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

Submis	sion Identification Number (SID)		-			
Taxpayer	Social secur	curity number				
DIVY	DIVYA KALA SREE ANNAMREDDY 727-2					
Spouse's name Spouse's social security no					ber	
SRI	SAI HARISH ANUMALA	596-29	9-008	3		
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you	are au	thorizin	ıg.)	
Enter v	hole dollars only on lines 1 through 5.					
Note: F	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1		34,506	
	Total tax		2	-	15,127	
	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		14,409	
	Amount you want refunded to you		4			_
	Amount you owe		5		718	<u>. </u>
Part I	Taxpayer Declaration and Signature Authorization (Be sure you get and k	eep a co	by of y	our re	turn)	_
return (of to send for any Agent to payment authorize payment business taxes to personal	wledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmirmy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected play in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate t, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requised as days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment information necessary to answer inquiries and resolve issues related to the payment (PIN) below is my signature for the income tax return (original or amended) I and ic Funds Withdrawal Consent.	tter, or elect ction of the S. Treasury a cated in the n to debit the the authorizests must be crocessing of ayment. I fu	ronic retransmistand its of tax preparation. The receipt the electron are receipt the raceipt the race	turn origing ssion, (b) ssion, (b) designation sto this acrow to revoked no lectronic sknowled	inator (ERO) the reaso ed Financi software foccount. The e (cancel) later than payment	O) ial or nis of of he
	ver's PIN: check one box only				\neg	
X	l authorize GLOBAL TAXES LLC to enter or generate r	ny PINI	7 2	2 8 8	∃ as m	11/
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř E		digits, bu er all zero	ıt	у
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.					
Your si	gnature ▶ Date ▶					
Spaus	e's PIN: check one box only					
· —	-	nv PIN	0 0	0 8 3		
×	I authorize GLOBAL TAXES LLC to enter or generate r			diaits. bu		У
	signature on the income tax return (original or amended) I am now authorizing.			er all zero		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN methodelow.					
Spouse	e's signature ► Date ►					
	Practitioner PIN Method Returns Only—continue below					
Part I	Certification and Authentication — Practitioner PIN Method Only					_
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't en	6 6 ter all ze	1 9 eros	8 9	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taxed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subminents of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Income.	tting this ref	urn in a	accordar	ice with the	
FRO's	signature ► Date ►					
	FRO Must Retain This Form — See Instructions					_

Don't Submit This Form to the IRS Unless Requested To Do So

Form 1040-V (2022) 2022 Page **2**

IF you live in	THEN use this address to send in your payment
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code section 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

Form **1040-V** 2022

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury Internal Revenue Service 2022

Form 1040-V Payment Voucher

▶ Use this voucher when making a payment with Form 1040.

► Do not staple this voucher or your payment to Form 1040.

► Make your check or money order payable to the 'United States Treasury.'

► Write your social security number (SSN) on your check or money order.

Enter the amount of your payment

718.

REV 02/24/23 PRO

1555

DIVYA KALA SREE ANNAMREDDY SRI SAI HARISH ANUMALA 22E READING RD EDISON NJ D&&17 INTERNAL REVENUE SERVICE
P.O. BOX 931000
LOUISVILLE, KY 40293-1000

