Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

Taxpayer's name

Taxpaye	er's name	Social security nur	nber
VIS	HAL REDDY CHAPALA	116-57-54	81
Spouse'	's name	Spouse's social se	curity number
Part	Tax Poture Information Tax Year Ending December 21 2022 (Entor		uthorizing)
		r year you are a	utionzing.)
Enter	whole dollars only on lines 1 through 5.		
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		
1	Adjusted gross income	1	83,719.
2	Total tax	2	10,044.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	16,794.
4	Amount you want refunded to you	4	6,750.
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

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

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL	TAXES	LLC	to enter or generate my PIN	Ľ	
				ERO firm name		E	í

Enter five digits, but	ny
Enter five digits, but don't enter all zeros	пy

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

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

Your signature 🕨

Date 🕨

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

Enter five digits, but don't enter all zeros

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

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

Spouse's signature 🕨	Da	ite 🕨	•							
Practitioner PI	N Method Returns Only—continue	belo	w							
Part III Certification and Authentication –	Practitioner PIN Method Only									
ERO's EFIN/PIN. Enter your six-digit EFIN followed b	y your five-digit self-selected PIN.	2	2	 		6 all zer	 9	8	9	

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

RO's signature ► Date ►								
ERO Must Retain This F Don't Submit This Form to the I								
For Paperwork Reduction Act Notice, see your tax return instructions.	REV 01/28/23 PRO	Form 8879 (Rev. 01-2021)						

1040		artment of the Treasury-Internal Revenue Serv S. Individual Income Tax		urn	202	2	OMB No. 1545	0074	IRS Use	Only-	Do not w	rite or staple	in this space.
Filing Status Check only one box.		Single D Married filing jointly	_	•			Head of Head of				spou	lifying sun use (QSS) name if th	U
		on is a child but not your dependent	,		,								. , , ,
Your first name	and mi	ddle initial	Last nar	me							Your so	cial securit	y number
VISHAL R	EDD	ζ	CHAP.	ALA								57-548	
lf joint return, sp	oouse's	first name and middle initial	Last nar	me							Spouse'	s social see	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				А	pt. no.		Preside	ntial Election	on Campaigr
11100 NE	115	TH ST						E	204			nere if you,	
City, town, or p	ost offi	ce. If you have a foreign address, also co	omplete sp	paces bel	ow.	Sta	te	ZIP co	ode			0,	tly, want \$3 Checking a
BELLEVUE						WZ	ł	980	04		0	ow will not	•
Foreign country	name		F	oreign pr	ovince/state/c	coun	ty	Foreig	n postal co	ode	your tax	or refund.	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a				-		-				Yes	X No
Standard		eone can claim: You as a de	-				a dependent		. (000	01.00			
Deduction		Spouse itemizes on a separate retur	•				·						
Age/Blindness	You:	Were born before January 2, 1	958	Are bl	ind Spo	use	: 🗌 Was bor	n befc	ore Janua	ary 2,	1958	🗌 ls bl	ind
Dependents	s (see	instructions):		(2) S	Social security		(3) Relationsh	ip (4) Check th	ne bo	k if quali	fies for (see	instructions):
If more	(1) Fi	rst name Last name			number		to you		Child ta	ax cre	dit	Credit for ot	her dependents
than four												[<u> </u>
dependents, see instructions	s ——												
and check													
here 🗌													
Income	1a	Total amount from Form(s) W-2, b						• •			1a		93,828.
Attach Form(s)	b	Household employee wages not re						• •	• •	• •	1b		
W-2 here. Also	c d	Tip income not reported on line 1a						• •	• •	• •	1c 1d	-	
attach Forms W-2G and	d e	Medicaid waiver payments not rep Taxable dependent care benefits						• •	• •	• •	10		
1099-R if tax	f	Employer-provided adoption bene						• •	• •	• •	1f	-	
was withheld.	g	Wages from Form 8919, line 6 .						• •	• •	• •	1g		
If you did not get a Form	9 h	Other earned income (see instruct									1h		0.
W-2, see	i	Nontaxable combat pay election (,				1 i						
instructions.	z			,							1z		93,828.
Attach Sch. B	2a	-	2a			ьτ	axable interest				2b		
if required.	3a	Qualified dividends	3a			bС	rdinary divider	nds .			3b		
	4a	IRA distributions	4a			bТ	axable amoun				4b		
Standard	5a	Pensions and annuities	5a			bТ	axable amount				5b		
 Deduction for — Single or 	6a	Social security benefits	6a			bΤ	axable amount				6b		
Married filing	С	If you elect to use the lump-sum e	election n	nethod,	check here ((see	instructions)			. 🗆			
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required	d. If not requ	ired	, check here				7		
 Married filing jointly or 	8	Other income from Schedule 1, lin									8		10,109.
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7			our total inc	om	е				9		83,719.
surviving spouse, \$25,900	10	Adjustments to income from Sche									10	-	
 Head of household, 	11	Subtract line 10 from line 9. This is	-								11		83,719.
\$19,400	12	Standard deduction or itemized						· ·			12		12,950.
 If you checked any box under 	13	Qualified business income deduct						· ·	• •		13		10 0 5 5
Standard Deduction,	14	Add lines 12 and 13							• •		14		12,950.
see instructions.	15	Subtract line 14 from line 11. If zer	U OF IESS	s, enter -	-u This is ye	our	laxable incom	е.			15		70,769.

