Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayer's name	Social security number				
PREM SAI PRANEETH KALIPINDI	096-29-4742				
Spouse's name	Spouse's social security number				
Part I Tax Return Information – Tax Year Ending December 31, 2022 (Enter	year you are authorizing.)				
Enter whole dollars only on lines 1 through 5.	<u> </u>				
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1 Adjusted gross income	1 92,313.				
2 Total tax	2 13,080.				
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3 14,898.				
4 Amount you want refunded to you	. 4 1,818.				
5 Amount you owe					

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a 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 9 4 4 2 X lauthorize GLOBAL TAXES LLC to enter or generate my PIN as my Enter five digits, but ERO firm name don't enter all zeros signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or 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. 02/19/2023 Your signature Date Spouse's PIN: check one box only I authorize to enter or generate my PIN as mv ERO firm name Enter five digits, but don't enter all zeros signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or 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 signature ► Date Practitioner PIN Method Returns Only—continue below Certification and Authentication – Practitioner PIN Method Only Part III 2 2 ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 4 9 6 6 1 9 8 9 Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual 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 🕨	Date ►						
ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So							
For Demonstral, Deduction Act Nation and second		Corm 9970 (Day, 01 0001)					

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

1040)-[VR Department of the Treasury-Inter U.S. Nonresident Ali	nal Rever	nue Service COME Tax Re	eturn	2022	OMB No	1545-00	174 IF	RS Use Only—Do not write or staple in this space.
For the year Jar	ı. 1–I	Dec. 31, 2022, or other tax year beginn	ing	,	2022, ei	nding		, 20		See separate instructions.
Filing Status Check only one box.		Single Married filing sepa you checked the QSS box, enter the ch] Esta						
Your first name	and	middle initial	Last na	ame						entifying number
										ructions)
PREM SAI				PINDI				0	96-2	29-4742
		ber and street). If you have a P.O. box CRE CREEK CIR	, see ins	structions.						Apt. no.
		ffice. If you have a foreign address, als	so comp	lete snaces below			State			ZIP code
CHARLOTTE			000000		•		NC			28262
Foreign country		16	Foreig	n province/state/co	ounty		-	in posta		
0,										
Digital Assets	At a oth	any time during 2022, did you: (a) recei erwise dispose of a digital asset (or a f	ve (as a inancial	reward, award, or interest in a digital	paymer asset)?	nt for property or (See instructions	services) s.)	; or (b) : 	sell, e	exchange, gift, or Yes X No
Dependents							(4)	Check th	e box	if qualifies for (see inst.):
(see instructions):		(1) First name Last name		(2) Dependent's identifying numb		(3) Relationship to	vou	Child tax	credit	Credit for other dependents
		()				(,, , , , , , , , , , , , , , , , , , ,				
If more than four dependents, see										
instructions and										
check here										
Income	1 a	Total amount from Form(s) W-2, box	•	,				- F	1a	101,463.
Effectively	b	Household employee wages not rep							1b	
Connected	c	Tip income not reported on line 1a (s							1c	
With U.S.	d	Medicaid waiver payments not report							1d	
Trade or	e f	Taxable dependent care benefits fro Employer-provided adoption benefit						-	1e 1f	
Business	g	Wages from Form 8919, line 6						F	1g	
Attach	9 h								1h	
Form(s) W-2, 1042-S,	i									
SSA-1042-S,	j									
RRB-1042-S, and 8288-A	k									
here. Also		line 1(e)				. 1k				
attach Form(s)	z	Add lines 1a through 1h	· ·					- F	1z	101,463.
1099-R if	2a	Tax-exempt interest 2a	-			ble interest		H	2b	
tax was	3a	Qualified dividends 3a	-			nary dividends .			3b	
withheld. If you did not	4a 5a	IRA distributions 4a Pensions and annuities 5a				ble amount ble amount		- F	4b 5b	
get a Form	5а 6	Reserved for future use						-	<u>50</u> 6	
W-2, see instructions.	7	Capital gain or (loss). Attach Schedu							7	
instructions.	8	Other income from Schedule 1 (Forn	,	, ,				-	8	-9,150.
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8						E E E	9	92,313.
	10	Adjustments to income:								
	а	From Schedule 1 (Form 1040), line 2								
	b	Reserved for future use								
	C L	Reserved for future use							104	
	d 11	Enter the amount from line 10a. The Subtract line 10d from line 9. This is	-					T T	10d 11	02 212
	12	Itemized deductions (from Schedu	-							92,313.
		deduction (see instructions)					in US/India		12	12,950.
	13a	Qualified business income deduction				1 1				
	b	Exemptions for estates and trusts or	nly (see i	instructions)		. 13b				
	с	Add lines 13a and 13b]	13c	
	14							-	14	12,950.
	15	Subtract line 14 from line 11. If zero							15	79,363.
For Disclosure,	Priva	acy Act, and Paperwork Reduction Act	Notice,	see separate instru	uctions.	BAA	REV 02/14	/23 PRO	F	Form 1040-NR (2022)

