(Rev. January 2021)

Department of the Treasury

## 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

IIILEIIIAI	nevertue del vice							
Submi	ssion Identification Number (SID)							
Taxpaye	er's name	Social secu	rity num	ber				
VEN	KATA HAREESH BHUMA	679-52-3563						
Spouse'	's name	Spouse's social security number						
Part	, ,	year you	are au	thoriz	ing.)			
	whole dollars only on lines 1 through 5.							
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		1 4	1	1 0 0	176		
1	Adjusted gross income		1			$\frac{176.}{0.07}$		
2	Total tax		2			807.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			755.		
4 5	Amount you want refunded to you		5		<u> </u>	948.		
Part			_	OUR I	eturi	٦)		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)					<u> </u>		
to send for any Agent t payment authori payment business taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected layin processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution zation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ont, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the pal identification number (PIN) below is my signature for the income tax return (original or amended) I are a service for the With the Norman and the payment is the payment of the pay	ection of the S. Treasury cated in the on to debit the the authori lests must processing ayment. I fu	transmi and its tax pre- ne entry zation. be recei of the e	ssion, design paration to this To revolved no lectron	(b) the ated F n softwaccoulocke (cap later ic paying edge t	reason inancial vare for nt. This ancel) a than 2 ment of that the		
	nic Funds Withdrawal Consent.	Г						
-	yer's PIN: check one box only	DIN	2 3	5 6	3			
×	I authorize GLOBAL TAXES LLC to enter or generate I	·	nter five		but	as my		
	signature on the income tax return (original or amended) I am now authorizing.	C	lon't ente	er all ze	ros			
Your s	I will enter my PIN as my signature on the income tax return (original or amended) I am nif you are entering your own PIN and your return is filed using the Practitioner PIN methology.  Signature Date		RO mus					
		02,00,						
Spous	se's PIN: check one box only	Г						
	I authorize to enter or generate i	my PIN				as my		
	ERO firm name		Inter five lon't ente					
	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 no					v anlı		
	if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth- below.		_			_		
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	Certification and Authentication — Practitioner PIN Method Only							
FRO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 6	1 1 0	8   6	9		
	2 I III III Enter your old algit Et III followed by your live digit our collected i III.		nter all z					
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to 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 Ir	itting this re	turn in	accord	anće v			
ERO's	signature ▶ Date ▶							
	ERO Must Retain This Form — See Instructions							
	Don't Submit This Form to the IRS Unless Requested To D	o 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.

Filing Status Check only	<b>X S</b>	Single Married filing jointly	Marrie	ed filing separately (	MFS)	Head of	household (HC	DH)		ifying survise (QSS)	viving		
one box.	•	u checked the MFS box, enter the n on is a child but not your dependent	•	our spouse. If you	check	ed the HOH or	QSS box, en	ter the c		, ,	ne qualifying		
Your first name	and mi	ddle initial	Last nar	me				Y	our soc	cial securit	ty number		
VENKATA HAREESH BH				A				6	79-5	52-3563	3		
If joint return, spouse's first name and middle initial Last				me				Sp	Spouse's social security number				
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Pı	Presidential Election Campaign				
1901 KN	IGHT:	SBRIDGERD					#9216			ere if you,	•		
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	paces below.	Sta	te	ZIP code				ntly, want \$3 Checking a		
FARMERS	BRAI	NCH			TX		75234	bd	ox belo	ow will not	change		
Foreign country	y name		F	Foreign province/state	/count	у	Foreign postal	code yo	ur tax	or refund.	Spouse		
Digital		ny time during 2022, did you: (a) rec	,				•	, ,					
Assets	exch	ange, gift, or otherwise dispose of a		<u></u>			asset)? (See	nstructi	ons.)	∐ Yes	⊠ No		
Standard Deduction	_	eone can claim:	•	•		a dependent							
Age/Blindness	You:	Were born before January 2, 1	958	Are blind <b>Sp</b>	ouse	: Was bor	n before Janı	ıary 2, 1	958	☐ Is bl	ind		
Dependents	s (see	instructions):		(2) Social securit	y	(3) Relationsh	ip (4) Check	the box i	f qualifi	ies for (see	instructions):		
If more	<b>(1)</b> Fi	rst name Last name		number		to you	Child	tax credi	t (	Credit for oth	her dependents		
than four													
dependents, see instruction	s										<u> </u>		
and check	, —												
here									$\perp$				
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a	11	11,158.		
A44	b	Household employee wages not re	•	` ,					1b 1c				
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 f		•					1e				
was withheld.	f	Employer-provided adoption benefits from Form 8839, line 29											
If you did not	g	Wages from Form 8919, line 6.							1g				
get a Form W-2, see	h	Other earned income (see instruct	,						1h		0.		
instructions.	i	Nontaxable combat pay election (s	see instr	fuctions)		<u>1i</u>				1.	11 150		
	<u>z</u>	Add lines 1a through 1h		<u>.</u>					1z		11,158.		
Attach Sch. B if required.	2a	· –	2a			axable interes			2b 3b				
	3a_		3a			rdinary divide axable amoun							
Standard	4a 5a	_	4a 5a			axable amoun			4b 5b				
Standard Deduction for—	6a		6a			axable amoun			6b				
Single or	C	If you elect to use the lump-sum e		method check here					OD				
Married filing separately,	7	Capital gain or (loss). Attach Sche		•	`	,			7	7			
\$12,950 Married filing	8	Other income from Schedule 1, lin							8		10,982.		
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9		00,176.		
Qualifying surviving spouse,	10	Adjustments to income from Sche		•					10		· · · · · · ·		
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11		00,176.		
household, \$19,400	12	Standard deduction or itemized	•						12		12,950.		
If you checked	13	Qualified business income deduct		•	,				13				
any box under Standard	14	Add lines 12 and 13							14		12,950.		
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer							15		37,226.		
JUE INSTRUCTIONS.													