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

Form **1040** (2022)

Form 1040 (2022	2)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3		16	11,188.
Credits	17	Amount from Schedule 2, lin	ie3					17	
	18	Add lines 16 and 17						18	11,188.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie8					20	1,144.
	21	Add lines 19 and 20						21	1,144.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	10,044.
	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	10,044.
Payments	25	Federal income tax withheld							
	а	Form(s) W-2				25a 1	6,794.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions				25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	16,794.
	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return .			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	from Form 8863	8, line 8		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	16,794.
Defund	34	If line 33 is more than line 24						34	6,750.
Refund	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	🗆	35a	6 , 750.
Direct deposit?	b	Routing number 1 1 1			·		Savings		
See instructions.	d	Account number 6 9 7							
	36	Amount of line 34 you want a			ed tax	36			
Amount	37	Subtract line 33 from line 24	This is the am	ount vou owe					
You Owe	0.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	person to disc	cuss this retu	rn with the IRS?	See			
Designee		structions					Complete I	below.	X No
		signee's		Phone			sonal identi	fication	
	nai			no.			nber (PIN)		
Sign		der penalties of perjury, I declare t ief, they are true, correct, and com							
Here							1		nt you an Identity
	ŶŎ	ur signature		Date	Your occupation				IN, enter it here
Joint return?					SOFTWARE DE	VELOPMENT EN	IGI (see	inst.)	
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	ion			nt your spouse an
Keep a copy for your records.								tity Prote inst.)	ection PIN, enter it here
your roooraor			-			•	(1151.)	
		one no. (224) 526-479		Email address	CHAPALAVISHAI	-	1		Chaoly if
Paid		eparer's name	Preparer's signat			Date	PTIN	0 7 6 6	Check if:
Preparer		PRIYA RAM SAGAR GUPTA TALLAM		RAM SAGAR	GUPTA TALLAM	02/05/2023	-		Self-employed
Use Only		m's name GLOBAL TAX			- 00010				(678) 965-9522
			Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	88-2145487
Go to wanter inc. ~	ov/Form	1010 for instructions and the late	et information			DEV 04/00/00 DEC			Form 1040 (2022)

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

BAA REV 01/28/23 PRO

Form **1040** (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 20 2

Attachment Sequence No. **01** Internal Revenue Service Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number VISHAL REDDY CHAPALA 116-57-5481

