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 | ission Identification Number (SID) | | | | | | |
|--|---|--|---|--|--|--|--|
| Taxpay | er's name | Social securit | y numbe | er | | | |
| DIV | YA RATHNAKAR POOJARI | 737-78- | -7921 | | | | |
| | Spouse's name Spouse's social | | | | | | |
| Par | Tax Return Information — Tax Year Ending December 31, 2022 (Enter | year you a | re autl | horizing.) |) | | |
| 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 | 72 | ,850. | | |
| 2 | Total tax | | 2 | 8 | ,801. | | |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | | 3 | 10 | ,158. | | |
| 4 | Amount you want refunded to you | | 4 | 1 | <u>,357.</u> | | |
| 5 | Amount you owe | | 5 | | | | |
| Part | II Taxpayer Declaration and Signature Authorization (Be sure you get and le | eep a cop | y of y | our retui | rn) | | |
| return to send for any Agent payme author payme busine taxes persor | owledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I abov (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transm d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject of delay 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 indient of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact 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 to receive confidential information necessary to answer inquiries and resolve issues related to the particle funds withdrawal Consent. | tter, or electro- action of the tr S. Treasury an acated in the ta in to debit the the authoriza- lests must be processing of ayment. I furt | enic returnismission its distribution its distribution. To receive the elements and the receivers are receivers and the receivers and the receivers are receivers and the receivers and the receivers are receivers and the receivers and the receivers and the receivers are receivers and the | urn originatesion, (b) the esignated la aration soft or this accordence for revoke (ced no late extronic paymowledge | cor (ERO) e reason Financial tware for unt. This cancel) a er than 2 yment of that the | | |
| | ayer's PIN: check one box only | | | | | | |
| > \(\) | | my PIN 8 | 7 9 | 2 1 | as my | | |
| _ | ERO firm name signature on the income tax return (original or amended) I am now authorizing. | Ent | | ligits, but all zeros | as my | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below. | | | | | | |
| Your | signature ▶ Date ▶ | | | | | | |
| Spour | se's PIN: check one box only | | | | | | |
| ороц. | I authorize to enter or generate | my DINI | | | ac my | | |
| L | ERO firm name | | er five o | ligits, but | as my | | |
| | signature on the income tax return (original or amended) I am now authorizing. | | | all zeros | | | |
| | I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below. | | | | | | |
| Spous | se's signature ▶ Date ▶ | | | | | | |
| | Practitioner PIN Method Returns Only—continue below | | | | | | |
| Part | III Certification and Authentication — Practitioner PIN Method Only | | | | | | |
| ERO's | s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2 | 2 4 9 Don't ente | 6 6 er all zer | 1 9 8 | 9 | | |
| author | y that the above numeric entry is my PIN, which is my signature for the electronic individual income to ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Ir | itting this retu | rn in a | ccordance | | | |
| FR∩' | s signature ▶ Date ▶ | | | | | | |
| <u> </u> | ERO Must Retain This Form — See Instructions | | | | | | |
| | LIV WIGH TELAM THIS FULLE — SEE HISH UCLIONS | | | | | | |

