below.   State   ZIP code   PLT   S2.256   South 1975   South	Your first name	and mi	ddle initial	Last na	me				Y	Your social security number			
B210 GREEN PARROT RD	VENKATA	SIV	A NAGENDR	кокк	ILIGADDA				6	60-8	30-932	9	
Check here if you, or your   City, town, or post office. If you have a foreign address, also complete spaces below.   State   ZiP code   ZiP	If joint return, s	pouse's	first name and middle initial	Last na	me				Sp	Spouse's social security number			
State   City town, or post office. If you have a foreign address, also complete spaces below.   State   ZIP code   STACKSONVILLE   STACKSONV	Home address	(numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.					
Today   Toda	8210 GRE	EEN E	PARROT RD										
Foreign country name	City, town, or p	ost offic	ce. If you have a foreign address, also co										
Spouse   Standard   Deduction   Spouse   Standard   S					FL 3						ox below will not change		
Assets  sexchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)	Foreign country	/ name		F	Foreign province/state	e/count	ty	Foreign postal	oreign postal code   yo				
Standard Deduction Deduction	Digital			,				•	, ,		□ Voc		
Spouse itemizes on a separate return or you were a dual-status alien					<u>-</u>			asset) ( (See I	nstructi	0115.)	1es		
Comparison   Com	Standard Deduction	_			•		•						
If more than four dependents, see instructions and check here	Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind S	oouse	: Was bor						
If more than four dependents, see instructions and check here	Dependents	s (see	instructions):			ity	l			1			
dependents, see instructions and check here	If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child	tax credi	t (	Credit for ot	her dependents	
see instructions and check here									<u>Ш</u>			<u></u>	
Income  Income  Income  Income  Attach Form(s) W-2 here. Also W-2 here Also Here Also W-2 here Also W-2 here Also W-2 here Also Here Also W-2 here Also W-2 here Also Here Also W-2 here Also W-2 here Also Here Also Here Also W-2 here Also Her		s ——							<u> </u>				
Income  1a Total amount from Form(s) W-2, box 1 (see instructions)		. —							<u> </u>				
b Household employee wages not reported on Form(s) W-2 Attach Form(s) W-2 here, Also attach Forms W-2 here, Also attach Forms W-2G and Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)  d Taxable dependent care benefits from Form 8839, line 29  f Employer-provided adoption benefits from Form 8839, line 29  f Wages from Form 8919, line 6  g Wages from Form 8919, line 6  f Other earned income (see instructions)  d Nontaxable combat pay election (see instructions)  d Add lines 1 a through 1h  d It Altach Sch. B  f required.  d If A distributions  d If You elect to use the lump-sum election method, check here (see instructions)  d If you elect to use the lump-sum election method, check here (see instructions)  d If you elect to use the lump-sum election method, check here (see instructions)  d If you elect to use the lump-sum election method, check here (see instructions)  d Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  10 Subtract line 10 from line 9  11 Subtract line 10 from line 9. This is your adjusted gross income  11 1 225, 117.  12 Standard Deduction or itemized deductions (from Schedule A)  12 12,950.  15 Subtract line 14 from line 11 If zero or less enter -0. This is your taxable income  15 Subtract line 14 from line 11 If zero or less enter -0. This is your taxable income  15 Subtract line 14 from line 11 If zero or less enter -0. This is your taxable income  15 Subtract line 14 from line 11 If zero or less enter -0. This is your taxable income  15 Subtract line 14 from line 11 If zero or less enter -0. This is your taxable income	nere L												
Attach Forms W-2g and 1099-Ri ft ax was withheld. If you did not get a Form W-2, see instructions.  If you did not get a Form W-2, see instructions.  If required.  If you did not get a Form M-2, see instructions.  If required.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you did not get a Form M-2, see instructions.  If you declar dividends . 3a b b Taxable interest . 2b long the first of the first	Income			,	•						1 1	<u>11,207.</u>	
W-2 here. Also attach Forms W-2G and 1099-Ri f tax was withheld. If you did not get a Form W-2, see instructions  W-2, See instructions.  If was withheld. If you did not get a Form W-2, see instructions  W-2, See instructions.  Add lines 1a through 1h  Tax-exempt interest	Attach Form(c)		. , , , , , , , , , , , , , , , , , , ,										
W-2G and 1099-R if tax was withheld. If you did not get a Form Ways get a Form Ways as withheld. If you did not get a Form Ways as withheld. If you did not get a Form Ways as withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form Ways withheld. If you did not get a Form was with was w	٠,	The income not reported on line to (see instructions)											
1099-Rif tax   was withheld.   f   Employer-provided adoption benefits from Form 8839, line 29   1f													
Wages from Form 8919, line 6													
Note	was withheld.			tits from		9.							
W-2, see instructions.  I Nontaxable combat pay election (see instructions).  It   141,207.  Attach Sch. B   2a   Tax-exempt interest   2a   Discription   2a   2a   2a   Discription   2a   2a   Discription   2a   2a   Discription   2a   2a   2a   Discription   2a   2a   2a   2a   2a   2a   2a   2			-										
Add lines 1a through 1h  Attach Sch. B  B  Attach Sch. Sch. Soh  B  B  Attach Sch	•		` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '							In			
Attach Sch. B if required.  3a Qualified dividends 3a b ordinary dividends 3b B Taxable interest 2b B Taxable if required.  4a IRA distributions 4a b Taxable amount 4b B Taxable amount 5b B Taxable income 5b B Taxable amount 5b B Taxable income 5b	instructions.			see ii isti	uctions)		!!			1-	1.	41 207	
If required.   3a   Qualified dividends   3a   b   Ordinary dividends   3b	Attach Sob B			 22	<sub>.</sub>	 Ь Т						11,207.	
Standard   Pensions and annuities   Sa   Bandard   Social security benefits   Sa   Bandard   Sacial security benefits   Sacial security ben													
Standard Deduction for—Single or Married filing separately, \$12,950  Married filing jointly or Qualifying source, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, \$200   12   13   14   12,950.  Standard Deduction, \$200   15   112   167   112   167   112   167   112   167   112   167   112   167   112   167   15   112   167   112   112   167   112   112   112   112   112   112   112   112   112   112   112   112   112   112   112   112				.			•						
Social security benefits   Ga   b   Taxable amount   Gb	Standard												
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, \$25,000  If you elect to use the lump-sum election method, check here (see instructions)  Capital gain or (loss). Attach Schedule D if required. If not required, check here  7  Capital gain or (loss). Attach Schedule D if required. If not required, check here  8	Deduction for—												
separately, \$12,950  7 Capital gain or (loss). Attach Schedule D if required. If not required, check here  8 Other income from Schedule 1, line 10  8 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income  9 125,117.  10 Adjustments to income from Schedule 1, line 26  11 Subtract line 10 from line 9. This is your adjusted gross income  12 Standard deduction or itemized deductions (from Schedule A)  13 Qualified business income deduction from Form 8995 or Form 8995-A  14 Add lines 12 and 13  15 Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income  15 Subtract line 14 from line 11 If zero or less enter -0- This is your taxable income	Single or Married filing		· · · · · · · · · · · · · · · · · · ·	_	method, check her				. П				
Married filing jointly or Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 125,117.  Married filing jointly or Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 125,117.  Married filing jointly or Qualifying 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 10 10 10 10 10 10 10 10 10 10 10 10 10	separately,		•		•	•	,		. $\Box$	7			
jointly or Qualifying Subserviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Deduction, Deduction, Deduction, Deduction, Deduction, Subtract line 14 from line 11 ff zero or less enter -0- This is your total income	• Married filing							8	-:	16,090.			
surviving spouse, \$25,900  Head of household, \$19,400  If you checked any box under Standard Deduction, Peduction, Peduction, 15  Subtract line 10 from line 9. This is your adjusted gross income	jointly or		•							_			
Head of household, \$19,400  If you checked any box under Standard Deduction, \$12 and 13	surviving spouse,	10		•									
household, \$19,400	\$25,900 • Head of		•								1:	 25,117.	
13 Qualified business income deduction from Form 8995 or Form 8995-A		12	Standard deduction or itemized	deducti	ions (from Schedu	le A)				12			
Standard 14 Add lines 12 and 13	If you checked	13	Qualified business income deduct	on from	Form 8995 or For	m 899	5-A			13			
	Standard	14	Add lines 12 and 13							14		12,950.	
		15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is	your <b>t</b>	taxable incom	ne		15	1	12,167.	

