## 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

Subm	nission Identification Number (SID)			
Taxpay	yer's name	Social securit	y number	
VAM	MSHI KRISHNA KURATHOTA	036-51-	-0504	
Spouse	e's name	Spouse's soc	ial security numb	per
Par	Tax Return Information — Tax Year Ending December 31, 2022 (Ente	 r year you a	re authorizin	g.)
	whole dollars only on lines 1 through 5.	, ,		<u> </u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.			
1	Adjusted gross income		1 1 5	57,775.
2	Total tax		2	5,479.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	7,187.
4	Amount you want refunded to you		4	1,708.
5	Amount you owe		5	
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and	keep a cop	y of your re	turn)
return to sen for an Agent payme author payme busine taxes persor	nowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abo (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmount my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejuy delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Lower to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account incent 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 tent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the payment (settlement) below is my signature for the income tax return (original or amended) I adonic Funds Withdrawal Consent.	itter, or electro- ection of the tr .S. Treasury ar- icated in the ta- on to debit the e the authoriza- uests must be processing of payment. I furt	onic return original contents of the contents	nator (ERO) the reason ed Financial software for count. This e (cancel) a ater than 2 payment of ge that the
Тахр	ayer's PIN: check one box only			٦
	▼ I authorize GLOBAL TAXES LLC to enter or generate	my PIN 1	0 5 0 4	」 as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, bun't enter all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.			
Your	signature ▶ vamshi krishna kurathota Date ▶			
Snou	se's PIN: check one box only			_
Г	☐ I authorize to enter or generate	my PIN		as my
	ERO firm name	_	er five digits, bu	
	signature on the income tax return (original or amended) I am now authorizing.	dor	n't enter all zeros	5
	I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN meth below.			
Spou	se's signature ▶ Date ▶			
	Practitioner PIN Method Returns Only—continue below			
Part	Certification and Authentication — Practitioner PIN Method Only			
ERO'	s <b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		6 6 1 9 er all zeros	8 9
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income t rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subn ements of the Practitioner PIN method and <b>Pub. 1345,</b> Handbook for Authorized IRS e-file Providers of I	nitting this retu	rn in accordan	ce with the
EDO;	o dignatura N			
<u> </u>	s signature ► Date ►  ERO Must Retain This Form — See Instructions			
	LOU WIUST DETAIL THIS FOLLY — SEE MSMUCHOUS			

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

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-007

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

Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the non is a child but not your dependent	ame of y	ed filing separately (	,	_		nold (HOH	,	spou	ifying surv use (QSS) name if th	Ü
Your first name	and mi	ddle initial	Last nar	me					Y	our so	cial securit	y number
VAMSHI I	KRISI	ANA	KURA	THOTA					0	36-5	51-0504	4
If joint return, s	pouse's	first name and middle initial	Last nar	me					Sp	Spouse's social security number		
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.			А	pt. no.	Pı	esider	ntial Election	on Campaign
6301 ST		• •						306	- 1		ere if you,	
		ce. If you have a foreign address, also co	mplete s	paces below.	Stat	te	ZIP co					tly, want \$3
PLANO				•	TX		750	2.4			this fund. ( ow will not	Checking a
Foreign countr	y name		F	oreign province/state				n postal co			or refund.	U
· ·				<b>.</b>		,		·			You	Spouse
Digital		ny time during 2022, did you: (a) rec	`				•	,.	` '			⊠ No
Assets		ange, gift, or otherwise dispose of a		<u>_</u>			asset)	(See ins	tructi	ons.)	∐ Yes	ONO
Standard		eone can claim: You as a de	•			a dependent						
Deduction		Spouse itemizes on a separate retur	n or you	were a dual-status	alien							
Age/Blindnes	s You:	☐ Were born before January 2, 1	958	Are blind Sp	ouse:	☐ Was bor	rn befo	re Januai	y 2, 1	958	ls bli	nd
Dependent	s (see	instructions):		(2) Social securit	y	(3) Relationsh	nip (4	Check the	e box i	f qualif	ies for (see	instructions):
If more	•	rst name Last name		number				Child ta	k credi	t (	Credit for oth	ner dependents
than four									]			
dependents, see instruction												
and check	s —								]			
here												
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .						1a	(	55,525.
	b	Household employee wages not re	eported	on Form(s) W-2.						1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)						1c		
attach Forms	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)								1d		
W-2G and	е	Taxable dependent care benefits from Form 2441, line 26								1e		
1099-R if tax 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	h	Other earned income (see instruct	ions) .				· ·			1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	ructions)		<u>li</u>	i					
	<b>Z</b> _	Add lines 1a through 1h								1z	6	55 <b>,</b> 525.
Attach Sch. B	2a	Tax-exempt interest	2a		<b>b</b> Ta	axable interest	t.			2b		
if required.	3a_	Qualified dividends	3a			rdinary divide				3b		
	4a	_	4a			axable amoun				4b		
Standard Deduction for—	5a	<del>-</del>	5a			axable amoun				5b		
Single or	6a	,	6a			axable amoun				6b		
Married filing separately,	С	If you elect to use the lump-sum e		*	•	,					4	
\$12,950	7	Capital gain or (loss). Attach Sche							Ш	7		
<ul> <li>Married filing jointly or</li> </ul>	8	Other income from Schedule 1, lin								8		-7 <b>,</b> 750.
Qualifying surviving spouse,	9		I lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>							9		57,775.
\$25,900	10	Adjustments to income from Sche								10		
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is	-						•	11		57,775.
\$19,400	12	Standard deduction or itemized		`	,					12		L2 <b>,</b> 950.
If you checked any box under	13	Qualified business income deduct								13		
Standard Deduction,	14	Add lines 12 and 13								14		L2,950.
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -U This is y	your <b>t</b>	axable incom	1е .		•	15	4	14,825.

