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.

Submission Identification Number (SID)

T.....

Taxpayer's name Social se	ecurity number
SAMBASHIVA REDDY KETHIREDDY 844-	-73-5836
Spouse's name Spouse's	's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2022 (Enter year yo	ou are authorizing.)
Enter whole dollars only on lines 1 through 5.	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	. 1 106,797.
2 Total tax	. 2 16,354.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	. 3 20,232.
4 Amount you want refunded to you	. 4 3,878.
5 Amount you owe	. 5
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a c	copy of your return)

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

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

Ent don	er fiv I't er	/e dia	gits, all ze	but	as my
3	5	8	3	6	

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

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

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

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

Spouse's signa	ature 🕨 🛛 Da	ate 🕨	•				 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III Ce	ertification and Authentication – Practitioner PIN Method Only								
ERO's EFIN/P	IN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2			6 all ze	 9	8	9

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

ERO's signature 🕨	signature Date Date										
	ERO Must Retain This Form — Se bmit This Form to the IRS Unless										
For Denemicarly Deduction Act Nation and			Earm 8879 (Bay, 01 2021)								

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/10/23 PRO

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		202	2	OMB No. 1545	-0074	IRS Use O	nly—Do	not wri	ite or staple in	this space.
Check only] Married filing		,			, ,		spou	fying surviv se (QSS)	U
one box.	,	u checked the MFS box, enter the n on is a child but not your dependent	, ,	oouse. If you c	neck	ed the HOH or	QSS	box, enter	the ch	ıild's ı	name if the	qualifying
Your first name	and mi	ddle initial	Last name						Υοι	ur soc	ial security	number
SAMBASHI	IVA I	REDDY	KETHIREI	DDY					84	4-7	3-5836	
lf joint return, s	pouse's	first name and middle initial	Last name						Spo	ouse's	social secu	rity number
Home address	(numbe	r and street). If you have a P.O. box, see	instructions.				A	pt. no.	Pre	siden	tial Election	Campaign
26493 E	UNIV	/ERSITY DR					6	32			ere if you, o	
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete spaces b	below.	Sta	te	ZIP c	ode			f filing jointly this fund. C	
AUBREY					TX	2	762	27		•	w will not c	0
Foreign country	/ name		Foreign	province/state/	count	У	Foreig	n postal cod	e you	ur tax	or refund.	_
											You	Spouse
Digital	At ar	ny time during 2022, did you: (a) rec	eive (as a rewa	ard, award, or	payn	nent for prope	rty or	services);	or (b) s	sell,		
Assets	exch	ange, gift, or otherwise dispose of a	a digital asset ((or a financial i	ntere	est in a digital	asset)	? (See inst	ructio	ns.)	Ves	X No
Standard	Som	eone can claim: 🗌 You as a de	pendent] Your spous	e as	a dependent						
Deduction		Spouse itemizes on a separate retur	n or you were	a dual-status	alien							
Age/Blindness	You:	Were born before January 2, 1	958 🗌 Are	blind Spo	ouse	: 🗌 Was bor		ore Januar			🗌 Is blin	
Dependents	s (see	instructions):	(2) Social security		(3) Relationsh	ip (4) Check the	box if	qualifi	es for (see in	structions):
If more	(1) Fi	rst name Last name		number		to you		Child tax	credit	C	Credit for othe	r dependents
than four]
dependents, see instructions]
and check]
here]
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see instr	uctions) .						1a	120),464.
	b	Household employee wages not re	eported on For	rm(s) W-2 .						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see instructio	ons)						1c		
attach Forms	d	Medicaid waiver payments not rep	orted on Form	n(s) W-2 (see ii	nstru	ictions)				1d		
W-2G and	е	Taxable dependent care benefits f	rom Form 244	1, line 26						1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from Form	1 8839, line 29						1f		
lf you did not	g	Wages from Form 8919, line 6 .								1g		
get a Form	h	Other earned income (see instruct	ions)							1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instruction	is)		1 i						
	z	Add lines 1a through 1h								1z	120	0,464.
Attach Sch. B	2a	Tax-exempt interest	2a		b Ta	axable interest	: .			2b		
if required.	3a	Qualified dividends	3a		b O	rdinary divide	nds .			3b		
	4a	IRA distributions	4a		b Ta	axable amoun	t			4b		
Standard	5a	Pensions and annuities	5a		b Ta	axable amoun	t			5b		
Deduction for-	6a	Social security benefits	6a			axable amoun				6b		
 Single or Married filing 	с	If you elect to use the lump-sum e	lection method	d, check here	(see	instructions)						
separately, \$12,950	7	Capital gain or (loss). Attach Sche								7	1	
Married filing	8	Other income from Schedule 1, lin								8	-13	3,667.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							.	9		5,797.
surviving spouse,	10	Adjustments to income from Sche		-					.	10		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								11	106	5,797.
household,	12	Standard deduction or itemized	• -	-						12		2,950.
\$19,400 • If you checked	13	Qualified business income deduct				5-A				13	<u> </u>	<u>.,,,,,,,</u>
any box under	14	Add lines 12 and 13			555	• <i>·</i> ····	• •		•	14	1 /	2,950.
Standard Deduction,	15	Subtract line 14 from line 11. If zer		••••••••••••••••••••••••••••••••••••••	 our t	axable incom	 e		•	15		3,847.
see instructions.					Jarl				·	10	9.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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