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

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

| | 2022 |
|---|------|
| ı | |

OMB No. 1545-0074

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

| For the year Ja | ın. 1–C | Dec. 31, 2022, or other tax year begin | nning | , 2022, | ending | , | 20 | | ee separate structions. |
|----------------------------------|---------|--|---------------|------------------------------------|-----------------------|-----------------|---------------------|------------|----------------------------|
| Filing Status | | Single Married filing se | | • | ng surviving spouse | . , | Es | tate | ☐ Trust |
| Check only one box. | | | | | • | • | | | |
| Your first name | e and | middle initial | Last na | ame | | | Your id (see ins | - | ng number ns) |
| DIVYA RA | THNA | AKAR | POOJ | ARI | | | 737- | 78-7 | 921 |
| Home address | (num | ber and street). If you have a P.O. bo | ox, see ins | tructions. | | | • | | Apt. no. |
| 11340 AL | OMA | RANCH PARKWAY | | | 10 | 21 | | | |
| City, town, or p | ost o | ffice. If you have a foreign address, | also comp | lete spaces below. | | State | | ZIP cod | de |
| SAN ANTO | OIN | | | | | TX | | 7825 | 3 |
| Foreign countr | y nam | е | Foreigr | n province/state/county | | Foreign | postal co | de | |
| Digital Asset | | ny time during 2022, did you: (a) receivise dispose of a digital asset (or a | | | | | r (b) sell, | | |
| Dependents | s | | | | | (4) Ch | eck the box | if qualifi | ies for (see inst.): |
| (see instructions | | (1) First name Last nam | е | (2) Dependent's identifying number | (3) Relationship to y | ou Chi | Child tax credit Cr | | redit for other dependents |
| | | | | | | | | | |
| If more than fou dependents, see | | | | | | | | | |
| instructions and | | | | | | | | | |
| check here | | | | | | | | | |
| Income | 1a | Total amount from Form(s) W-2, b | ox 1 (see i | nstructions) | | | . 1a | | 78,920. |
| Effectively | b | Household employee wages not re | eported on | Form(s) W-2 | | | . 1b | | |
| Connected | С | Tip income not reported on line 1a | (see instr | uctions) | | | . 1c | | |
| With U.S. | d | Medicaid waiver payments not rep | orted on F | Form(s) W-2 (see instruct | ions) | | . 1d | | |
| Trade or | е | Taxable dependent care benefits f | | · | | | . 1e | | |
| Business | f | Employer-provided adoption bene | | • | | | . 1f | | |
| Attach | g | Wages from Form 8919, line 6. | | | | | . 1g | | |
| Form(s) W-2, | h | Other earned income (see instruct | , | | | | . 1h | | |
| 1042-S, | i | Reserved for future use | | | | | | | |
| SSA-1042-S, RRB-1042-S, | j | Reserved for future use | | | 1 1 | | . <u>1j</u> | | |
| and 8288-A | k | Total income exempt by a treaty fr | | | | | | | |
| here. Also | | () | | | <u> 1k </u> | | | | 70 000 |
| attach Form(s) | Z | Add lines 1a through 1h | 1 | 1 | · · · · · · · · | | . 1z | - | 78,920. |
| 1099-R if | 2a | · — | 2a | | able interest | | . 2b | | |
| tax was withheld. | _ | _ | 3a | | linary dividends . | | . 3b | | |
| If you did not | 4a | - | 4a 5a | | able amount | | | | |
| get a Form | 5a 6 | Pensions and annuities | | | able amount | | | | |
| W-2, see | 7 | Capital gain or (loss). Attach Sche | | | | | | | |
| instructions. | 8 | Other income from Schedule 1 (Fo | • | , , | • | | | 1 | -6,070. |
| | 9 | Add lines 1z, 2b, 3b, 4b, 5b, 7, and | | | | | | + | 72,850. |
| | 10 | Adjustments to income: | _ 0. 11/10/10 | . , sa. islai siissaivoiy s | | | | | , 2,000. |
| | а | From Schedule 1 (Form 1040), line | 26 | | 10a | | | | |
| | b | Reserved for future use | | | | | | | |
| | С | Reserved for future use | | | | | | | |
| | d | Enter the amount from line 10a. The | nese are yo | our total adjustments to | income | | . 10d | | |
| | 11 | Subtract line 10d from line 9. This | • | = | | | | | 72,850. |
| | 12 | Itemized deductions (from Scheddeduction (see instructions) | dule A (Fo | rm 1040-NR)) or, for cer | tain residents of Inc | | ard | | |
| | 13a | Qualified business income deduct | | | 1 1 | .00, 111414.110 | 12 | | 12,950. |
| | b | Exemptions for estates and trusts | | | | | | | |
| | С | Add lines 13a and 13b | | | | | . 130 | | |
| | 14 | | | | | | | | 12,950. |
| | 15 | Subtract line 14 from line 11. If zer | | | | | | + | 59,900. |