Additional child tax credit from Schedule 8812	Form 1040 (2022	2)							Page	2
Third Parts   Signature   S	Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌	16	5,479.	_
18		17	Amount from Schedule 2, lin	ne 3				17	7	_
20		18	Add lines 16 and 17					18	5,479.	_
21		19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812		19	9	_
22   Subtract line 21 from line 18. If zero or less, enter -0-		20	Amount from Schedule 3, lin	ne 8				20	)	_
23		21	Add lines 19 and 20					21	1	_
Payments   25		22	Subtract line 21 from line 18	. If zero or less,	enter -0			22	5,479.	_
Payments		23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21		23		_
Payments   25		24	Add lines 22 and 23. This is	your <b>total tax</b>				24		
a Form(s) W-2	Payments	25							·	_
C   Other forms (see instructions)   25c   25d   7,187.	,	а	Form(s) W-2				<b>25a</b> 7	187.		
If you have a good production of the productio		b	( )							
d   Add lines 25a through 25c   26   7, 187.			( )				25c			
20			,	,				25	d 7,187.	
You have a		26	· ·					26		_
Additional child tax credit from Schedule 8812			. ,				1 1			_
29	attach Sch. EIC.		, ,			_				
30			American opportunity credit	from Form 8863	3. line 8		29			
31 Amount from Schedule 3, line 15 32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits 33 Add lines 25d, 26, and 32. These are your total payments 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here		30					30			
Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits   32		31	Amount from Schedule 3. lin	ne 15			31			
Refund   34   If line 32 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid   34   1,708.   35a   1,708.   35a   1,708.   35a								32	2	
Refund   34										_
Amount of line 34 you want refunded to you. If Form 8888 is attached, check here	Defined			•						_
Direct deposit? See instructions.  b Routing number 0 4 4 4 0 0 0 0 0 3 7 c Type:  Checking Savings d Account number 5 9 0 0 2 9 5 9 5 9	Retuna						•	. 35		
Account number   5   9   0   2   9   5   9	Direct deposit?	b								_
Amount You Owe  37 Subtract line 34 you want applied to your 2023 estimated tax	See instructions.							3-		
Amount You Owe  37  Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions.  38  Estimated tax penalty (see instructions)  39  Do you want to allow another person to discuss this return with the IRS? See instructions.  39  Do you want to allow another person to discuss this return with the IRS? See instructions.  39  Personal identification  30  Personal identification  31  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature  39  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  39  Suppose's signature. If a joint return, both must sign. Date  39  Sopouse's signature. If a joint return, both must sign. Date  30  Sopouse's occupation  30  Sopouse's occupation  31  Subtract line 38  Suppose Complete below. Supp						ed tax	36			
For details on how to pay, go to www.irs.gov/Payments or see instructions	Amount	37	Subtract line 33 from line 24	. This is the <b>amo</b>	ount vou owe					_
Third Party Designee  Do you want to allow another person to discuss this return with the IRS? See instructions	You Owe							37	7	
Designee's name  Designee's name  Designee's name  Designee's name  Designee's name  Designee's name  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature  Date  Your occupation  If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  Spouse's signature. If a joint return, both must sign.  Date  Spouse's occupation  If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)  If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)  Phone no. (470) 695–8288  Email address VAMSHIKRISHNAKURATHOTA@GMAIL.COM  Preparer's name  Preparer's name  Preparer's signature  Preparer's name  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/19/2023 P02082703 Self-employed  Firm's name  GLOBAL TAXES LLC  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816  Firm's EIN 84–3171965		38	Estimated tax penalty (see in	nstructions) .			38			