Form **1040** (2022)

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	16,354.
Credits	17	Amount from Schedule 2, lir	ne3						17	
	18	Add lines 16 and 17							18	16,354.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, lir	ne8						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18							22	16,354.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is	your total tax						24	16,354.
Payments	25	Federal income tax withheld								
2	а	Form(s) W-2				25a	20,	232.		
	b	Form(s) 1099				25b				
	с	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	20,232.
If	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return				26	
If you have a l qualifying child,	27	Earned income credit (EIC)			No	27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir				31				
	32	Add lines 27, 28, 29, and 31				undable	credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments	- 				33	20,232.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you o	verpaid		34	3,878.
neiuliu	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	3 is attached, che	ck here		. 🗆	35a	3,878.
Direct deposit?	b	Routing number 1 2 2] Checkii				
See instructions.	d	Account number 5 9 3					Ŭ	•		
	36	Amount of line 34 you want	applied to your	2023 estimate	ed tax	36	-			
Amount	37	Subtract line 33 from line 24	. This is the am	ount vou owe						
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> u	//Payments or	see instructions				37	
	38	Estimated tax penalty (see in	nstructions) .			38				
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See				
Designee	ins	tructions				[Yes. Cor	nplete b	elow.	🗙 No
		signee's		Phone			Person numbe	al identifi	cation	
	nai			no.				. ,		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and corr								
Here		ur signature		Date	Your occupation					nt you an Identity
	10	al oignataro		Duto						IN, enter it here
Joint return?					SOFTWARE I	ENGINI	EER	(see ii	nst.)	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupat	ion				nt your spouse an
your records.								(see in		ection PIN, enter it here
	Dh	(0.20)	6	Email address		יוחים ד		(,	
		one no. (928)225-679 eparer's name	b Preparer's signat		SK2292@NAU	Date		PTIN		Check if:
Paid		PRIYA RAM SAGAR GUPTA TALLAM						02082	702	Self-employed
Preparer		n's name GLOBAL TA		TAUAU UAUAU	GOFIA IAUUAM	102/10				678)965-9522
Use Only			Y CT E BRU	NGWICK N	J 08816			Firm's		-
Co to warning in -		a1040 for instructions and the late		TIONICIC IN	D 08810		0/00 DE 2			84-3171965

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

BAA REV 02/10/23 PRO

Form **1040** (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

2022 Attachment Sequence No. 01

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security r
SAMBASHIVA REDDY KETHIREDDY	844-73-5836

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. Att	ach Schedule E .	5	-13,667.
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 ()	
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	10.66-
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	a, or 1040-NR, line 8	10	-13,667.

