Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submi	ssion Identification Number (SID)					
Taxpaye	r's name	Social securit	y number			
ANAI	ANAND VAKKALAGADDA 071-47-					
Spouse'	ial security numb	er				
LEPA	-9385					
Part	Tax Return Information — Tax Year Ending December 31, 2022 (Enter	year you a	re authorizing	g.)		
Enter v	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 7	7,344.		
2	Total tax		2	5,760.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	6,811.		
4	Amount you want refunded to you		4	1,051.		
5	Amount you owe		5			
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a copy	y of your ret	urn)		
return (to send for any Agent t paymer authoriz paymer busines taxes to persona	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, transmorthy return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejudelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account induit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requision and the payment (settlement) date. I also authorize the financial institutions involved in the corrective confidential information necessary to answer inquiries and resolve issues related to the pain didentification number (PIN) below is my signature for the income tax return (original or amended) I and information necessary.	itter, or electro- ection of the trans. Treasury are icated in the taton to debit the et the authorization such uests must be processing of payment. I furt	nic return origin ansmission, (b) and its designated as preparation so entry to this accuration. To revoke received no la the electronic per acknowledge	ator (ERO) the reason d Financial oftware for count. This (cancel) a ter than 2 payment of the that the		
	yer's PIN: check one box only			1		
X		my DINI 7	7 6 7 7	ac my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	er five digits, but n't enter all zeros	as my		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.					
Your s	ignature ▶ Date ▶					
Cnous	e's PIN: check one box only					
. –		DINI 0	0 3 0 5]		
X	I authorize GLOBAL TAXES LLC to enter or generate ERO firm name	-	9 3 8 5 er five digits, but	,		
	signature on the income tax return (original or amended) I am now authorizing.		i't enter all zeros			
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and 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					
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 6 1 9 er all zeros	8 9		
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income to the tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	nitting this retu	rn in accordand			
FRO'°	signature ▶ Date ▶					
LI 10 S	ERO Must Retain This Form — See Instructions					
	ENG IVIUSI NEIGIII IIIIS FUIIII — SEE IIISII UCIIONS					

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

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

2022	
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OMB No. 1545-0074

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

Check only		Single Married filing jointly u checked the MFS box, enter the na	_	ed filing separately (M				·		spou	ise (QSS)	_	
one box.		on is a child but not your dependent		rour spouse. If you cr	IECKE	ed the non or	Q33 b0.	k, ente	ruie	Cilia S	name ii u	le qualifying	
Your first name	and mi	ddle initial	Last na	me					1	Your so	cial securi	ty number	
ANAND			VAKK	ALAGADDA					071-47-7677				
	oouse's	first name and middle initial	Last na						Spouse's social security num				
LEPAKSHI			MADD	IPATLA					598-08-9385				
		r and street). If you have a P.O. box, see					Apt.	no.				ion Campaign	
7635 TIM	IBERI	LIN PARK BLVD					1 ' 1 '				Check here if you, or your		
		ce. If you have a foreign address, also co	mplete s	paces below.	Stat	e	ZIP code	IP code sp		spouse if filing jointly, want			
JACKSONV	ILLE	[FL		32256		to go to this fund. Checking box below will not change			•	
Foreign country	name		F	oreign province/state/o	county	,	Foreign p				or refund	•	
											You	Spouse	
Digital Assets		y time during 2022, did you: (a) reco									Yes	⊠ No	
Standard		eone can claim: You as a de											
Deduction	_	Spouse itemizes on a separate return	'	-									
Age/Blindness	You:	☐ Were born before January 2, 1	958	Are blind Spo	use:	☐ Was bor	rn before	Janua	ry 2,	1958	☐ Is b	lind	
Dependents	(see	instructions):		(2) Social security		(3) Relationsh	nip (4) C	neck th	e box	if qualif	ies for (see	instructions):	
If more		rst name Last name		number		to you	(Child ta	x cre	dit	Credit for ot	ther dependents	
than four													
dependents, see instructions													
and check	,												
here													
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)						1a	:	85,779.	
	b	Household employee wages not re	ported	on Form(s) W-2						1b			
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c				
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d				
W-2G and 1099-R if tax	е	Taxable dependent care benefits from Form 2441, line 26						1e					
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29						1f			
If you did not	g	Wages from Form 8919, line 6.								1g			
get a Form W-2, see	h	Other earned income (see instructi	,							1h		0.	
instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>							
	Z	Add lines 1a through 1h								1z	-	85,779.	
Attach Sch. B	2a	· —	2a			xable interest				2b			
if required.	3a_	Qualified dividends	3a		b Or	dinary divider	nds			3b			
	4a		4a			xable amoun				4b			
Standard Deduction for—	5a	-	5a			xable amoun				5b			
Single or	6a	,	6a			xable amoun	t		·	6b			
Married filing separately,	С	If you elect to use the lump-sum election method, check here (see instructions)											
\$12,950	7	Capital gain or (loss). Attach Sched			,				. L	7		45.	
Married filing jointly or	8	Other income from Schedule 1, lin								8		<u>-8,480.</u>	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								9	+'	77,344.	
\$25,900	10	Adjustments to income from Sche	•							10	-		
Head of household,	11	Subtract line 10 from line 9. This is	•							11		77,344.	
\$19,400	12	Standard deduction or itemized								12	-	25,900.	
If you checked any box under	13	Qualified business income deducti								13	-		
Standard	14	Add lines 12 and 13								14		<u>25,900.</u>	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your taxable income							15	!	51,444.		