Form 1040 (2022	2)							Page 2
Tax and	16	Tax (see instructions). Check if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌		. 16	14,807.
Credits	17	Amount from Schedule 2, line 3				<del></del>	. 17	
	18	Add lines 16 and 17					. 18	14,807.
	19	Child tax credit or credit for other depender	nts 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,					. 22	14,807.
	23	Other taxes, including self-employment tax	, from Schedule	e 2, line 21			. 23	0.
	24	Add lines 22 and 23. This is your <b>total tax</b>					. 24	14,807.
Payments	25	Federal income tax withheld from:						
,	а	Form(s) W-2			25a	16,7	55.	
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					. 25d	16,755.
	26	2022 estimated tax payments and amount a					. 26	
If you have a qualifying child,	27	Earned income credit (EIC)			27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 881			28			
	29	American opportunity credit from Form 886			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 you				edits .	. 32	
	33	Add lines 25d, 26, and 32. These are your t		-				16,755.
Defined	34	If line 33 is more than line 24, subtract line 2					. 34	1,948.
Refund	35a	Amount of line 34 you want refunded to yo			•	•		
Direct deposit?	b	Routing number 0 5 3 0 0 0 1			Checking			
See instructions.	d	Account number 2 3 7 0 4 4 8			'		3	
	36	Amount of line 34 you want applied to your			36			
Amount	37	Subtract line 33 from line 24. This is the am						
You Owe	0,	For details on how to pay, go to www.irs.go					. 37	
	38	Estimated tax penalty (see instructions) .			38			
Third Party	Do	you want to allow another person to dis			See			
Designee		structions				Yes. Comp	olete below.	X No
		signee's	Phone				identification	·
	na		no.			number (	,	
Sign		der penalties of perjury, I declare that I have examin ief, they are true, correct, and complete. Declaration						
Here			Date		ased on all li	iioiiiatioii o		, ,
	YO	Your signature		Your occupation				ent you an Identity PIN, enter it here
Joint return?				SOFTWARE I	ENGINEE	lR	(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	ion			ent your spouse an
Keep a copy for your records.							Identity Pro (see inst.)	tection PIN, enter it her
your rooordo.							(See IIISL.)	
		one no. (660)528-1075	Email address	HAREESHBHU			11.1	01 1 1
Paid		eparer's name Preparer's signa			Date	PT		Check if:
Preparer			I PAVAN KUM	AR DUDIPALLI	02/06/	2023   P0	2470833	
Use Only		m's name GLOBAL TAXES LLC		- 00055				(678)965-9522
	Fir	m's address 245 ROONEY CT E BRI	UNSWICK N	J 08816			Firm's EIN	88-2145487
Co to warmy im -	ou/Eo	a1040 for instructions and the latest information		D A A	DEV 04/55			Farm 1040 (200)

