# 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

IIILEIIIAI	nevenue Service					
Submi	ssion Identification Number (SID)					
Taxpaye	er's name	Social seci	ırity numl	oer		
ABH:	IRAM REDDY YENIKE	697-0	8-953	5		
Spouse'		Spouse's s			mber	
Doub	Toy Deturn Information Toy Very Finding Decomber 24 0000 /Finter			ساند مالم	: \	
Part	, ,	year you	are au	tnoriz	ing.)	
	whole dollars only on lines 1 through 5. Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1	Adjusted gross income		1 1		72.	136.
2	Total tax		2			636.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099					473.
4	Amount you want refunded to you		4			837.
5	Amount you owe		5			037.
Part				our r	eturr	1)
my know return ( to send for any Agent t payment authorize payment business taxes t persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended owledge 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, transmar my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account inding to find the financial institution account inding to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate and the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the part of the income tax return (original or amended) I and it is fully the part of the income tax return (original or amended) I are fully for the payment (Sonsent.	e are the a itter, or elec- ection of the S. Treasury cated in the on to debit to the author uests must processing ayment. I f	mounts in tronic received transmine and its in the entry ization. The elevation of the elevation are transmitted to the elevation ar	rom the turn oringsion, ( designation this is revolved no ectronic things is the control of the	e inco ginato b) the ated Fin softwaccour oke (ca o later c payredge the	me tax r (ERO) reason nancial vare for nt. This ncel) a than 2 ment of hat the
		Г			_	
-	yer's PIN: check one box only	DIN	8 9 !	5 3	5	
×	I authorize GLOBAL TAXES LLC to enter or generate  ERO firm name	-	Enter five		out	as my
	signature on the income tax return (original or amended) I am now authorizing.	,	don't ente	er all zer	os	
	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 <b>and</b> your return is filed using the Practitioner PIN meth below.					
Your s	signature ▶ Date ▶					
Spous	se's PIN: check one box only	_				
	I authorize to enter or generate	my PIN				as my
	ERO firm name		Enter five	digits, l		ao my
	signature on the income tax return (original or amended) I am now authorizing.		don't ente	r all zer	os	
	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 <b>and</b> 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	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9	6 6	1 9	8	9
		-	nter all ze			
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income to zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of In	itting this re	eturn in a	accorda	anće v	
ERO's	signature ▶ Date ▶					
	ERO Must Retain This Form — See Instructions					
	Don't Submit This Form to the IRS Unless Requested To I	o So				