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-0074

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

Filing Status Check only	s 🗌 S	Single X Married filing jointly [Marrie	ed filing separatel	y (MFS)	☐ Head of	household (H	OH)		ifying sur ise (QSS)	
one box.	-	u checked the MFS box, enter the r	-	our spouse. If yo	u check	ed the HOH or	QSS box, er	nter th	e child's	name if t	he qualifying
Your first name		on is a child but not your dependen	Last na	mo					Vour so	nial coouri	ity number
											•
DIVYA K		S KEE s first name and middle initial	+	MREDDY						29-728	
•			Last na						· ·		ecurity number
SRI SAI		r and street). If you have a P.O. box, se	ANUM				Ant no			29-008	
			e instructio	oris.			Apt. no.			itial Electi ere if you	ion Campaigr
22E REAL			omploto o	nagaa halaw	Cto	to.	ZIP code				ntly, want \$3
	osi onic	ce. If you have a foreign address, also c	ompiete s	paces below.	Sta				to go to	this fund.	. Checking a
EDISON			Τ,		No.		08817	aada		ow will not or refund	•
Foreign countr	y name			Foreign province/sta	ate/coun	У	Foreign postal	code	your tax	You	Spouse
Digital	At ar	ny time during 2022, did you: (a) red	ceive (as	a reward, award,	or payr	nent for prope	rty or service	s); or	(b) sell,		
Assets		ange, gift, or otherwise dispose of					-			☐ Yes	⊠ No
Standard	Som	eone can claim:	ependent	Your spo	ouse as	a dependent					
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-stat	us alien						
Age/Blindnes	s You:	☐ Were born before January 2,	1958	Are blind	Spouse	: Was bo	rn before Jan	uary 2	2, 1958	☐ Is b	olind
Dependent	s (see	instructions):		(2) Social secu	urity	(3) Relationsh	ip (4) Check	the b	ox if qualif	ies for (see	e instructions):
If more	(1) Fi	rst name Last name		number		to you	Child	tax c	redit	Credit for o	ther dependents
than four											
dependents, see instruction	s ——										
and check _											
here											
Income	1a	Total amount from Form(s) W-2, b	oox 1 (se	e instructions) .					. 1a	1	48,486.
	b	Household employee wages not it							. 1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	a (see ins	structions)					. 1c		
attach Forms	d	Medicaid waiver payments not re	ported o	n Form(s) W-2 (se	ee instru	ctions)			. 1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits	from For	m 2441, line 26					. 1e		
was withheld.	f	Employer-provided adoption ben-	efits from	n Form 8839, line	29 .				. 1f		
If you did not	g	Wages from Form 8919, line 6 .							. 1g		
get a Form	h	Other earned income (see instruc	tions) .						. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i					
	Z	Add lines 1a through 1h							. 1z	1	48,486.
Attach Sch. B	2a	Tax-exempt interest	2a		b T	axable interes	t		. 2b		
if required.	3a	Qualified dividends	3a	1.	b C	rdinary divide	nds		. 3b		30.
	4a	IRA distributions	4a		b T	axable amoun	t		. 4b		
Standard	5a	Pensions and annuities	5a		b T	axable amoun	t		. 5b		
Deduction for— Single or	6a	Social security benefits	6a			axable amoun	t		. 6b	-	
Married filing	С	If you elect to use the lump-sum		*	`	,		. L			
separately, \$12,950	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here						_			
Married filing jointly or	8	Other income from Schedule 1, lin							. 8		14,010.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7			income	9			. 9	1	34,506.
surviving spouse, \$25,900	10	Adjustments to income from Sche	edule 1, l	ine 26					. 10		
Head of	11	Subtract line 10 from line 9. This i	•	-					. 11		34,506.
household, \$19,400	12	Standard deduction or itemized							. 12		25 , 900.
If you checked any box under	13	Qualified business income deduc							. 13		0.
Standard	14	Add lines 12 and 13							. 14		25 , 900.
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ero or les	s, enter -0 This	is your t	axable incom	ne		. 15	1	08,606.

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	15,127.
Credits	17	Amount from Schedule 2, lin	e3					17	
	18	Add lines 16 and 17						18	15,127.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	e8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	15,127.
	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	15,127.
Payments	25	Federal income tax withheld							
,	а	Form(s) W-2				25a 14	,409.		
	b	Form(s) 1099				25b		1	
	С	Other forms (see instructions				25c		1	
	d	Add lines 25a through 25c	,					25d	14,409.
	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		1	
	29	American opportunity credit				29		1	
	30	Reserved for future use .		•		30			
	31	Amount from Schedule 3, lin				31		1	
	32	Add lines 27, 28, 29, and 31						32	
	33	Add lines 25d, 26, and 32. T	•	•	-			33	14,409.
	34	If line 33 is more than line 24						34	
Refund	35a	Amount of line 34 you want	-					35a	
Direct deposit?	b	Routing number X X X					· □ Savings	OOG	
See instructions.	d	Account number X X X					Cavings		
	36	Amount of line 34 you want a				 			
Amount			••			30		_	
You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	718.
	38	Estimated tax penalty (see in	•	•		38		31	710.
Third Party		you want to allow another							
Designee		structions	•				omplete b	elow.	X No
	De	signee's		Phone		Pers	onal identif	ication	
	naı	me		no.		num	ber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here	Yo	ur signature		Date	Your occupation				nt you an Identity
laint vatuum?					SDET		(see		IN, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, t	ooth must sign	Date	Spouse's occupat	rion			I I I I I I I I I I I I I I I I I I I
Keep a copy for	Ор	Spouse's signature. If a joint return, both must sign.							ection PIN, enter it here
your records.					SOFTWARE :	ENGINEER	(see	nst.)	
	Ph	one no. (848) 216-669	9	Email address	DIVYA.A66	99@GMAIL.CC	M		
Doid	Pre	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/02/2023	P02082	2703	Self-employed
Preparer	Fire	m's name GLOBAL TAX	KES LLC			·			(678) 965-9522
Use Only	Fire		Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-3171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/24/23 PRO			Form 1040 (2022)
0									. ,