Form **1040-NR** (2022)

Form 1040-NR (2022)							Page 2
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 88	14 2 497	2 3 🗌		16	13,080.
Credits	17	Amount from Schedule 2 (Form 1040), line	3				17	0.
	18	Add lines 16 and 17					18	13,080.
	19	Child tax credit or credit for other depende	ents from Schedu	le 8812 (Form 10	40)		19	
	20	Amount from Schedule 3 (Form 1040), line				f	20	
	21	Add lines 19 and 20				T I I I I I I I I I I I I I I I I I I I	21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0				22	13,080.
	23a	Tax on income not effectively connected w	ith a U.S. trade o	r business from				
		Schedule NEC (Form 1040-NR), line 15 .			23a			
	b	Other taxes, including self-employment tax		().				
		line 21			23b			
	С	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c				T I I I I I I I I I I I I I I I I I I I	23d	
	24	Add lines 22 and 23d. This is your total tax	K				24	13,080.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2				4,898.		
	b	Form(s) 1099			25b			
	c	Other forms (see instructions)			25c			14 000
	d	Add lines 25a through 25c				ł	25d	14,898.
	e	Form(s) 8805				t	25e	
	f	Form(s) 8288-A				t	25f	
	g	Form(s) 1042-S					25g	
	26	2022 estimated tax payments and amount					26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedule 8	, ,		28			
	29 30	Credit for amount paid with Form 1040-C			29			
		Reserved for future use			30 31			
	31 32	Amount from Schedule 3 (Form 1040), line Add lines 28, 29, and 31. These are your to					20	
	32 33	Add lines 25d, 25e, 25f, 25g, 26, and 32. T				r i	32 33	14,898.
Refund	34	If line 33 is more than line 24, subtract line					34	14,898.
neiulia	35a	Amount of line 34 you want refunded to y			•	1	35a	1,818.
Direct deposit?	b	Routing number $\begin{vmatrix} 0 & 8 & 1 \end{vmatrix} 9 \begin{vmatrix} 0 & 4 \end{vmatrix}$		c Type: X		Savings	004	1,010.
See instructions.	d	Account number 2 9 1 0 2 8				Cavings		
	e	If you want your refund check mailed to an			<u>i</u> s not shown or	nage 1		
	Ũ							
	36	Amount of line 34 you want applied to you			36			
Amount	37	Subtract line 33 from line 24. This is the ar						
You Owe		For details on how to pay, go to www.irs.g	ov/Payments or s	ee instructions .			37	
	38	Estimated tax penalty (see instructions) .			38			
Third	Do yo	w want to allow another person to discuss t	his return with the	e IRS? See instruc	ctions. 🗌 Y	es. Comple	te below.	X No
Party	Desig	nee's	Phone		Perso	nal identific	ation	
Designee	name		no		numb	er (PIN)		
		penalties of perjury, I declare that I have examined						
Sign		they are true, correct, and complete. Declaration o			o on all informatio		•	, ,
-	Your	signature	Date	Your occupation				you an Identity , enter it here
Here				IT EMPLOYE	F.	(see i		
	Phone	<u>e no</u>	Email address		<u> </u>	(0001		
Delet			s signature		Date	PTIN	Ch	eck if:
Paid		SYAM PR	IYA RAM SAGAR	GUPTA TALLAM	02/20/2023	P02082		Self-employed
Preparer	Firm's	s name SYANLERENALRAMARKES GUILTE TALL			, ,,_,_,	Phone no		965-9522
Use Only		saddress 245 ROONEY CT E BR		08816		Firm's Ell	(• • •)	3171965
Go to www.irs.		m1040NR for instructions and the latest inform			REV 02/14/23 PF			1040-NR (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