6 Farm income or (loss). Attach Schedule F. 6 7 Unemployment compensation 7 8 Other income: 8a (9 Net operating loss 8a (9 Gambling 8a (0 Gambling 8a (0 Gambling 8a (0 Cancellation of debt 8c 1 Foreign earned income exclusion from Form 2555 8d (9 Income from Form 8853 8f 1 Income from Form 8853 8f 1 Income from Form 8889 8f 1 Prizes and awards 8i 1 Alaska Permanent Fund dividends 8i 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 8i 1 Income from 10 Paralympic medals and USOC prize money (see instructions) 8n 2 Section 951(a) inclusion (see instructions) 8n 3 Section 951(a) inclusion (see instructions) 8n 4 Stack options 8g 7 Sachiaship and fellowship grants not reported on For	Par	t Additional Income			
2a Alimony received 2a b Date of original divorce or separation agreement (see instructions): 3 c Business income or (loss). Attach Schedule C 3 4 Other gains or (losse). Attach Form 4797 4 5 Rental real estate, royatiles, partnerships, S corporations, trusts, etc. Attach Schedule E 5 -10,10 6 Tincome or (loss). Attach Schedule F 5 -10,10 7 Other income: 8a (> 8 Other income: 8a (> 9 Cancellation of debt 8a (> 6 Tincome from Form 8853 8e 8d (9 Total other income 8g 8d 9 Total other income from form 8853 8e 9 Total other income from form 8853 8d (> 9 Total other income from form 8853 8d (> 9 Total other income from the rental of personal property if you engaged in the rental for profit uncue end in the business of renting such property 8d 1 Income from the rental of personal property if you engaged in the rental for profit	1	Taxable refunds, credits, or offsets of state and local income taxes		1	
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k Stock options	i	Prizes and awards	8i		
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m Olympic and Paralympic medals and USOC prize money (see instructions) 8m n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8n p Section 461(l) 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		Income from the rental of personal property if you engaged in the rental			
instructions)		for profit but were not in the business of renting such property	81		
n Section 951(a) inclusion (see instructions) 8n o Section 951A(a) inclusion (see instructions) 8o p Section 461(l) 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 8u g Total other income. Add lines 8a through 8z 9	m	Olympic and Paralympic medals and USOC prize money (see			
o Section 951A(a) inclusion (see instructions) 80 p Section 461(l) 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 8u g Total other income. Add lines 8a through 8z 9		instructions)	8m		
p Section 461(l) 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 8u 2 Other income. List type and amount: 8z 9 9 Total other income. Add lines 8a through 8z 9 9	n	Section 951(a) inclusion (see instructions)	8n		
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	0	Section 951A(a) inclusion (see instructions)	80		
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	р	Section 461(I) excess business loss adjustment	8p		
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 8t u Wages earned while incarcerated 8u 8u 8t other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z 9	q	Taxable distributions from an ABLE account (see instructions)	8q		
1040, line 1a or 1d 1040, line 1a or 1d<	r	Scholarship and fellowship grants not reported on Form W-2	8r		
t Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan 8t u Wages earned while incarcerated 8u 8u z Other income. List type and amount: 8z 9 9 Total other income. Add lines 8a through 8z 9 9 9	S	Nontaxable amount of Medicaid waiver payments included on Form			
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			8s ()	
u Wages earned while incarcerated 8u z Other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z 9	t	Pension or annuity from a nonqualifed deferred compensation plan or			
z Other income. List type and amount: 8z 9 Total other income. Add lines 8a through 8z		a nongovernmental section 457 plan	8t		
8z 9 Total other income. Add lines 8a through 8z	u		8u		
8z 9 Total other income. Add lines 8a through 8z	z	Other income. List type and amount:			
10 Combine lines 1 through 7 and 9 Enter here and on Form 1040 1040-SR or 1040-NR line 8 $10^{-10.10}$	9				
	10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	l, or 1040-NR, line 8	10	-10,109.

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	e-basi	s gov	ernment		
	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)	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	e. Ente	er here	and on		
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	01/28/23 P	RO	Schedu	ile 1 (Form 1040) 2022

Department of the Treasury

Internal Revenue Service

Additional Credits and Payments

OMB No. 1545-0074 2022

Attachment Sequence No. 03

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

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

	(s) shown on Form 1040, 1040-SR, or 1040-NR	`			curity number
	HAL REDDY CHAPALA		116-5	57-54	81
Par					
1	Foreign tax credit. Attach Form 1116 if required			1	
2	Credit for child and dependent care expenses from Form 2441, line Form 2441	11. At	ttach	0	
•	-		• •	2	
3	Education credits from Form 8863, line 19			3	1,144.
4	Retirement savings contributions credit. Attach Form 8880			4	
5	Residential energy credits. Attach Form 5695		• •	5	
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800 6a				
b	Credit for prior year minimum tax. Attach Form 8801 6b				
С	Adoption credit. Attach Form 8839 6c				
d	Credit for the elderly or disabled. Attach Schedule R 6d				
е	Alternative motor vehicle credit. Attach Form 8910 6e				
f	Qualified plug-in motor vehicle credit. Attach Form 8936 6f				
g	Mortgage interest credit. Attach Form 8396 6g				
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6h				
i	Qualified electric vehicle credit. Attach Form 8834 6i				
j	Alternative fuel vehicle refueling property credit. Attach Form 8911 6j				
k	Credit to holders of tax credit bonds. Attach Form 8912 6k				
Ι	Amount on Form 8978, line 14. See instructions 61				
z	Other nonrefundable credits. List type and amount:				
	6z				
7	Total other nonrefundable credits. Add lines 6a through 6z			7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, o			-	
-	line 20		-,	8	1,144.
			(cc	ontinue	ed on page 2)
For Pa	perwork Reduction Act Notice, see your tax return instructions.	/ 01/28/23 PF	RO S	Schedule	3 (Form 1040) 2022