| Form 1040-NR (2 | 2022) | | | | | | | Page 2 |
|--------------------------------------|---------------|---|-----------------------|-------------------|--------------------|---------------------------|--------|--------------------|
| Tax and | 16 | Tax (see instructions). Check if any from F | form(s): 1 8 | 814 2 497 | 72 3 🗌 | | 16 | 8,801. |
| Credits | 17 | Amount from Schedule 2 (Form 1040), li | | | | | 17 | 0. |
| | 18 | Add lines 16 and 17 | | | | | 18 | 8,801. |
| | 19 | Child tax credit or credit for other depen | dents from Sched | ule 8812 (Form 10 |)40) | | 19 | |
| | 20 | Amount from Schedule 3 (Form 1040), li | ne 8 | | | [| 20 | |
| | 21 | Add lines 19 and 20 | | | | | 21 | |
| | 22 | Subtract line 21 from line 18. If zero or le | ess, enter -0 | | | [| 22 | 8,801. |
| | 23a | Tax on income not effectively connected Schedule NEC (Form 1040-NR), line 15 | | | 23a | | | |
| | b | Other taxes, including self-employment | tax, from Schedul | e 2 (Form 1040), | | | | |
| | | line 21 | | | 23b | | | |
| | С | Transportation tax (see instructions) . | | | 23c | | | |
| | d | Add lines 23a through 23c | | | | 1 | 23d | |
| | 24 | Add lines 22 and 23d. This is your total | tax | | <u> </u> | | 24 | 8,801. |
| Payments | 25 | Federal income tax withheld from: | | | | | | |
| | а | Form(s) W-2 | | | 25a 10 |),158. | | |
| | b | Form(s) 1099 | | | 25b | | | |
| | С | Other forms (see instructions) | | | 25c | | | |
| | d | Add lines 25a through 25c | | | | | 25d | 10,158. |
| | е | Form(s) 8805 | | | | | 25e | |
| | f | Form(s) 8288-A | | | | | 25f | |
| | g | Form(s) 1042-S | | | | | 25g | |
| | 26 | 2022 estimated tax payments and amou | | | | | 26 | |
| | 27 | Reserved for future use | | | 27 | | | |
| | 28 | Additional child tax credit from Schedule | • | , | 28 | | | |
| | 29 | Credit for amount paid with Form 1040- | | | 29 | | | |
| | 30 | Reserved for future use | | | 30 | | | |
| | 31 | Amount from Schedule 3 (Form 1040), li | | | 31 | | | |
| | 32 | Add lines 28, 29, and 31. These are your | | | | ī | 32 | |
| | 33 | Add lines 25d, 25e, 25f, 25g, 26, and 32 | | | | | 33 | 10,158. |
| Refund | 34 | If line 33 is more than line 24, subtract line | | | • | 1 | 34 | 1,357. |
| | 35a | Amount of line 34 you want refunded to | | | _ | 1 | 35a | 1,357. |
| Direct deposit? See instructions. | b | Routing number 0 7 1 0 0 0 | | c Type: | Checking L | Savings | | |
| | d | Account number 5 2 3 2 3 8 | | | | | | |
| | е | If you want your refund check mailed to | | | | 1 | | |
| | | enter it here. | | | | | | |
| | 36 | Amount of line 34 you want applied to y | our 2023 estimat | ed tax | 36 | | | |
| Amount | 37 | Subtract line 33 from line 24. This is the | • | | | | | |
| You Owe | 20 | For details on how to pay, go to www.irs | - | | | | 37 | |
| T | 38 | Estimated tax penalty (see instructions) | | | 38 | | | w. 🛛 No |
| Third Party | • | ou want to allow another person to discuss | | | | es. Comple | | W. |
| Designee | Desig name | | Phone no. |) | | nal identific er (PIN) | cation | \top |
| Decigned | Under | penalties of perjury, I declare that I have examine they are true, correct, and complete. Declaration | ned this return and a | 1 , 0 | ules and statement | s, and to the | | , |
| Sign | | | | Your occupation | | | • | nt you an Identity |
| Here | rour | signature | Date | Tour occupation | I | | | IN, enter it here |
| 11616 | | | | SOFTWARE E | ENGINEER | (see i | | 1 1 1 1 1 |
| | Phone | e no. | Email address | 1 | | 1, | | |
| Doid | | | er's signature | | Date | PTIN | (| Check if: |
| Paid | | SYAM | PRIYA RAM SAGA | R GUPTA TALLAM | 03/15/2023 | P02082 | 703 | Self-employed |
| Preparer | Firm's | s name SYANT REPAY RAM ASKARS GURTE TA | | | 1 | | | 8)965-9522 |
| Use Only | | s address 245 DOONEY CT E I | | T 00016 | | Firm's FII | | 3171965 |