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

OMB No. 1545-0074

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

Filing Status	<b>X S</b>	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	household	(HOH)		ifying sui		J
Check only one box.	•	u checked the MFS box, enter the n on is a child but not your dependen	•	our spouse. If you	check	ed the HOH or	QSS box,	enter th			,	alifying
Your first name	and mi	ddle initial	Last na	me					Your so	cial secur	ity nur	nber
ABHIRAM	REDI	ΟΥ	YENI	KE					697-0	08-953	5	
If joint return, s	pouse's	first name and middle initial	Last na	me					Spouse's	s social se	curity	number
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. n	0.	Preside	ntial Elect	ion Ca	ımpaign
_15200 NE	167	TH PL								ere if you		
City, town, or p	ost offic	ce. If you have a foreign address, also co	omplete s <sub>l</sub>	paces below.	Sta	te	ZIP code			if filing joi this fund		
BELLEVUE	<u> </u>				WA	1	98007		box belo	ow will no	t chan	0
Foreign country	/ name		F	Foreign province/state	/count	у	Foreign pos	tal code	your tax	or refund	_	Spouse
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award, o	r payn	nent for prope	rty or serv	ces); or	(b) sell,			
Assets	exch	ange, gift, or otherwise dispose of a			intere	est in a digital	asset)? (Se	e instru	ctions.)	∐ Yes	X	No
Standard Deduction		eone can claim:		•		a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse	: Was bor	rn before J	anuary 2	, 1958	☐ Is b	olind	
Dependents	s (see	instructions):		(2) Social securit	:y	(3) Relationsh	nip (4) Che	ck the bo	x if qualif	ies for (se	e instru	ıctions):
If more	<b>(1)</b> Fi	rst name Last name		number		to you	CI	nild tax cr	edit	Credit for c	ther de	pendents
than four												
dependents, see instructions	s ——											
and check	,											
here L									,			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					. 1a		81,2	234.
	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 rep		` ,	instru	ctions)			. 1d			
W-2G and 1099-R if tax	е	Taxable dependent care benefits		*					. 1e			
was withheld.	f	Employer-provided adoption bene	efits from	1 Form 8839, line 29	9.				. <u>1f</u>			
If you did not	g	Wages from Form 8919, line 6.							. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,						. 1h			0.
instructions.	i	Nontaxable combat pay election (	see instr	ructions)		<u>1i</u>					0.1	004
		Add lines 1a through 1h							1z		81,2	234.
Attach Sch. B if required.	2a	· -	2a			axable interes			2b			
ii required.	3a		3a			rdinary divide			3b			
	4a	_	4a			axable amoun						
Standard Deduction for—	5a	_	5a			axable amoun			. 5b			
Single or	6a	Social security benefits If you elect to use the lump-sum e	6a	mothed sheet have		axable amoun	t		. 6b			
Married filing separately,	с 7	Capital gain or (loss). Attach Sche		*	`	,						
\$12,950		Other income from Schedule 1, lin		•				L	8		- 0 1	098.
Married filing jointly or	8 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9			136.
Qualifying surviving spouse,	10	Adjustments to income from Sche	-	•					10		14,-	<u> </u>
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11		72	136.
household,	12	Standard deduction or itemized	•						12			950.
\$19,400 If you checked	13	Qualified business income deduct		•	,				13		<u> </u>	<i>,,,,,</i>
any box under Standard	14	Add lines 12 and 13							14	_	12 (	950.
Deduction,	15	Subtract line 14 from line 11. If zer										186.
see instructions.				.,	,						J / 1	

Form 1040 (2022	2)											Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌			16		8,6	636.
Credits	17	Amount from Schedule 2, lir	ne 3						17			
	18	Add lines 16 and 17							18		8,6	636.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19			
	20	Amount from Schedule 3, lir	ne 8						20			
	21	Add lines 19 and 20							21			
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22		8,6	636.
	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 <b>total tax</b>						24		8,6	636.
Payments	25	Federal income tax withheld										
,	а	Form(s) W-2				25a	16	,473	.			
	b	Form(s) 1099				25b						
	С	Other forms (see instruction	s)			25c						
	d	Add lines 25a through 25c							25d		16,4	473.
If	26	2022 estimated tax paymen	ts and amount a	pplied from 20	21 return				26			
If you have a qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27						
	28	Additional child tax credit from				28						
	29	American opportunity credit	from Form 8863	3, line 8		29						
	30	Reserved for future use .				30						
	31	Amount from Schedule 3, lir	ne 15			31						
	32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits											
	33	Add lines 25d, 26, and 32. T	•	•	-				32		16,4	473.
Defined	34	If line 33 is more than line 24							34		7,8	837.
Refund	35a	Amount of line 34 you want	-			•	•		35a		7,8	837.
Direct deposit?	b	Routing number 1 2 2				Checki		Savings				
See instructions.	d	Account number 4 5 7					ĭ	3				
	36	Amount of line 34 you want				36						
Amount	37	Subtract line 33 from line 24				1 1						
You Owe	01	For details on how to pay, g							37			
	38	Estimated tax penalty (see in	nstructions) .			38						
Third Party		you want to allow another										
Designee		structions				_	Yes. Co	omplete	below.	X N	0	
· ·	De	signee's		Phone					tification			
	na	me		no.			numl	oer (PIN)			$\perp$	
Sign		der penalties of perjury, I declare										
Here		lief, they are true, correct, and com	ipiete. Declaration (			ased on a	II Informatio				•	•
	Yo	ur signature		Date	Your occupation				ne IRS se stection P			
Joint return?					SOFTWARE	ENGIN	EER		e inst.)	1, 0		
See instructions.	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa			If t	ne IRS sei	nt your s	pouse	an
Keep a copy for your records.								- 1	ntity Prot	ection P	IN, ente	er it here
your records.								(se	e inst.)			ш
		one no. (928)863-642		Email address	ABHIR8044		L.COM					
Paid		eparer's name	Preparer's signat			Date		PTIN		Check		
Preparer	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAN	1   02/1	1/2023	P020	32703	∐ Se	elf-emp	loyed
Use Only	Fir	m's name GLOBAL TA						Ph	one no. (	678)	<u>965-</u>	9522
Coc Cilly	г:	m's address 2/F DOOME	V CT F DDII	NICWITON NI	T 00016			F:	∞'o □INI	0.4	217	1065