BAA

Schedule 3 (Form 1040) 2022

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions) .		10	
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а	Form 2439	13a		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b		
С	Reserved for future use	13c		
d	Credit for repayment of amounts included in income from earlier years	13d		
е	Reserved for future use	13e		
f	Deferred amount of net 965 tax liability (see instructions)	13f		
g h	Reserved for future use	13g 13h		
z	Other payments or refundable credits. List type and amount:	13z		
14	Total other payments or refundable credits. Add lines 13a through	13z	14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	-SR, or 1040-NR,	15	
	BAA REV	01/28/23 PRO	Schedu	le 3 (Form 1040) 202

(Form 1040)		(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								96	99		
Department of the Treasury Internal Revenue Service		Attach to Form 1040, 1040-SR, 1040-NR, or 1041. Go to <i>www.irs.gov/ScheduleE</i> for instructions and the latest information.								Attachment Sequence No. 13			
Name(s) shown on return									Your soci	al security r			
VISHAL REDDY CHAPALA										57-5481			
Part I Income or Loss From Rental Real Estate and Royalties						/ 0101							
	Note: If yo rental inco	ou are i ome or	in the loss	business of r from Form 48	enting personal prope 35 on page 2, line 40.	rty, use	Schedule						
	vid you make any payments in 2022 that would require you to file Form(s) 1099? See instructions "Yes," did you or will you file required Form(s) 1099?												
1 a													
Α	NO 104, PRAKASHREDDYPET WARANGAL TELANGANA IN 506001												
В													
С													
1b	Type of Prope (from list belov				rental				Fair Rental Days		Personal Use Days		
Α	3				days. Check the Q			Α		365		0	
В					he requirements to t venture. See instru			В					
С			,				5.	С					
Туре	of Property:												
1	Single Family R	esider	nce	3 Vacat	ion/Short-Term Rer	ntal	5 Lanc	l	-	Self-Rental			
2	Multi-Family Re	siden	ce	4 Comr	nercial		6 Roya	alties	8	Other (desc	ribe)		
										Propert			
Incom								Α		B	103.		С
3		4				3			99.				<u> </u>
4								0					
Exper		iveu .	•										
5						5							
6	0					-							
7								2 3	54.				
8	-					8		213					
9						9							
10						-							
11						11		1.4	27.				
12					(see instructions)	12		-/-	<u> </u>				
13													
14								2,7	47.				
15						15			66.				
16	Taxes					16							
17						17		2,8	14.				
18						18							
19	Other (list)					19							
20	Total expenses	s. Add	l line	s 5 through	19	20		11,0	08.				
21	result is a (loss	s), see	e inst	ructions to f	nd/or 4 (royalties). If find out if you must			-10,1	09.				
22					er limitation, if any,		(10,10)9.)	()	()
23a	Total of all am	ounts	repo	rted on line	3 for all rental prope	erties			23a		899.		
b	Total of all am	ounts	repo	rted on line	4 for all royalty prop	perties			23b				
с					12 for all properties				23c				
d	Total of all am	ounts	repo	rted on line	18 for all properties				23d				
е	Total of all am	ounts	repo	rted on line	20 for all properties				23e	11	,008.		
24	Income. Add	positi	ve ar	mounts shov	vn on line 21. Do no)t inclu	ude any Ic	sses			. 24		
25	Losses. Add ro	oyalty	losse	es from line 2	1 and rental real esta	te loss	es from lin	ne 22. E	Enter to	otal losses he	re 25	(1	0,109.)