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment

Department of the Treasury Inter

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

internal Revenue Service	Sequence No. U				
Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social					
D ANNAMREDDY & S ANUMALA	727-29-7288				
Part I Additional Income					

Par	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	-14,010.
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		
- 1	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	14 010
10	Compine lines i inrollan / and 9. Enter here and on Form 1040, 1040-SR	or 1040-NB line 8	10	-14.010

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 government		
	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			
		24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	• • • • • • • • • • • • • • • • • • • •	24c		
d	' '	24d		
е	Repayment of supplemental unemployment benefits under the Trade			
		24e	_	
f		24f	-	
g	• • • • • • • • • • • • • • • • • • • •	24g	-	
h	Attorney fees and court costs for actions involving certain unlawful			
	·	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			
		24i	-	
j		24j	-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k	-	
Z	Other adjustments. List type and amount:	0.4		
0-		24z	0.5	
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. Enter here and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number D ANNAMREDDY & S ANUMALA 727-29-7288 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 . ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) FLAT NO:404, SRI SAI SATYA PLAZA TANUKU, WEST GODAVARI, ANDHRA PRADESH IN 534211 Α В C 1b Type of Property For each rental real estate property listed **Fair Rental Personal Use** 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: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 580. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 950. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,185. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 4,159. 14 14 Repairs 3,815. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,860. 18 2,621. 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 14,590. 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 21 -14,010. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 14,010.) 580. 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 2,621. 23d Total of all amounts reported on line 18 for all properties 14,590. 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 14,010. 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 .

-14,010.

Form **8995**

Department of the Treasury

Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2022

Attachment Sequence No. **55**

Name(s) shown on return $\begin{tabular}{lll} D & ANNAMREDDY & S & ANUMALA \end{tabular}$

Your taxpayer identification number 727-29-7288

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name (b) Taxpayer identification number			(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
v					
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2			
3	Qualified business net (loss) carryforward from the prior year	3 (
4 5	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-Qualified business income component. Multiply line 4 by 20% (0.20)	4	5		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 2.			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 2.			
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	0.	
10	Qualified business income deduction before the income limitation. Add lines 5 and	19	10	0.	
11	Taxable income before qualified business income deduction (see instructions)	11 108,606.			
12	Net capital gain (see instructions)	12 1.			
13	Subtract line 12 from line 11. If zero or less, enter -0	13 108,605.			
14	Income limitation. Multiply line 13 by 20% (0.20)		14	21,721.	
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	enter this amount on			
	the applicable line of your return (see instructions)		15	0.	
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than	zero, enter -0	16	(0.)	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0-	nd 7. If greater than	17	(0.)	

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number D ANNAMREDDY & S ANUMALA Sch E FLAT NO:404, 727-29-7288 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 1,080,000. Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 2,700,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 **10** Carryover of disallowed deduction from line 13 of your 2021 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2022 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2022 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. SIL g 25-year property h Residential rental 27.5 yrs. MM S/L 01/22 75,200. 2,621 27.5 yrs. S/L MM property 39 yrs. ММ S/L i Nonresidential real S/L property MM Section C-Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L **b** 12-year 30 yrs. ММ S/I_ c 30-year ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 2,621. 22

portion of the basis attributable to section 263A costs . . .

23 For assets shown above and placed in service during the current year, enter the

23

BAA