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's address

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

REV 02/05/23 PRO

BAA

Firm's EIN

84-3171965

Form **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	(s) shown on Form 1040, 1040-SR, or 1040-NR	Your so	cial se	curity number
ABHI	RAM REDDY YENIKE	697-0	8-953	55
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. Attach Schedule	Ε.	5	-9,098.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	)		
b	Gambling			
С	Cancellation of debt			
d	Foreign earned income exclusion from Form 2555	)		
е	Income from Form 8853			
f	Income from Form 8889			
g	Alaska Permanent Fund dividends			
h	Jury duty pay			
i	Prizes and awards			
j	Activity not engaged in for profit income			
k	Stock options			
I	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property 81			

8m

8n

80

8p

8q

8r

8s

8t

8u

8z

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

m Olympic and Paralympic medals and USOC prize money (see

Section 951A(a) inclusion (see instructions) . . . . . . . . . . . .

Section 461(I) excess business loss adjustment . . . . . . . . . . .

Taxable distributions from an ABLE account (see instructions) . . .

Scholarship and fellowship grants not reported on Form W-2 . . .

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

**n** Section 951(a) inclusion (see instructions)

**u** Wages earned while incarcerated

9

Other income. List type and amount:

Schedule 1 (Form 1040) 2022

-9,098.

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 governr			
	officials. Attach Form 2106	L	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	L	17	
18	Penalty on early withdrawal of savings	L	18	
19a	Alimony paid		I9a	
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	L	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)			
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:24z			
25	Total other adjustments. Add lines 24a through 24z		25	
25 26	,		23	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	1 01111 1040 01 1040-011, IIIIE 10, 01 1 01111 1040-1110, IIIIE 10a		<b>2</b> 0	

#### **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,

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

2022
Attachment Sequence No. <b>13</b>

Name(s) shown on return Your social security number ABHIRAM REDDY YENIKE 697-08-9535 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) BALANAGAR HYDERABAD TELANGANA IN 500011 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 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 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,276. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . 11 843. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,958. 14 14 Repairs . . . 15 Supplies 15 2,478. 16 16 Taxes 17 17 2,053. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 9,608. 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 Form 6198 . . . . . . . . . . . . . . . . . . 21 -9,098. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 9,098.) 510. 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 9,608. 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 9,098. 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

26

-9,098.