Designee's name    Designee's name   Phone no.   Personal identification number (PIN)	<b>Third Party</b>		•	person to disc	cuss this retu	rn with the IRS?				
Sign Here  Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature  Date  Your occupation  For the IRS sent you an Identity Protection PIN, enter it here (see inst.)  Spouse's signature. If a joint return, both must sign.  Date  Spouse's occupation  If the IRS sent you an Identity Protection PIN, enter it here (see inst.)  If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)  Phone no. (470) 695–8288  Email address VAMSHIKRISHNAKURATHOTA@GMAIL.COM  Preparer's name  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/19/2023 P02082703 Self-employed  Firm's name GLOBAL TAXES LLC  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816  Firm's EIN 84-317-1965	Designee									
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature   Date   Your occupation   If the IRS sent you an Identity Protection PIN, enter it here (see inst.)									on The	٦
belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature    Date	Cian			hat I have examine		d accompanying sch		, ,	nest of my knowledge ar	 nd
Joint return? See instructions. Keep a copy for your records.  Phone no. (470) 695-8288  Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM SYA	_									
Joint return? See instructions. Keep a copy for your records.  Phone no. (470) 695-8288  Preparer Use Only  Spouse's signature. If a joint return, both must sign.  Date  Spouse's occupation  Spouse's occupation  Spouse's occupation  Date  Spouse's occupation  Spouse's occupation  If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)  Phone no. (470) 695-8288  Email address VAMSHIKRISHNAKURATHOTA@GMAIL.COM  Preparer's name  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/19/2023 P02082703 Self-employed  Firm's name  GLOBAL TAXES LLC  Phone no. (678) 965-9522  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816  Firm's EIN 84-3171965	Here	Yo	ur signature		Date	Your occupation		If the IRS	sent you an Identity	
Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Spouse's signature. If a joint return, both must sign.  Phone no. (470) 695–8288  Email address VAMSHIKRISHNAKURATHOTA@GMAIL.COM  Preparer's name  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/19/2023 P02082703 Self-employed  Firm's name GLOBAL TAXES LLC  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816  Firm's sell Radia Social Self-employed  Firm's EIN 84-3171965										_
Keep a copy for your records.  Phone no. (470) 695–8288  Email address VAMSHIKRISHNAKURATHOTA@GMAIL.COM  Preparer's name								, ,		┙
Phone no. (470) 695-8288   Email address   VAMSHIKRISHNAKURATHOTA@GMAIL.COM		Spouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupation		on			re			
Preparer's name   Preparer's signature   Date   PTIN   Check if:    SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   02/19/2023   P02082703   Self-employed	your records.						,		Ť	
Preparer's name   Preparer's signature   Date   PTIN   Check if:    SYAM PRIYA RAM SAGAR GUPTA TALLAM   SYAM PRIYA RAM SAGAR GUPTA TALLAM   02/19/2023   P02082703   Self-employed		——Ph	one no. (470) 695-828	8	Email address	VAMSHIKRISHNAKU	RATHOTA@GMATI.CO	М		_
Preparer Use Only  SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/19/2023 P02082703 Self-employed Prim's name GLOBAL TAXES LLC Phone no. (678) 965-9522  Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965									Check if:	_
Firm's name         GLOBAL TAXES LLC         Phone no. (678) 965-9522           Firm's address         245 ROONEY CT E BRUNSWICK NJ 08816         Firm's EIN 84-3171965		SYAN	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/19/2023	P0208270	3 Self-employed	
Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's EIN 84-3171965	•						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•   • • •	_
,	Use Only				NSWICK N	J 08816			, ,	_
	Go to www.irs.ac						REV 02/10/23 PRO	<u> </u>		_