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** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number PREM SAI PRANEETH KALIPINDI 096-29-4742

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2 a	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	-9,150.
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		
, i	Activity not engaged in for profit income	<u>8j</u>		
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)	0		
		8m 8n	-	
n o	Section 951A(a) inclusion (see instructions)	80	-	
p p	Section 461(I) excess business loss adjustment	8p		
р q	Taxable distributions from an ABLE account (see instructions)	8q		
r r	Scholarship and fellowship grants not reported on Form W-2	8r		
S	Nontaxable amount of Medicaid waiver payments included on Form			
Ŭ	1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
-	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR	, or 1040-NR, line 8	10	-9,150.
or Do	norwork Poduction Act Notice, see your tay return instructions		Caleadu	la 1 (Farma 1040) 0000

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

Schedule 1 (Form 1040) 2022

Par	t II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee	-basi	s gov	vernment	:	
	officials. Attach Form 2106				12	
13	Health savings account deduction. Attach Form 8889				13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903				14	
15	Deductible part of self-employment tax. Attach Schedule SE				15	
16	Self-employed SEP, SIMPLE, and qualified plans				16	
17	Self-employed health insurance deduction				17	
18	Penalty on early withdrawal of savings				18	
19a	Alimony paid				19a	
b	Recipient's SSN	· _				
С	Date of original divorce or separation agreement (see instructions):					
20	IRA deduction				20	
21	Student loan interest deduction				21	
22	Reserved for future use				22	
23	Archer MSA deduction				23	
24	Other adjustments:					
а		24a				
b	Deductible expenses related to income reported on line 8I from the					
	rental of personal property engaged in for profit	24b				
С	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d	Reforestation amortization and expenses	24d				
е	Repayment of supplemental unemployment benefits under the Trade					
	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
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)	24h				
i	Attorney fees and court costs you paid in connection with an award					
	from the IRS for information you provided that helped the IRS detect					
	tax law violations	24i				
j	Housing deduction from Form 2555	24j				
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k				
Z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/14/23	PRO	Schedul	e 1 (Form 1040) 2022

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Go to *www.irs.gov/Form1040NR* for instructions and the latest information. Attach to Form 1040-NR.

Sequence No. 7B

6

74

Attachment

PREM SAI PRANEETH KALIPINDI

Your identifying numb
096-29-4742

Enter amount of income under the appropriate rate of tax. See instructions.

							1	(d) Other	(specify)	
Nature of Income				(a) 10%	(b) 15%	(c) 30%	(u) et illei %	(opcony) %		
1	Dividends and divide	nd ea	uivalents:							,,,
а	Dividends paid by U.				1a					
b			, corporations		1b					
С		•	nts received with respect to section 871(m) tr		1c					
2	Interest:									
а	Mortgage				2a					
b			18		2b					
С					2c					
3			s, trademarks, etc.)		3					
4			ight royalties		4					
5			, recording, publishing, etc.)		5					
6		-	natural resources royalties		6					
7					7					
8					8					
9			elow		9					
10		s of C	anada only. Enter net income in column (c)							
а	Winnings									
b	Losses				10c					
11	Gambling winnings – Note: Losses not allo	-Resic	lents of countries other than Canada.		11					
12					12					
13			columns (a) through (d)		13					
14	_		tax at top of each column		14					
15			ely connected with a U.S. trade or busines			through (d) of line 14	4. Enter the total her	e and on Form 1040-	-NR, line 23a 15	
			Capital Gains and	d Losses F	From	Sales or Excha	inges of Proper	ty		1
losses f exchan	nly the capital gains and from property sales or ges that are from sources he United States and not	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acq mm/dd/yy		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S.									
or loss	on disposing of a U.S. real									
gains a	y interest; report these nd losses on Schedule D									
(Form 1										
exchan	property sales or ges that are effectively									
	ted with a U.S. business edule D (Form 1040),		Add columns (f) and (g) of line 16					17		
	797, or both.	18	Capital gain. Combine columns (f) and ((g) of line 17	7. Ente	er the net gain here	e and on line 9 ab	ove. If a loss, ente	r-0 18	

SCHE	DUL	.Е	ΟΙ
(Form	1040)-N	R)