D-400 < Staple A		of Yo	ur	022	_		ina D	ncome Department Pended Return	_		DOR Use Only			
			r fiscal year l	peginning	1			and ending			Are you a ve	eteran?	Yes	No X
ABHIRA			YENI	KE								ise a veteran		□ No □
15200 I								Your SS Spouse's SS		7089535			omatic extensi return, e.g., F	
Filing Statu	ıs 🗓 1	. Sing	le			ed Filing	-			Separately		Yes	No X	
Were you			d of Household c. for the entir			fying Wid	low(er) No	X R	eturn fo	r deceased t	Year spou	use died: Date of o	death:	
I			ent for the en			Yes _	No			r deceased s		Date of		
1								ucation Endow NC-EDU and y		-	_		signating sor	
								(See instruct			0. about the F		nate your ov	еграуппети
	-							of the country of Court-Appo				izen or resi	ident.	
<u> </u>	DOX II ICIU	11113	ilica aria sigi	ica by L	(CCCIOI,		itator,	or Gourt-Appo	milea i c					
FS 1	PP	Y		DT	N	OC	N	TPRES	N	SPRES	N	VT	N SV	T N
YENI	1520		98007	DS	N	EA	N	TD			SD		FD	EXT N
ABHIRA	M REDI	YC		YENI	KE				697	089535				
											WA	9800	7	
15200	NE 16	ГН	PL						BE	LLEVUE				
06	,	721	.36		16			0		26C			0	
07			0		18	Y		0		26E			0	7020
09			0		20A			1977		EU				500
10A			0		20B			0		27			0	4
10B			0		21A			0		29			0	
11 S	Y	I	N		21B			0		30			0	
11	<u>-</u>	127	50		21C			0		31			0	
13	(	053	886		21D			0		32			0	
14	:	319	85		26A			0		34		38	1	
15		15	96		26B			0						
TN	928863	364	26		PN	6	789	559522		PP	P02	208270	3	
Sign Re				und D		h = di il = = = =	382		ment		0201	0	D	
the best of my k	knowledge and	d belief	nined this return f, they are true, c	orrect, and o	complete.	riedules ari	iu statemi	enis, and to	to dis	k here if you a cuss this retur	n and attachi	nents with th	ne paid prepar	er below.
V Oit					Dete			// Elianiaia		-th-mark sing N	Dete	_	8636426	
Your Signature PAID PREPARI	ER USE ONLY	<b>f</b> If j	prepared by a pe	rson other t	Date nan taxpay			nature (If filing join is based on all info		- /	Date rer has any kno		Phone No. (Incl	uue area code)
SYAM PR		M S	AGAR GU	PT 0	2 11 Date			659522 ntact Phone Numb	er (Include	area code)			2082703 r's FEIN, SSN, c	r PTIN
				-				F REVENUE, P.						
lf.	you ARE N	OT dı	ie a refund, m	ail return	any pay	/ment, ai	nd <b>D-4</b> 0	<i>0V to:</i> N.C. DE	PT. OF R	REVENUE, P.C	BOX 25000	, RALEIGH,	NC 27640-06	40