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

Schedule 1 (Form 1040) 2022

Parl	II Adjustments to Income						-	
11	Educator expenses					11		
12	Certain business expenses of reservists, performing artists, and fee	-basi	s aov	vernme	ent 🗌			
	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						9a		
b	Recipient's SSN							
	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		
3	Archer MSA deduction					23		
24	Other adjustments:			• •	· F			
		24a						
	Deductible expenses related to income reported on line 81 from the							
~		24b						
с	Nontaxable amount of the value of Olympic and Paralympic medals							
Ŭ	and USOC prize money reported on line 8m	24c						
d		24d						
	Repayment of supplemental unemployment benefits under the Trade	210						
C	Act of 1974	24e						
f	Contributions to section 501(c)(18)(D) pension plans	24f						
		24g						
	Attorney fees and court costs for actions involving certain unlawful	<u></u>						
		24h						
;	Attorney fees and court costs you paid in connection with an award	<u></u>						
	from the IRS for information you provided that helped the IRS detect							
	tax law violations	24i						
i	Housing deduction from Form 2555	24j						
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	<u>-</u>						
n		24k						
z	Other adjustments. List type and amount:							
2		24z						
5	Total other adjustments. Add lines 24a through 24z					25		
.5 26	Add lines 11 through 23 and 25. These are your adjustments to income					2.5		
.0	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a					26		
	BAA		02/10/23				le 1 (Form 1040	

	DULE E		Supplemen	ntal Ind	ome ar	nd Los	S S			OMB No	o. 1545-0074
(Form	1040)	(From re	ental real estate, royalties, partn	erships,	S corporat	ions, es	tates,	trusts, REMIC	s, etc.)	20	799
Departm	ent of the Treasury		Attach to Form 10	,		,				Attachn	nent
	Revenue Service		Go to www.irs.gov/Schedule	E for instr	uctions ar	nd the la	itest in				ce No. 13
. ,	shown on return									al security	
_	ASHIVA RED				. 112				844-7	3-5836	
Part			From Rental Real Estate ne business of renting personal pro				inctru	ations. If you ar	ro on indi	vidual rop	ort form
	rental inco	ome or loss	s from Form 4835 on page 2, line	40.	e Schedun	e C . See	instruc	stions. If you ar		viduai, rep	ontiann
Α	Did you make ar	ny payme	nts in 2022 that would require y	you to file	e Form(s) ⁻	1099? 5	See ins	structions		. 🗌 Ye	es 🛛 No
B	f "Yes," did you	or will yo	ou file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical addr	ress of ea	ach property (street, city, state,	, ZIP cod	e)						
Α	1-74, POCH	ARA AD	ILABAD TELANGANA IN !	504001							
В											
С											
1b	Type of Prope		For each rental real estate pro				Fa	ir Rental	Persor	nal Use	QJV
	(from list below	N)	above, report the number of t					Days	Da	iys	QUV
A	3		personal use days. Check the if you meet the requirements					365	0		
B			qualified joint venture. See in			B					
C	(December 1					С					
•••	of Property: Single Family R	acidanaa	3 Vacation/Short-Term F	Pontal	5 Land	4	7	Self-Rental			
	Multi-Family Re		4 Commercial	heillai	6 Roya	-		Other (descri	he)		
	Mana-i anny ne	Sidence	4 Commercial			anies	0				
								Propertie	es:		-
Incom						A _	F 0	В			С
3 4						5	50.				
4 Exper		ived		. 4							
5				. 5							
6	0		tructions)			2	50.				
7		-	nce								
8	•	missions									
9	Insurance .			. 9							
10		egal and other professional fees									
11						1,7	48.				
12			to banks, etc. (see instructions								
13							10				
14				. 14		3,7					
15 16	Supplies			. 15 . 16		3,1	02.				
17						2,8	59				
18			or depletion			2,0	55.				
19											
20	Total expense	s. Add lin	es 5 through 19	. 20		14,2	17.				
21	Subtract line 2	0 from lir	ne 3 (rents) and/or 4 (royalties)	. If							
			structions to find out if you mu								
				· 21		-13,6	67.				
22			estate loss after limitation, if an			10	., ((,	/	
020		-	ructions)		(13,66		() 550.	(
23a b			ported on line 3 for all rental pro ported on line 4 for all royalty p	-		•••	23a 23b		550.		
C			ported on line 12 for all propert	-	· · · ·		23D				
d			ported on line 18 for all propert				23d				
e			ported on line 20 for all propert				23e	14	,217.		
24			amounts shown on line 21. Do						24		
25			ses from line 21 and rental real e				Enter to	otal losses here	e 25	(13,667.
26			e and royalty income or (los								
	here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on							n			

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

Schedule E (Form 1040) 2022

26

-13,667.