Form 1040 (2022	2)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	ı(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		16	20,756.
Credits	17	Amount from Schedule 2, lin					[	17	
	18	Add lines 16 and 17					[	18	20,756.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812		[	19	
	20	Amount from Schedule 3, lin	ne 8				[	20	
	21	Add lines 19 and 20					[	21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0			[	22	20,756.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21		[	23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>				[	24	20,756.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				<b>25a</b> 25	,574.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	,					25d	25,574.
	26	2022 estimated tax payment					🗀	26	•
If you have a qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from			_	28			
	29	American opportunity credit				29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31				indable credits		32	
	33	Add lines 25d, 26, and 32. T	•	-	-		-	33	25,574.
Defined	34	If line 33 is more than line 24						34	4,818.
Refund	35a	Amount of line 34 you want	•			, .	. 🗀 🕇	35a	4,818.
Direct deposit?	b	Routing number 0 2 1					Savings		
See instructions.		Account number 3 8 1					92		
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24							
You Owe		For details on how to pay, g	o to <i>www.ir</i> s.gov	v/Payments or	see instructions .			37	
	38	Estimated tax penalty (see in				38			
Third Party		you want to allow another	•		rn with the IRS?		mplete be	low	⊠ No
Designee		signee's		Phone			nal identific		NO NO
		me		no.			er (PIN)	ation	
Sign				st of my knowledge and er has any knowledge.					
Here		ur signature	p. 6161 2 66141 411611 1	Date	Your occupation			•	nt you an Identity
	10	ui signature		Date	Tour occupation		I		IN, enter it here
Joint return?					SOFTWARE I	DEVELOPER	(see ins	st.)	
See instructions.	opodoo o oignataro. Il a joint rotarri, <b>botti</b> maot oign.   bato		Date	Date Spouse's occupation			the IRS sent your spouse an		
Keep a copy for your records.							Identity (see ins		ection PIN, enter it here
•			0	For all and done	111 GENEDA III	TO COMP. TT. CO.		71.7	
-		one no. (707)690-884 eparer's name	8 Preparer's signat	Email address	NAGENDRAKI	19@GMAIL.COI Date	M PTIN		Check if:
Paid		•	, ,		CIIDMA MATTAA			702	Self-employed
Preparer		I PRIYA RAM SAGAR GUPTA TALLAM		KAM SAGAR	GUPIA TALLAM	03/04/2023	P020827		
Use Only		m's name GLOBAL TA	XES LLC Y CT E BRU	INTOTATE AT	T 00016				678)965-9522
				MOMTCK N			Firm's	_IIN	84-3171965
GO TO WWW.Irs.g	ov/Forr	m1040 for instructions and the late	st information.		BAA	REV 02/24/23 PRO			Form 1040 (2022)

# SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

Name(s) shown on Form 1040, 1040-SR, or 1040-NR VENKATA SIVA NAGENDR KOKKILIGADDA

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. <b>01</b>
Your soc	ial security number
660-80	-9329

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	ach Schedule E .	5	-16,090.
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		
I	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	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 (	<u>)</u>	
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	I, or 1040-NR, line 8	10	-16,090.

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 governing			
	officials. Attach Form 2106	[	12	1
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)			
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			O.F.	
25 26	Total other adjustments. Add lines 24a through 24z	-	25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here an Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 of 1040-3n, lifte 10, of Form 1040-1nn, lifte 10a		20	

#### **SCHEDULE E** (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

### 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,

Your social security number

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

Attachment Sequence No. 13

OMB No. 1545-0074

VENKATA SIVA NAGENDR KOKKILIGADDA 660-80-9329 Part I **Income or Loss From Rental Real Estate and Royalties 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 . . . . . 1a Physical address of each property (street, city, state, ZIP code) 14-58, THULASI NAGAR, ROAD-3 VIJAYAWADA ANDHRAPRADESH IN 520007 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 Davs **Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С 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: 3 680. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,860. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . 11 1,520. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 3,430. 14 14 Repairs . . . 15 Supplies 15 3,645. 16 2,500. 16 Taxes 17 17 3,815. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 16,770. Total expenses. Add lines 5 through 19 . . . . . . 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 -16,090. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 16,090.) 680. 23a Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 16,770. Total of all amounts reported on line 20 for all properties 23e 24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 16,090. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 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 ... -16,090.