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌		. 16	5	760.
Credits	17	Amount from Schedule 2, lin	e3				· .	. 17		
	18	Add lines 16 and 17						. 18	5	760.
	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	5	760.
	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	5	760.
Payments	25	Federal income tax withheld								
,	а	Form(s) W-2				25a	6,81	1.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c						. 25d	6	5,811.
	26	2022 estimated tax payment								
If you have a Lagualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit				29				
	30	Reserved for future use .		-		30				
	31	Amount from Schedule 3, lin				31				
	32	Add lines 27, 28, 29, and 31					ts .	. 32		
	33	Add lines 25d, 26, and 32. T	•	-	-				6	5,811.
	34	If line 33 is more than line 24								,051.
Refund	35a	Amount of line 34 you want					_	_		,051.
Direct deposit?	b	Routing number 0 6 3					∟ Savino		_	7031.
See instructions.	d	Account number 8 9 8				S Officering	Saviri	³³		
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24				30				
You Owe	31	For details on how to pay, g						. 37		
	38	Estimated tax penalty (see in	•	•		1 1		0.		
Third Party	Do	you want to allow another								
Designee		structions	•				. Comple	te below.	X No	
•		signee's		Phone				entification		
	nar	me		no.		n	umber (PII	۷)		
Sign		der penalties of perjury, I declare t			1 , 0				,	0
Here		belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which							ent vou an Id	•
	YO	ur signature		Date	Your occupation				PIN, enter it h	
Joint return?					PROGRAM M	IANAGER		see inst.)		
See instructions.				Date Spouse's occupation If				the IRS se	ent your spou	use an
Keep a copy for your records.									tection PIN,	enter it here
your records.					IT		(5	see inst.)		
		one no. (904)631-051		Email address	VANAND170					
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAI	M 02/08/202	23 P02	082703	Self-e	employed
Use Only	Fire	m's name GLOBAL TAX	XES LLC				F	Phone no.	(678)96	5-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		F	irm's EIN	84-32	171965
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 01/28/23 PF	RO		Form 1	1040 (2022)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2022
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name	ocial s	ecurity number				
ANAN	17-76	577				
Par	t I Additional Income					
1	1 Taxable refunds, credits, or offsets of state and local income taxes					
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			5	-8,480.	
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				
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		-		
	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 8r		-		
r	Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form	or		-		
S	1040, line 1a or 1d	8s ()			
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
ι	a nongovernmental section 457 plan	8t				
u	Wages earned while incarcerated	8u				
	Other income. List type and amount:	34				
_	Carlot modifier List type and amount	8z				

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-8,480.

9

10

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 govern			
	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	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			05	
25 26	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 at Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-3n, line 10, or form 1040-14n, line 10a		20	

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

Your social security number

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

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

Attachment Sequence No. **12** Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

AN	AND VAKKALAGADDA & LEPAKSHI MADDIPATLA			0/1-	-4/-	/6//
	ou dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•	_		
	t I Short-Term Capital Gains and Losses—Ge				e ins	tructions)
lines This	nstructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	1 625	1 025		. 4 17	4.5
2	Box A checked	1,635.	1,837.		147.	45.
	Totals for all transactions reported on Form(s) 8949 with Box C checked					
	Short-term gain from Form 6252 and short-term gain or (I Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		5	
6	Short-term capital loss carryover. Enter the amount, if an	y, from line 8 of y		-	6	()
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis			e any long-	7	45.
Par	t II Long-Term Capital Gains and Losses—Ge	nerally Assets H	Held More Than	One Year	(see i	instructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to (d) (d) (e) Adjustment to gain or loss (sales price) (or other basis) Form(s) 8949, P						(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
whol	e dollars.	((* * * * * * * * * * * * * * * * * * *	line 2, colum		with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
	Net long-term gain or (loss) from partnerships, S corporat			lule(s) K-1	12	
	Capital gain distributions. See the instructions Long-term capital loss carryover. Enter the amount, if any			Carryovor	13	
	Worksheet in the instructions				14	()
15	Net long-term capital gain or (loss). Combine lines 8a	a through 14 in co	olumn (h). Then, go	to Part III		

Schedule D (Form 1040) 2022 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 45. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

Department of the Treasury Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

071-47-7677

ANAND VAKKALAGADDA & LEPAKSHI MADDIPATLA

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). Cost or other basis Gain or (loss) (d) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired from column (d) and (sales price) disposed of and see Column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (Mo., day, yr.) (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions ROBINHOOD SECURITIES LLC 05/31/22 12/31/22 1,635. 1,837. W 247 45. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

1,635.

45.

247.

above is checked), or line 3 (if Box C above is checked) .

1,837.

SCHEDULE E (Form 1040)

Name(s) shown on return

Supplemental Income and Loss

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

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

Attachment

Department of the Treasury Internal Revenue Service Go to www.irs.gov/ScheduleE for instructions and the latest information. Sequence No. 13

Your social security number

OMB No. 1545-0074

ANAND VAKKALAGADDA & LEPAKSHI 071-47-7677 MADDIPATLA 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) SREE LEPAKSHI NILAYA AVALAHALLI BANGALORE IN 560049 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and Davs **Davs** personal use days. Check the QJV box only Α Α 195 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 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 550. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 920. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 860. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,940. 14 14 Repairs . . . 15 Supplies 15 2,710. 16 16 Taxes 17 17 1,600. 18 18 Depreciation expense or depletion 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 9,030. 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 -8,480. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 8,480.) 550. 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 9,030. 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 8,480. 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 -8,480. 26