Name	(First 10 Characters) YENIKE Your Social Security Number	69708	39535
	D-400 Line-by-Line Information		
6.	Federal Adjusted Gross Income	6.	7213
7.	Additions to Federal Adjusted Gross Income	7.	, 213
8.	Add Lines 6 and 7	8.	7213
9.	Deductions From Federal Adjusted Gross Income	9.	/ 2 1 .
10.	Child Deduction	J.	
10.	a. Enter the number of qualifying children for whom you were allowed a federal child tax credit	10a.	
	b. Enter the amount of the child deduction	10b.	
11.	N.C. Standard Deduction	11.	
11.	N.C. Itemized Deduction	11.	
11.	Deduction amount	11.	127
12.	a. Add Lines 9, 10b, and 11	12a.	127
12.	b. Subtract Line 12a from Line 8	12b.	5938
13.	Part-year Residents and Nonresidents Taxable Percentage	13.	0.53
14.	N.C. Taxable Income	14.	3198
15.	N.C. Income Tax	15.	15
16.	Tax Credits	16.	13.
17.	Subtract Line 16 from Line 15	17.	159
18.	Consumer Use Tax	17.	15
10.		10.	
19.	You certify that no Consumer Use Tax is due Add Lines 17 and 18	19.	15
19.	Add Lilles 17 alid 10	19.	13
North	Carolina Income Tax Withheld		
NOTUI			
20a.	Your tax withheld	20a.	19
20a. 20b.	Your tax withheld Spouse's tax withheld  Tax Payments	20a. 20b.	195
20a. 20b.	Spouse's tax withheld		19'
20a. 20b. <b>Other</b>	Spouse's tax withheld  Tax Payments	20b.	19'
20a. 20b. <b>Other</b> 21a.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension	20b. 21a.	19'
20a. 20b. <b>Other</b> 21a. 21b. 21c.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership	21a. 21b. 21c.	19
20a. 20b. <b>Other</b> 21a. 21b. 21c. 21d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation	21a. 21b. 21c. 21d.	19
20a. 20b. Other 21a. 21b. 21c. 21d. 22.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments	21a. 21b. 21c. 21d. 22.	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22	21a. 21b. 21c. 21d. 22. 23.	
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds	21a. 21b. 21c. 21d. 22. 23. 24.	19
20a. 20b. Other 21a. 21b. 21c. 21d. 22. 23. 24. 25.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23	21a. 21b. 21c. 21d. 22. 23. 24. 25.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d.	Spouse's tax withheld  Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU	19 <sup>°</sup>
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26c. 26d. EU 26e. 27. 28.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	19
20a. 20b. 21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26c. 26d. EU 26e. 27. 28.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23  Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27.	19
20a. 20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  unt of Refund to Apply to:	21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	19
20a. 20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.  Amou	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment unt of Refund to Apply to:	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	19
20a. 20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.  Amou	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  and of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	19
20a. 20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.  Amou	Tax Payments  2022 estimated tax Paid with extension Partnership S Corporation Additional Payments Add Lines 20a through 22 Previous Refunds Subtract Line 24 from Line 23 Tax Due Penalties Interest Add Lines 26b and 26c and enter the total on 26d Exception to Underpayment of Estimated Tax Interest on the Underpayment of Estimated Income Tax Pay this Amount Overpayment  and of Refund to Apply to:  Amount of Line 28 to be applied to 2023 Estimated Income Tax N.C. Nongame and Endangered Wildlife Fund N.C. Education Endowment Fund	20b.  21a. 21b. 21c. 21d. 22. 23. 24. 25. 26a. 26b. 26c. 26d. EU 26e. 27. 28.	19'

## D-400 Sch PN (50)

**Total Additions** 

8-17-22

# 2022 Part-Year Resident and Nonresident Schedule

North Carolina Department of Revenue

	DOR Use Only				
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If you enter a taxable percentage on Form D-400, Line 13 because you or your spouse, if married filing jointly, were not full-year residents of North Carolina during tax year 2022, you must attach this schedule to Form D-400. Importantly, you must attach both pages of this schedule to Form D-400. If you do not, the Department may be unable to process your return.