Supplemental Income and Loss

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here
26 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

26 -10,109.

-10,109.

For Paperwork Reduction Act Notice, see the separate instructions.

SCHEDULE E

L

Schedule E (Form 1040) 2022

OMB No. 1545-0074

Form **8863**

Department of the Treasury Internal Revenue Service

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

Your social security number

116-57-5481

Name(s) shown on return

VISHAL REDDY CHAPALA

. . . .

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Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line	30	1	
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,					
	or qualifying surviving spouse	2				
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for					
	the amount to enter instead	3				
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education					
	credit	4				
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or					
	qualifying surviving spouse	5				
6	If line 4 is:	,				
	• Equal to or more than line 5, enter 1.000 on line 6		0			
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (ro at least three places)				6	
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th			, I meet the		
'	conditions described in the instructions, you can't take the refundable Americ					
	skip line 8, enter the amount from line 7 on line 9, and check this box				7	
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter	the a	moun	t here and		
	on Form 1040 or 1040-SR, line 29. Then go to line 9 below.				8	
Part	II Nonrefundable Education Credits					
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	: (see	instru	ctions) .	9	
10	After completing Part III for each student, enter the total of all amounts from a					
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	9,106.
11	Enter the smaller of line 10 or \$10,000				11	9,106.
12	Multiply line 11 by 20% (0.20)	• •			12	1,821.
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or	10		00 000		
	qualifying surviving spouse	13		90,000.		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form					
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14		83,719.		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on	14		03,713.		
15	line 18, and go to line 19	15		6,281.		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or			,		
	qualifying surviving spouse	16		10,000.		
17	If line 15 is:					
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18)				
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (roun least three places)	}	17	0.628		
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	18	1,144.			
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit					
	instructions) here and on Schedule 3 (Form 1040), line 3				19	1,144.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	AA		REV 01/28/2	3 PRO	Form 8863 (2022)

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Name(s) shown on return

VISHAL REDDY CHAPALA

CAUT	Complete Part III for each student for whom credit or lifetime learning credit. Use addition							
Par	III Student and Educational Institution Informatio	n. See instructions.						
20		21 Student social security number (as shown on page 1 of your tax return) 116-57-5481						
22	Educational institution information (see instructions)							
	. Name of first educational institution	b. Name of second educational institut	on (if any)					
	Texas State University							
(Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions. JCKellam 188 	(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.						
	SAN MARCOS TX 78666							
(2) Did the student receive Form 1098-T X Yes □ No from this institution for 2022?	(2) Did the student receive Form 1098 from this institution for 2022?	-T 🗌 Yes 🗌 No					
(3) Did the student receive Form 1098-T from this institution for 2021 with box ☐ Yes ⊠ No 7 checked?	(3) Did the student receive Form 1098-T from this institution for 2021 with box Yes No 7 checked?						
(4) Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	 (4) Enter the institution's employer ide if you're claiming the American opp checked "Yes" in (2) or (3). You car 1098-T or from the institution. 	ortunity credit or if you					
	74-6002248							
23	Has the American opportunity credit been claimed for this student for any 4 prior tax years?	$\Box \text{Yes} - \textbf{Stop!} \\ \text{Go to line 31 for this student.} \textbf{X} \text{No} \textbf{X} \\ \text{Yes} = $	– Go to line 24.					
24	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2022 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.		— Stop! Go to line 31 his student.					
25	id the student complete the first 4 years of postsecondary ducation before 2022? See instructions. X Yes - Stop! Go to line 31 for this student. No - Go to line 26.							
26	Was the student convicted, before the end of 2022, of a felony for possession or distribution of a controlled substance?		 Complete lines 27 ugh 30 for this student. 					
CAUT	You can't take the American opportunity credit and the layou complete lines 27 through 30 for this student, don't c		in the same year. If					
	American Opportunity Credit							
27	Adjusted qualified education expenses (see instructions). Dor		27					
28			28					
29		· · · · · · · · · · · · · · ·	29					
30	If line 28 is zero, enter the amount from line 27. Otherwise,							
	enter the result. Skip line 31. Include the total of all amounts f	rom all Parts III, line 30, on Part I, line 1.	30					
01	Lifetime Learning Credit							
31	Adjusted qualified education expenses (see instructions). Incl III, line 31, on Part II, line 10		31 9,106.					