Form 8582	
Department of the Treasury Internal Revenue Service	Go to wu

Name(s) shown on return

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 20

Attachment Sequence No. 858

Identifying number 844-73-5836

SAMBASHIVA	REDDY	KETHIREDDY	
Part I 2	022 Pas	sive Activity L	.oss
C	aution: C	Complete Parts l'	V and V before completing Part I.
Rental Real Est	tate Activ	vities With Activ	e Participation (For the definition

	al Real Estate Activities With Active Participation (For the definition of active participation, see Special ance for Rental Real Estate Activities in the instructions.)		
1a b c d	Activities with net income (enter the amount from Part IV, column (a))1a0.Activities with net loss (enter the amount from Part IV, column (b))1b(13,667.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c()Combine lines 1a, 1b, and 1c	1d	-13,667.
All Ot	her Passive Activities		· · · ·
2a b c d	Activities with net income (enter the amount from Part V, column (a))2aActivities with net loss (enter the amount from Part V, column (b))2bPrior years' unallowed losses (enter the amount from Part V, column (c))2cCombine lines 2a, 2b, and 2c	2d	
3	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	-13,667.

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.

Par	t II Special Allowance for Rei	ntal Real Estate	Activities With	Active	Par	ticipa	ation		
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruct	tions for	an e	xamp	le.		
4	Enter the smaller of the loss on line 1	d or the loss on lin	ie3					4	13,667.
5	Enter \$150,000. If married filing separ	ately, see instructi	ons		5	1	50,000.		
6	Enter modified adjusted gross income	e, but not less than	zero. See instruc	tions	6	1	20,464.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent	er -0-					
7	Subtract line 6 from line 5				7		29,536.		
8	Multiply line 7 by 50% (0.50). Do not e	nter more than \$25	,000. If married filir	ng separa	ately	, see i	nstructions	8	14,768.
9	Enter the smaller of line 4 or line 8							9	13,667.
Par	t III Total Losses Allowed								
10	Add the income, if any, on lines 1a an	d 2a and enter the	total					10	0.
11	Total losses allowed from all passiv out how to report the losses on your t		22. Add lines 9 an					11	13,667.
Par	t IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instru	ucti	ons.			
					rall gain or loss				
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Una loss (l			(d) Gair	ı	(e) Loss
1-7	4, pochara	0.	13,667.						13,667.

13,667.

0.

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c For Paperwork Reduction Act Notice, see instructions.

REV 02/10/23 PRO

Form 8582 (2022)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Part V Complete This Part Be	efore Part I, Lines 2	a, 2b,	and 2c. S	ee instruc	tions.			
	Currer	nt year		Prior years Overall gain or lo			ll gain or loss	
Name of activity	(a) Net income (line 2a)	(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain	(e) Loss	
	((0 _ 0)			
otal. Enter on Part I, lines 2a, 2b, and 2								
Part VI Use This Part if an Am		Part II,	Line 9. S	ee instruc	tions.			
Name of activity	Form or schedule and line number to be reported on (see instructions)	er (a) Loss		(b) Ratio		(c) Special allowance	(d) Subtract column (c) fron column (a).	
1-74, POCHARA	E Ln 22	-	13,667.	1.00000000		13,66	7. 0	
otal			13,667.	1.00)	13,66	7. 0	
Part VII Allocation of Unallowe					-			
Name of activity	Form or sche and line nur to be reporte (see instruct	mber ted on (a) L		Loss ((b) Ratio	(c) Unallowed loss	
otal						1.00		
Part VIII Allowed Losses. See in	nstructions.							
Name of activity	Form or schu and line nur to be reporte (see instruct	mber ed on (a) L		Loss (b) (nallowed loss	(c) Allowed loss	
otal								

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