#### SCHEDULE 1 (Form 1040)

## **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2022

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

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

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

		Coquonico No. • I
Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your soc	ial security numbe
VAMSHI KRISHNA KURATHOTA	036-51	-0504

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ich Schedule E .	5	-7 <b>,</b> 750.
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		
į	Prizes and awards	8i	-	
j	Activity not engaged in for profit income	8j	-	
k	Stock options	8k	-	
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81	-	
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m	-	
n	Section 951(a) inclusion (see instructions)	8n	-	
0	Section 951A(a) inclusion (see instructions)	80		
p	Section 461(I) excess business loss adjustment	8p	-	
q	Scholarship and fellowship grants not reported on Form W-2	8q 8r	-	
r	Nontaxable amount of Medicaid waiver payments included on Form	OI	-	
S	1040, line 1a or 1d	8s ( )		
t	Pension or annuity from a nonqualified deferred compensation plan or	05 ( )		
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u	-	
z		00		
~	other meetine. 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.		_	-7,750.

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-base			
	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)	1		
b	Deductible expenses related to income reported on line 8I 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	i e		
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	1		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	1		
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			
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:			
05	Tatal athous diseases and Add lines Of a three calls of		05	
<b>25</b>	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . En		00	
	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.)

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

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

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

Attachment Sequence No. 13

Your social security number

OMB No. 1545-0074

VAMS	SHI KRISHNA KURATHOTA						036-5	1-0504	1
Part									
	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	ty, use <b>Sc</b>	hedule	<b>C</b> . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farm
_		to file Fee	رم (م) 1	0002.0	oo ina	trustions			es 🛛 No
	Did you make any payments in 2022 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .		• •	• •	• •			. <u> </u> 16	3S   NO
1a	Physical address of each property (street, city, state, ZIF	ode)							
Α	16-7-225 DAYANAND COLONY WARANGAL TELA	NGANA	IN 5	06004	4				
В									
С									
1b	Type of Property 2 For each rental real estate prope				Fa	ir Rental	Person	nal Use	QJV
	(from list below) above, report the number of fair					Days	Da	ıys	QUV
A	gersonal use days. Check the Quif you meet the requirements to f		nly	Α		365		0	
B	qualified joint venture. See instru			В					
C				С					
	of Property:								
	Single Family Residence 3 Vacation/Short-Term Ren		Land			Self-Rental			
2	Multi-Family Residence 4 Commercial	6	Roya	lties	8	Other (desci	ribe)		
						Properti	es:		
Incon	ne:			Α		. В			С
3	Rents received	3		6	25.				
4	Royalties received	4							
Expe									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,2	37.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,3	98.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,3					
15	Supplies	15		1,7	66.				
16	Taxes	16							
17	Utilities	17		1,5	84.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		8,3	75.				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must file <b>Form 6198</b>			_7 7	50				
00		21		<del>-7,7</del>	50.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22 /		7 75	0 /	(	١	/	,
00-		22 (		7 <b>,</b> 75		(	625.	(	
23a	Total of all amounts reported on line 3 for all rental proper				23a		025.		
b	Total of all amounts reported on line 4 for all royalty prop Total of all amounts reported on line 12 for all properties				23b 23c				
Q C	Total of all amounts reported on line 12 for all properties  Total of all amounts reported on line 18 for all properties				23d				
d e	Total of all amounts reported on line 20 for all properties				23a	Ω	375.		
24	<b>Income.</b> Add positive amounts shown on line 21. <b>Do no</b>				206		. 24		
25	Losses. Add royalty losses from line 21 and rental real estat		-		nter to	 ntal losses he		(	7,750.
26	Total rental real estate and royalty income or (loss).							\	1,100.
20	here. If Parts II, III, IV, and line 40 on page 2 do not								
	Schedule 1 (Form 1040) line 5. Otherwise include this ar						06		_7 750