# 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

VENKATA HAREESH BHUMA

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

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
679-52	-3563

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	-10,982.
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 (	<u>)</u>	
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		
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		
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80	-	
p	Section 461(I) excess business loss adjustment	8p		
q	Scholarship and fellowship grants not reported on Form W-2	8q 8r		
r s	Nontaxable amount of Medicaid waiver payments included on Form	OI		
5	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or	05 (	4	
·	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
u Z	Other income. List type and amount:	OU		
~		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		_	-10 982

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 <b>adjustments to income</b> . 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 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.

2022 Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number VENKATA HAREESH BHUMA 679-52-3563 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) KURNOOL ROAD ONGOLE ANDHRA PRADESH IN 523002 Α В C **Fair Rental** 1b Type of Property **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: 3 520. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,200. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . 11 1,000. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,880. 14 14 Repairs . . . 15 Supplies 15 1,320. 16 16 Taxes 4,142. 17 17 1,960. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 11,502. 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 -10,982. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 10,982.) 520. 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 11,502. 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

26

10,982.

-10,982.

25

Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here

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.

**Passive Activity Loss Limitations** 

See separate instructions.

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

OMB No. 1545-1008

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.

2022	
Attachment Sequence No. <b>858</b>	

VENE	CATA HAREESH BHUMA				679	-52	-3563		
Par	2022 Passive Activity Loss Caution: Complete Parts IV ar		eting Part I.						
	l Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, s	ee <b>Special</b>				
1a b c d	c Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c (								
All Ot	her Passive Activities								
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (	)	2d			
3	our return; Report the	3	-10,982.						
	on: If your filing status is married filing	loss (and line 1d is	,,			year,	do not complete		
	. Instead, go to line 10.  t II Special Allowance for Rei	ntal Real Estate	Activities With	Active Particin	ation				
ı aı	Note: Enter all numbers in Par			-					
4 Enter the smaller of the loss on line 1d or the loss on line 3							10,982.		
7 8	on line 9. Otherwise, go to line 7.  Subtract line 6 from line 5  Multiply line 7 by 50% (0.50). <b>Do not</b> e			7	38,842.	8	19,421.		
9	Enter the <b>smaller</b> of line 4 or line 8			•		9	10,982.		
Par	III Total Losses Allowed								
10 11	Add the income, if any, on lines 1a an <b>Total losses allowed from all passiv</b>					10	0.		
	out how to report the losses on your t					11	10,982.		
Par	Complete This Part Before	e Part I, Lines 1 ⊺	<b>a, 1b, and 1c.</b> S	ee instructions.					
	Name of activity	Currei	nt year	Prior years	Ove	rall ga	ain or loss		
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain		(e) Loss		
KURI	NOOL ROAD	0.	0. 10,982.				10,982.		

10,982.

0.

BAA

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

Form 8582 (2022) Page **2** 

Part V Complete This Part Befor	e P	art I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instruc	ctions.			•	
Name of activity		Currer	nt year	ar Prior		/ears Over		ll ga	ain or loss	
i tame of activity		(a) Net income (line 2a)		Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c										
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II,	<b>Line 9.</b> S	ee instruc	tions.				
Name of activity	Form or schedule		(a	a) Loss (b) Rat		atio	(c) Special allowance		(d) Subtract column (c) from column (a).	
KURNOOL ROAD		E Ln 22		10,982.	1.0000	0000	10,98	2.	0.	
Total				10,982.	1.00	0	10,98	2.	0.	
Part VII Allocation of Unallowed L	oss	<b>ses.</b> See instr	uction	S.						
Name of activity	Form or sche and line nur to be reporte (see instruct		mber ed on (a) L		Loss		(b) Ratio		(c) Unallowed loss	
Total							1.00			
Part VIII Allowed Losses. See instru	ucti	ons.								
Name of activity		Form or sched and line numb to be reported (see instructio		mber ed on (a) L		(b) Unallowed loss		(c) Allowed loss		
		l								
Total										