Last N	Name (First 10 Characters) YENIKE	You	r Social Security Num	ber 697089535
A part-ye	ear resident or a nonresident who receives income from N.C. sources must complete	this form t	o determine the perce	ntage of total income from a
	that is subject to N.C. tax. You are a "part-year resident" if you moved to N.C. an			_
N.C. and	became a resident of another state during the tax year. You are a "nonresident" if	you were n	ot a resident of N.C. at	t any time during the tax year
	Important: Refer to the Instructions before com	pleting this	form.	
	NRT Y PYT N		22	38849
	NRS N PYS N		23	72136
Part A	A. Residency Status			
	Taxpayer is: (Select applicable box)	Spou	Se is: (Select applicable bo	x)
		r Resident		☐ Part-Year Resident
Date N	I.C. residency began Date N.C. residency ended Date N.C. re	esidency be	gan D	ate N.C. residency ended
16		D 1 D		
	u and your spouse were both full-year residents of N.C., <b>stop here</b> ; do not complete i	Parts B and	C. Do not attach Sch	ledule PN to Form D-400.
Part	3. Allocation of Income for Part-Year Residents and Nonresidents		0011188114	001111111111111111111111111111111111111
Total	Income		COLUMN A	COLUMN B Amount of Column A
Total	Income		Total Income rom all sources	
			rom an sources	subject to N.C. tax
1.	Wages, Salaries, Tips, Etc.	1.	81234	38849
2.	Taxable Interest	2.	0	0
3.	Taxable Dividends	3.	0	0
4.	Taxable Refunds, Credits, or Offsets	0.	· ·	· ·
	of State and Local Income Taxes	4.	0	0
5.	Alimony Received	5.	0	0
6.	Business Income or (Loss)	6.	0	0
7.	Capital Gain or (Loss)	7.	0	0
8.	Other Gains or (Losses)	8.	0	0
9.	Taxable Amount of IRA Distributions	9.	0	0
10.	Taxable Amount of Pensions			
	and Annuities	10.	0	0
11.	Rental Real Estate, Royalties, Partnerships,			
	S-Corps, Estates, Trusts, Etc.	11.	-9098	0
12.	Farm Income or (Loss)	12.	0	0
13.	Unemployment Compensation	13.	0	0
14.	Taxable Portion of Social Security			
	and Railroad Retirement Benefits	14.	0	0
15.	Other Income	15.	0	0
16.	Total Income	16.	72136	38849
			COLUMN A	COLUMN B
North	Carolina Adjustments	Ente	er the amount from	Amount of Column A
	•	Forn	D-400 Schedule S	subject to N.C. tax
17.	Additions			-
	a. Interest Income From Obligations of States Other Than N.C.	17a.	0	0
	b. Deferred Gains Reinvested Into an Opportunity Fund	17b.	0	0
	c. Bonus Depreciation	17c.	0	0
	d. IRC Section 179 Expense	17d.	0	0
	e. Other Additions to Federal Adjusted Gross Income That Relate to Gross Incom	ne 17e.	0	0

18.

0

Last Name (First 10 Characters) YENIKE Your Social Security Number 697089535

			OLUMN A he amount from	COLUMN B Amount of Column
		Form D	-400 Schedule S	subject to N.C. tax
19.	Deductions			
	State or Local Income Tax Refund	19a.	0	0
	b. Interest Income From Obligations of the United States			
	or United States' Possessions	19b.	0	0
	c. Taxable Portion of Social Security and			
	Railroad Retirement Benefits	19c.	0	0
	d. Retirement Benefits Received by <b>Vested</b> N.C. State Government, N.C.	19d.	0	0
	Local Government, or Federal Government Retirees, i.e. <i>Bailey Settlement</i> e. Bonus Asset Basis	19e.	0	0
	f. Bonus Depreciation	19e. 19f.	0	0
	g. IRC Section 179 Expense	19g.	0	0
	h. Other Deductions From Federal Adjusted Gross	199.	O	O .
	Income That Relate to Gross Income	19h.	0	0
20.	Total Deductions	20.	0	0
21.	Total Income Modified by N.C. Adjustments	21.	72136	38849
art (	C. Part-Year Residents and Nonresidents Taxable Percentage			
22.	Enter the Amount From Column B, Line 21		22	38849
23.	Enter the Amount From Column A, Line 21		23	
23. 24.	Part-Year Residents and Nonresident Taxable Percentage		24	