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

DIVYA RATHNAKAR POOJARI

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

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

| | Sequence No. 01 |
|-----------|---------------------|
| Your soci | ial security number |
| 727_70 | _7021 |

| 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 | ach Schedule E . | 5 | -6,070. |
| 6 | Farm income or (loss). Attach Schedule F | | 6 | |
| 7 | Unemployment compensation | | 7 | |
| 8 | Other income: | | | |
| а | Net operating loss | 8a (| | |
| b | Gambling | 8b | | |
| С | Cancellation of debt | 8c | | |
| d | Foreign earned income exclusion from Form 2555 | 8d () | | |
| е | Income from Form 8853 | 8e | | |
| f | Income from Form 8889 | 8f | | |
| g | Alaska Permanent Fund dividends | 8g | | |
| h | Jury duty pay | 8h | | |
| i | Prizes and awards | 8i | | |
| j | Activity not engaged in for profit income | 8j | | |
| k | Stock options | 8k | | |
| ı | Income from the rental of personal property if you engaged in the rental | | | |
| | for profit but were not in the business of renting such property | 81 | | |
| m | Olympic and Paralympic medals and USOC prize money (see | | | |
| | instructions) | 8m | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | |
| 0 | Section 951A(a) inclusion (see instructions) | 80 | - | |
| р | Section 461(I) excess business loss adjustment | 8p | | |
| q | Taxable distributions from an ABLE account (see instructions) | 8q | | |
| r | Scholarship and fellowship grants not reported on Form W-2 | 8r | - | |
| S | Nontaxable amount of Medicaid waiver payments included on Form | | | |
| | 1040, line 1a or 1d | 8s () | 4 | |
| 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: | 0- | | |
| 0 | Total ather income. Add lines On through On | 8z | | |
| 9 10 | Total other income. Add lines 8a through 8z | | 9 | -6 070 |

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 adjustments to income . 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 | | 2 0 | |

SCHEDULE NEC (Form 1040-NR)

Tax on Income Not Effectively Connected With a U.S. Trade or Business

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form1040NR for instructions and the latest information. Attach to Form 1040-NR.

| 2022 |
|--------------------------------------|
| Attachment Sequence No. 7B |

OMB No. 1545-0074

Name shown on Form 1040-NR Your identifying number DIVYA RATHNAKAR POOJARI 737-78-7921

| Enter a | amount of income und | er the appropriate rate of tax. See instructions. | | | | | | | |
|--|--|---|---------------|-----|-----------------------------|------------------------|-------------------------|--|--|
| | | Nature of Income | | | (a) 10% | (b) 15% | (c) 30% | (d) Other | r (specify) |
| | | Nature of income | | | (a) 1070 | (5) 1070 | (0) 0070 | % | % |
| 1 | Dividends and divide | end equivalents: | | | | | | | |
| а | Dividends paid by U. | S. corporations | | 1a | | | | | |
| b | Dividends paid by fo | reign corporations | | 1b | | | | | |
| С | Dividend equivalent p | ayments received with respect to section 871(m) tr | ransactions | 1c | | | | | |
| 2 | Interest: | | | | | | | | |
| а | Mortgage | | | 2a | | | | | |
| b | Paid by foreign corpo | orations | | 2b | | | | | |
| С | Other | | | 2c | | | | | |
| 3 | Industrial royalties (p | atents, trademarks, etc.) | | 3 | | | | | |
| 4 | Motion picture or TV | copyright royalties | | 4 | | | | | |
| 5 | Other royalties (copy | rights, recording, publishing, etc.) | | 5 | | | | | |
| 6 | Real property income | e and natural resources royalties | | 6 | | | | | |
| 7 | Pensions and annuiti | es | | 7 | | | | | |
| 8 | Social security benef | fits | | 8 | | | | | |
| 9 | | e 18 below | | 9 | | | | | |
| 10 | If zero or less, ente | |). | | | | | | |
| а | Winnings | | | | | | | | |
| b | | <u> </u> | | 10c | | | | | |
| 11 | Gambling winnings – | Residents of countries other than Canada. | | 11 | | | | | |
| 12 | | | | | | | | | |
| 12 | | | | 12 | | | | | |
| 13 | Add lines 1a through | 12 in columns (a) through (d) | | 13 | | | | | |
| 14 | | ate of tax at top of each column | | 14 | | | | | |
| 15 | | ffectively connected with a U.S. trade or business | | | through (d) of line 1 | 1 Enter the total here | and on Form 1040 | -NR. line 23a 15 | |
| | Tax on moonic not o | Capital Gains and | | | | | | TVI I, IIII O ZOG | |
| Enter only the capital gains and losses from property sales or exchanges that are from sources | | 16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below) | (b) Date acqu | | (c) Date sold mm/dd/yyyy | (d) Sales price | (e) Cost or other basis | (f) LOSS If (e) is more than (d), subtract (d) from (e). | (g) GAIN If (d) is more than (e), subtract (e) from (d). |
| | he United States and not ely connected with a U.S. | | | | | | | (o). | (a). |
| business. Do not include a gain or loss on disposing of a U.S. real | | | | | | | | | |
| propert | y interest; report these | | | | | | | | |
| gains a (Form 1 | nd losses on Schedule D 040). | | | | | | | | |
| | property sales or | | | | | | | | |
| | ges that are effectively ted with a U.S. business | 17 Add columns (f) and (g) of line 16 | | | l | | 17 | (| |
| on Schedule D (Form 1040), Form 4797, or both. | | 18 Capital gain. Combine columns (f) and (| | | | e and on line 9 abo | | | |