T

Other Information

OMB No. 1545-0074

•	1040-NR)	Go t	o www.irs.gov/Form1040N		I the latest information	.	202	22
	ent of the Treasury Revenue Service			n to Form 1040-NR. wer all questions.			Attachment Sequence N	7C
	nown on Form 1040	-NR	7410			Your identifyi		0.70
	I SAI PRANE		TNDT			096-29-	•	
A	-		vere you a citizen or nationa	al during the tax year'				
В			residence for tax purposes					
С	Have you ever	applied to be a	green card holder (lawful p	ermanent resident) of	f the United States? .		Yes	No
D	Were you ever:							
1.	A U.S. citizen?						Yes	🛛 No
2.	A green card he	older (lawful pe	rmanent resident) of the Un	ited States?			Yes	🛛 No
	If you answer "	Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rules	that apply to you.			
Е	immigration sta	tus on the last o	day of the tax year, enter y day of the tax year. <u>F1</u>				_	
F	Have you ever	changed your \	isa type (nonimmigrant sta	tus) or U.S. immigrati	on status?		Yes	🛛 No
_	If you answered	d "Yes," indicat	e the date and nature of the	e change:				
G			left the United States durin	•				
			Canada or Mexico AND cor r Mexico and skip to item H			ient intervals		
		United States	Date departed United State		ate entered United State		, parted Unite	d Statos
	mm/d		mm/dd/yy		mm/dd/yy		mm/dd/yy	u States
н	2020		vacation, nonworkdays, and , 2021	, and 20	365			
I	Did you file a U	.S. income tax	return for any prior year? . nd form number you filed:				X Yes	🗌 No
J	Are you filing a	return for a tru	st?				Yes	🗙 No
			U.S. or foreign owner unde ribution from a U.S. person					🗌 No
Κ	Did you receive	total compens	ation of \$250,000 or more	during the tax year?			Yes	X No
	If "Yes," did yo	u use an alterna	ative method to determine t	the source of this con	npensation?		Yes	🗌 No
L			f you are claiming exempti v. See Pub. 901 for more inf			tax treaty wi	ith a foreign	ı country,
1.			the applicable tax treaty art ne columns below. Attach Fo			claimed the	treaty benefi	t, and the
		(a) Cou	ntry	(b) Tax treaty article	(c) Number of month claimed in prior tax ye		mount of exe e in current ta	•
-			n Form 1040-NR, line 1k. D			-		
			preign country on any of the ts pursuant to a Competent					□ No ⊠ No

If "Yes," attach a copy of the Competent Authority determination letter to your return.	

Μ Check the applicable box if:

1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

SCHEDULE E		Supplemental Income and Loss					OMB No. 1545-0074				
(Form	1040)	(From re	ental real estate, royalties, partnersl	hips, S	corporati	ons, es	tates,	trusts, REMIC	s, etc.)	えん	199
	ent of the Treasury Revenue Service		Attach to Form 1040, Go to <i>www.irs.gov/ScheduleE</i> for					formation.		Attachm Sequend	nent ce No. 13
Name(s)	shown on return								Your socia	al security r	
PREM	SAI PRANE	ЕТН КА	LIPINDI						096-2	9-4742	
Part	Income	or Loss	From Rental Real Estate an	d Ro	valties			I			
	Note: If vo	u are in th	e business of renting personal proper	ty, use	Schedule	C. See	instru	ctions. If you ar	e an indiv	/idual, repo	ort farm
			s from Form 4835 on page 2, line 40.								
			nts in 2022 that would require you		. ,						
B	f "Yes," did you	or will yo	ou file required Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical addr	ess of ea	ch property (street, city, state, ZIF	code	e)						
Α	FLAT NO.1	DEFEN	CE COLONY SAINIKPURI TE	TANG	GANA TN	500	094				
B	1 1111 110 • 1					000	0 5 1				
C											
1b	Type of Prope	rty 2	For each rental real estate prope	rty liet	bod		Ea	ir Rental	Person		
10	(from list below		above, report the number of fair				10	Days	Da		QJV
Α	1	- /	personal use days. Check the Q			Α		365		0	
B	-		if you meet the requirements to f			B				Ű	
			qualified joint venture. See instru	ictions	3	C					
	of Property:					•					
	Single Family R	esidence	3 Vacation/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Re		4 Commercial	lai	6 Roya	ltios		Other (descri	he)		
	Multi-I armiy Ne	Siderice	4 Commercial		0 noya	ities	0				
								Propertie	es:		
Incom						Α		В			С
3	Rents received	1		3		5	50.				
4	Royalties recei	ved		4							
Exper											
5	Advertising .			5							
6	Auto and trave	l (see ins	tructions)	6							
7	Cleaning and r	naintena	nce	7		9	00.				
8				8							
9				9							
10	Legal and othe	er profess	sional fees	10							
11				11		1,5	00.				
12			to banks, etc. (see instructions)	12		,					
13				13							
14				14		2,1	00.				
15	Supplies			15			00.				
16				16			00.				
17				17							
18			or depletion	18							
19	Other (list)	•	'	19							
20	· · ·	s. Add lin	es 5 through 19	20		9,7	00.				
21	•		ne 3 (rents) and/or 4 (royalties). If			,					
			structions to find out if you must								
				21		-9,1	50.				
22			state loss after limitation, if any,								
			ructions)	22	(.	-9,15	50.)	()	()
23a		-	oorted on line 3 for all rental prope				23a	`	550.		/
b		-	ported on line 4 for all royalty prop				23b				
c			orted on line 12 for all properties				23c				
d			ported on line 18 for all properties				23d				
e			ported on line 20 for all properties				23e	g	,700.		
24			amounts shown on line 21. Do no						24		
25		-	ses from line 21 and rental real estat		-					(9,150.)
25 26		5	e and royalty income or (loss).							1	J, 100.)
20			and line 40 on page 2 do not								