REV 01/26/23 PRO

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

|--|

OMB No. 1545-0074

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

Filing Status	<b>X S</b>	Single Married filing jointly	Marrie	ed filing separately	(MFS)	Head of	household	(HOH)		ifying sui		J
Check only one box.	•	u checked the MFS box, enter the n on is a child but not your dependen	•	our spouse. If you	check	ed the HOH or	QSS box,	enter th			,	alifying
Your first name and middle initial Last name Y					Your social security number							
ABHIRAM	ΟΥ	YENI	KE					697-08-9535				
If joint return, spouse's first name and middle initial  Last name					Spouse's social security number							
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. n	0.	Preside	ntial Elect	ion Ca	ımpaign
15200 NE	167	TH PL								ere if you		
City, town, or post office. If you have a foreign address, also complete spaces bel			paces below.	w. State ZIP code					if filing joi this fund			
BELLEVUE	<u> </u>						98007		0	ow will no		0
Foreign country	/ name		F	Foreign province/state/county			Foreign postal code yo		your tax	or refund	_	Spouse
 Digital	At ar	ny time during 2022, did you: (a) rec	eive (as	a reward, award, o	r payn	nent for prope	rty or serv	ces); or	(b) sell,			
Assets	exch	ange, gift, or otherwise dispose of a			intere	est in a digital	asset)? (Se	e instru	ctions.)	∐ Yes	X	No
Standard Deduction		eone can claim:		•		a dependent						
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Sp	ouse	: Was bor	rn before J	anuary 2	, 1958	☐ Is b	olind	
Dependents	s (see	instructions):		(2) Social securit	:y	(3) Relationsh	nip (4) Che	ck the bo	x if qualif	ies for (se	e instru	ıctions):
If more	<b>(1)</b> Fi	rst name Last name		number		to you	CI	nild tax cr	edit	Credit for c	ther de	pendents
than four												
dependents, see instructions	s ——											
and check	,											
here L									,			
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					. 1a		81,2	234.
	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 (see instructions)										
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 benefits from Form 8839, line 29							. <u>1f</u>			
If you did not	g	Wages from Form 8919, line 6.							. 1g			
get a Form W-2, see	h	Other earned income (see instruct	,						. 1h			0.
instructions.	i	Nontaxable combat pay election (	see instr	ructions)		<u>1i</u>					0.1	004
		Add lines 1a through 1h							1z		81,2	234.
Attach Sch. B if required.	2a	· -	2a			axable interes			2b			
ii required.	3a		3a			rdinary divide			3b			
	4a	_	4a			axable amoun						
Standard Deduction for—	5a	_	5a			axable amoun			. 5b			
Single or	6a	, _	6a	mothed sheet have		axable amoun	t		. 6b			
Married filing separately,	с 7	If you elect to use the lump-sum election method, check here (see instructions)										
\$12,950		Capital gain or (loss). Attach Schedule D if required. If not required, check here							_		- 0 1	098.
Married filing jointly or	8 9	·	Other income from Schedule 1, line 10									136.
Qualifying surviving spouse,	10	Adjustments to income from Sche	-	•					9		14,-	<u> </u>
\$25,900 • Head of	11	Subtract line 10 from line 9. This is							11		72	136.
household,	12	Standard deduction or itemized	•						12			950.
\$19,400 If you checked	13	Qualified business income deduct		•	,				13		<u> </u>	<i>,,,,,</i>
any box under Standard	14	Add lines 12 and 13							14	_	12 (	950.
Deduction,	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>										186.
see instructions.				.,	,						J / 1	