SCHEDULE OI (Form 1040-NR)

Other Information

Go to www.irs.gov/Form1040NR for instructions and the latest information.

Attach to Form 1040-NR.

Answer all questions.

OMB No. 1545-0074

2022

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

| Name | sh | nown on Form 1040-NR | | | | Your identifying | number | | | |
|------|--|--|---|-----------------------------|--|-------------------|--------------|------------|--|--|
| DI | JΥ | A RATHNAKAR POOJARI | | | | 737-78-7 | 921 | | | |
| Α | | Of what country or countries w | vere you a citizen or nationa | al during the tax | year? INDIA | | | | | |
| В | | In what country did you claim | residence for tax purposes | s during the tax | year? United States | } | | | | |
| С | | Have you ever applied to be a green card holder (lawful permanent resident) of the United States? | | | | | | | | |
| D | <i>,</i> | | | | | | | | | |
| | | | | | | | | ⊠ No | | |
| 2 | 2. A green card holder (lawful permanent resident) of the United States? | | | | | | | | | |
| | | • | • | • | | | | | | |
| Е | | If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1 | | | | | | | | |
| F | | Have you ever changed your vill you answered "Yes," indicate | isa type (nonimmigrant sta | tus) or U.S. immi | gration status? | | ☐ Yes | ⊠ No | | |
| G | | List all dates you entered and I | eft the United States during | g 2022. See instr | ructions. | | | | | |
| | | Note: If you're a resident of Cocheck the box for Canada or | anada or Mexico AND cor Mexico and skip to item F | nmute to work ir I...... | n the United States at frequ □ Canada | uent intervals, | | | | |
| | | Date entered United States mm/dd/yy | Date departed United State mm/dd/yy | es | Date entered United State mm/dd/yy | | arted United | d States | | |
| | | ПП/аа/уу | ПП/аа/уу | | IIIII/dd/yy | _ | TITT/GG/yy | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| н | | Give number of days (including | vacation, nonworkdays, and | — I partial days) you | were present in the United | States during: | | | | |
| | | 2020 | , 2021 | , aı | nd 2022 365 | | | | | |
| I | | Did you file a U.S. income tax i If "Yes," give the latest year an | return for any prior year?. | | | | ☐ Yes | ⊠ No | | |
| J | | Are you filing a return for a trus | st? | | | | ☐ Yes | ⊠ No | | |
| | | If "Yes," did the trust have a U.S. person, or receive a contr | | | | | ☐ Yes | □No | | |
| K | | Did you receive total compens | ation of \$250,000 or more | during the tax ye | ar? | | ☐ Yes | ⊠ No | | |
| | | If "Yes," did you use an alterna | ative method to determine t | the source of this | s compensation? | | ☐ Yes | ☐ No | | |
| L | | Income Exempt From Tax—If complete (1) through (3) below | | | | tax treaty with | a foreign | country, | | |
| 1 | | Enter the name of the country, amount of exempt income in the | | | | ı claimed the tre | eaty benefit | t, and the | | |
| | | (a) Cour | ntry | (b) Tax treaty ar | ticle (c) Number of mont claimed in prior tax ye | | nount of exe | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | (e) Total. Enter this amount or | n Form 1040-NR, line 1k. D | o not enter it any | where else on line 1 | | | | | |
| 2 | 2. | Were you subject to tax in a fo | | - | | | Yes | ☐ No | | |
| 3 | 3. | Are you claiming treaty benefit | s pursuant to a Competent | Authority detern | nination? | | ☐ Yes | ⊠ No | | |
| | | If "Yes," attach a copy of the C | Competent Authority detern | nination letter to | your return. | | | | | |
| M | | Check the applicable box if: | | | | | | | | |
| 1 | | This is the first year you are may with a U.S. trade or business u | | | | | | | | |
| 2 | 2. | You have made an election in States as effectively connected | | | | | | | | |

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.