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26

.

-9,150.

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

Form 8582	
Department of the Treasury Internal Revenue Service	

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

Identifying number 096-29-4742

Name(s) shown on return			
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Part I 2022 Passive Activity Loss

Caution: Complete Parts IV and V before completing Part I.

	al Real Estate Activities With Active Participation (For the definition of active participation, see Special nance 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(9,150.)Prior years' unallowed losses (enter the amount from Part IV, column (c))1c()Combine lines 1a, 1b, and 1c	1d	-9,150.
All Ot	ther 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	-9,150.

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 Rer	tal Real Estate Activities With	Active Particip	ation		
	Note: Enter all numbers in Par	t II as positive amounts. See instruct	ions for an exam	ole.		
4	Enter the smaller of the loss on line 1	d or the loss on line 3			4	9,150.
5	Enter \$150,000. If married filing separ	ately, see instructions	5 1	.50,000.		
6	Enter modified adjusted gross income	e, but not less than zero. See instruct	tions 6	.01,463.		
	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip lines 7 and 8 and enter	er -0-			
7	Subtract line 6 from line 5		7	48,537.		
8	Multiply line 7 by 50% (0.50). Do not en	nter more than \$25,000. If married filin	g separately, see	instructions	8	24,269.
9	Enter the smaller of line 4 or line 8				9	9,150.
Par	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	e activities for 2022. Add lines 9 an	d 10. See instruct	ions to find		
	out how to report the losses on your t	ax return			11	9,150.
Part	IV Complete This Part Before	e Part I, Lines 1a, 1b, and 1c. S	ee instructions.			
		Current year	Prior vears	Over	rall gain	orloss

Name of activity	Currer	nt year	Prior years	Overall gain or loss		
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss	
FLAT NO.1, DEFENCE COLONY	0.	9,150.			9,150.	
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	9,150.				
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Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

	Current year			Prior years		Overall 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	
		(10 20)	1000 ()	0 20)				
Total. Enter on Part I, lines 2a, 2b, and 2c									
Part VI Use This Part if an Amou	nt Is Shown on I	Part II,	Line 9. S	ee instruc	tions.				
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ra	atio	(c) Special allowance	0	(d) Subtract column (c) from column (a).	
FLAT NO.1, DEFENCE COLONY	E Ln 22	9,150.		1.00000000		9,150.		0.	
Total			9,150.	1.0	D	9,15	0	0.	
Part VII Allocation of Unallowed	Losses. See instr	uction	s.		-				
Name of activity	Form or sch and line nur to be reporte (see instruct	nber ed on	(a) I	LOSS		(b) Ratio	(c) (Jnallowed loss	
Total						1.00			
Part VIII Allowed Losses. See inst	ructions.		1						
Name of activity	Form or sch and line nur to be reporte (see instruct	nber ed on	(a) I	Loss (b) U) Unallowed loss		(c) Allowed loss	
Total									

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Form **8582** (2022)