Form 1040 (2022	2)											Page 2			
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌			16		8,6	636.			
Credits	17	Amount from Schedule 2, lir	ne 3						17						
	18	Add lines 16 and 17							18		8,6	636.			
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812				19						
	20	Amount from Schedule 3, lir	ne 8						20						
	21	Add lines 19 and 20							21						
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22		8,6	636.			
	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 <b>total tax</b>						24		8,6	636.			
Payments	25	Federal income tax withheld													
,	а	Form(s) W-2				25a	16	,473	.						
	b	Form(s) 1099				25b									
	С	Other forms (see instruction	s)			25c									
	d	Add lines 25a through 25c							25d		16,4	473.			
If	26	2022 estimated tax paymen	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									
	29	American opportunity credit	from Form 8863	3, line 8		29									
	30	Reserved for future use .				30									
	31	Amount from Schedule 3, lir	ne 15			31									
	32	Add lines 27, 28, 29, and 31				undable	credits		32						
	33	Add lines 25d, 26, and 32. T	•	•	-				33		16,4	473.			
Defined	34	If line 33 is more than line 24							34						
Refund	35a	Amount of line 34 you want	-			•	•		35a						
Direct deposit?	b	Routing number 1 2 2				Checki		 Savings							
See instructions.	d														
	36	Amount of line 34 you want				36									
Amount	37	Subtract line 33 from line 24				1 1									
You Owe	01	For details on how to pay, g							37						
	38	Estimated tax penalty (see in	nstructions) .			38									
Third Party	Do	you want to allow another													
Designee		structions				_	Yes. Co	omplete	below.	X N	0				
· ·	De	Designee's						tification							
	na	me	no. number (			oer (PIN)			$\perp$						
Sign		der penalties of perjury, I declare													
Here		belief, they are true, correct, and complete. Declaration						f which preparer has any knowledge.  If the IRS sent you an Identity			•				
Joint return?	Yo	Your signature		Date				ne IRS se stection P							
					   SOFTWARE ENGI			1,		1, 0					
See instructions.	Sp	Spouse's signature. If a joint return, <b>both</b> must sign.		Date				If th	ne IRS sei	nt your s	pouse	an			
Keep a copy for your records.								dentity Protection PIN, enter it here							
your records.								(se	e inst.)		Ш_	ш			
		one no. (928)863-642		Email address	ABHIR8044		L.COM								
Paid		eparer's name	Preparer's signat			Date		PTIN		Check					
Preparer	SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 02/11/2023 P0208														
Use Only	Firm's name GLOBAL TAXES LLC						Pho	Phone no. (678)965-9522							
Coc Cilly	г:	m's address 2/F DOOME	V CT F DDII	Firm's address 245 DOONEY OF E DRINGWICK NT 00016								rm's EIN 04 217106E			

245 ROONEY CT E BRUNSWICK NJ 08816

Firm's address

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

REV 02/05/23 PRO

BAA

Firm's EIN

84-3171965

Form **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	cial sec	curity number				
ABHI	8-953	5				
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						
4						
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule	Ε.	5	-9,098.		
6	Farm income or (loss). Attach Schedule F		6			
7	Unemployment compensation		7			
8	Other income:					
а	Net operating loss	)				
b	Gambling					
C	Cancellation of debt					
d	Foreign earned income exclusion from Form 2555	)				
е	Income from Form 8853					
f	Income from Form 8889					
g	Alaska Permanent Fund dividends					
h	Jury duty pay					
i	Prizes and awards					
j	Activity not engaged in for profit income					
k	Stock options					
I	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property 8I					

8m

8n

80

8p

8q

8r

8s

8t

8u

8z

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

m Olympic and Paralympic medals and USOC prize money (see

Section 951A(a) inclusion (see instructions) . . . . . . . . . . . .

Section 461(I) excess business loss adjustment . . . . . . . . . . .

Taxable distributions from an ABLE account (see instructions) . . .

Scholarship and fellowship grants not reported on Form W-2 . . .

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

**n** Section 951(a) inclusion (see instructions)

**u** Wages earned while incarcerated

9

Other income. List type and amount:

Schedule 1 (Form 1040) 2022

-9,098.

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 <b>adjustments to income</b> . Enter here at Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	
	Form 1040 or 1040-36, line 10, or form 1040-196, line 10a		20	

#### **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,

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

2022
Attachment Sequence No. <b>13</b>

Name(s) shown on return Your social security number ABHIRAM REDDY YENIKE 697-08-9535 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) BALANAGAR HYDERABAD TELANGANA IN 500011 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 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 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 510. 4 Royalties received 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance. 7 1,276. 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . 11 843. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,958. 14 14 Repairs . . . 15 Supplies 15 2,478. 16 16 Taxes 17 17 2,053. 18 18 Depreciation expense or depletion . . . . . . . . 19 19 Other (list) 20 20 Total expenses. Add lines 5 through 19 . . . . . . 9,608. 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 Form 6198 . . . . . . . . . . . . . . . . . . 21 -9,098. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . . 9,098.) 510. 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 9,608. 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 9,098. 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

26

-9,098.