Attachment

2022 Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

| Name | s) shown on return | | | | | | Your soc | ial security | number |
|-------------|--|---------|------------------|----------|---------|----------------------------|---------------|----------------|----------|
| DIV | YA RATHNAKAR POOJARI | | | | | | 737-7 | 78-7921 | |
| Pai | Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40. | | | C. See | instruc | ctions. If you | are an ind | ividual, rep | ort farm |
| Α | Did you make any payments in 2022 that would require you | to file | Form(s) 1 | 099? S | See ins | tructions . | | . 🗌 Ye | s 🛛 No |
| В | If "Yes," did you or will you file required Form(s) 1099? . | | | | | | | . 🗌 Ye | es 🗌 No |
| 1a | | | | | | | | | |
| Α | IN | | | | | | | | |
| В | | | | | | | | | |
| С | | | | | | | | | |
| 1b | Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair | | | | Fai | ir Rental Days | 1 | nal Use ays | QJV |
| Α | personal use days. Check the Qu | | | Α | | 365 | | 0 | |
| В | if you meet the requirements to f | | | В | | | | | |
| С | qualified joint venture. See instru | ctions | S. | С | | | | | |
| Туре | of Property: | | ' | | | | | | |
| | Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial | tal | 5 Land 6 Roya | | | Self-Rental Other (desc | ribe) | | |
| | | | | | | Propert | | | |
| Inco | me: | | | Α | | В | | | С |
| 3 | Rents received | 3 | | | 50. | | | | |
| 4 | Royalties received | 4 | | | | | | | |
| Expe | nses: | | | | | | | | |
| 5 | Advertising | 5 | | | | | | | |
| 6 | Auto and travel (see instructions) | 6 | | | | | | | |
| 7 | Cleaning and maintenance | 7 | | 7 | 00. | | | | |
| 8 | Commissions | 8 | | • | | | | | |
| 9 | Insurance | 9 | | | | | | | |
| 10 | Legal and other professional fees | 10 | | | | | | | |
| 11 | Management fees | 11 | | 3 | 50. | | | | |
| 12 | Mortgage interest paid to banks, etc. (see instructions) | 12 | | | 50. | | | | |
| 13 | Other interest | 13 | | | | | | | |
| 14 | Repairs | 14 | | 1,8 | 60 | | | | |
| 15 | Supplies | 15 | | 1,1 | | | | | |
| 16 | Taxes | 16 | | -,- | | | | | |
| 17 | Utilities | 17 | | 2,5 | nn | | | | |
| 18 | Depreciation expense or depletion | 18 | | | | | | | |
| 19 | Other (list) | 19 | | | | | | | |
| 20 | Total expenses. Add lines 5 through 19 | 20 | | 6,5 | 20 | | | | |
| 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 | | | 0,3 | 20. | | | | |
| | file Form 6198 | 21 | | -6,0 | 70. | | | | |
| 22 | Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) | 22 | (| -6,07 | | , | , |)(|) |
| 23 a | Total of all amounts reported on line 3 for all rental prope | | | | 23a | | 450. | | |
| b | | erties | | | 23b | | | | |
| С | Total of all amounts reported on line 12 for all properties | | | | 23c | | | | |
| d | Total of all amounts reported on line 18 for all properties | | | | 23d | | | | |
| е | Total of all amounts reported on line 20 for all properties | | | | 23e | (| 5,520. | | |
| 24 | Income. Add positive amounts shown on line 21. Do no | | - | | | | . 24 | | |
| 25 | Losses. Add royalty losses from line 21 and rental real estat | te loss | ses from lir | ne 22. E | nter to | tal losses he | ere 25 | (| 6,070.) |
| 26 | Total rental real estate and royalty income or (loss). Ohere. If Parts II, III, IV, and line 40 on page 2 do not | | | | | | | | |

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2

26

-6,070.