E 1040 Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2022	
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OMB No. 1545-0074

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

Filing Status Check only	X S	Single Married filing jointly	Marrie	ed filing separately (N	1FS)	Head of	household (H	OH)		ifying survi ise (QSS)	ving
one box.		u checked the MFS box, enter the na on is a child but not your dependent		our spouse. If you ch	neck	ed the HOH or	QSS box, e	nter the	child's	name if the	e qualifying
Your first name	and mi	ddle initial	Last nar	me				,	Your so	cial security	number
RAMAKRISHNA GARINE				NE					633-73-6195		
If joint return, sp	oouse's	first name and middle initial	Last nar	me				;	Spouse's	s social sec	urity number
Home address	numbe	r and street). If you have a P.O. box, see	instructio	ons.			Apt. no.				n Campaign
		A VISTA DR					1212			ere if you,	
City, town, or p	ost offic	e. If you have a foreign address, also co	mplete spaces below. State ZIP of							if filing joint this fund. C	
PEORIA				IL 61						w will not o	
Foreign country	name		F	Foreign province/state/c	ount	У	Foreign posta	reign postal code your t		tax or refund. You Spouse	
 Digital	At an	y time during 2022, did you: (a) rece	eive (as	a reward, award, or p	oayn	nent for prope	rty or service	es); or (l	o) sell,	_	
Assets	exch	ange, gift, or otherwise dispose of a	digital a	asset (or a financial in	ntere	est in a digital	asset)? (See	instruc	tions.)	Yes	⊠ No
Standard Deduction	_	eone can claim: You as a de Spouse itemizes on a separate return				a dependent					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind Spo	use:	: Was bor	n before Jar	uary 2,	1958	☐ Is blir	nd
Dependents	(see i	nstructions):		(2) Social security		(3) Relationsh	ip (4) Chec	k the box	if qualif	ies for (see i	nstructions):
If more	•	rst name Last name		number	4	to you	Chile	d tax cre	dit	Credit for oth	er dependents
than four											
dependents, see instructions											
and check	,										
here											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (see	e instructions)					1a	11	2,160.
	b	Household employee wages not re	eported o	on Form(s) W-2					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a			٦.				1c		
attach Forms	d	Medicaid waiver payments not rep	orted or	n Form(s) W-2 (see in	stru	ctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits f	rom Fori	m 2441, line 26 .					1e		
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839, line 29					1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		
get a Form W-2, see	h	Other earned income (see instructi							1h		0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)	٠	<u>li</u>					
	Z	Add lines 1a through 1h			٠				1z	11	2,160.
Attach Sch. B	2a	'	2a			axable interest			2b		
if required.	3a		3a			rdinary divide			3b		33.
	4a -		4a			axable amoun			4b		
Standard Deduction for—	5a		5a			axable amoun			5b		
Single or	6a		6a			axable amoun	t		6b	_	
Married filing separately,	c	If you elect to use the lump-sum e		,					_		2
\$12,950	7	Capital gain or (loss). Attach Sched						. L	7	1	-3.
 Married filing jointly or 	8	Other income from Schedule 1, lin		This is a second at 1 to 2					8		1,310.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,		•					9	+ 10	0,880.
\$25,900	10	Adjustments to income from Sche	-						10	1.0	0 000
 Head of household, 	11	Subtract line 10 from line 9. This is							11		0,880.
\$19,400	12	Standard deduction or itemized Qualified business income deduction		,	,	 5 A			12	+	<u>2,950.</u>
If you checked any box under	13								13	1	2 050
Standard Deduction,	14 15	Subtract line 14 from line 11. If zer							15		<u>2,950.</u>
see instructions.	13	Capa act line 14 (10)11 line 11. Il Zei	0 01 1635	5, GITTOI -03. ITHIS IS YO	Jui L	avanie IIICOII			13	1 8	7,930.

Form 1040 (2022	2)			Page 2
Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3	16	14,955.
Credits	17	Amount from Schedule 2, line 3	17	1,958.
	18	Add lines 16 and 17	18	16,913.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0	22	16,913.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	16,913.
Payments	25	Federal income tax withheld from:		
,	а	Form(s) W-2		
	b	Form(s) 1099		
	С	Other forms (see instructions)		
	d	Add lines 25a through 25c	25d	18,738.
If you have a	26	2022 estimated tax payments and amount applied from 2021 return	26	
If you have a qualifying child,	27	Earned income credit (EIC)		
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812		
	29	American opportunity credit from Form 8863, line 8		
	30	Reserved for future use		
	31	Amount from Schedule 3, line 15		
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	18,738.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,825.
neiulia	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	35a	1,825.
Direct deposit?	b	Routing number X X X X X X X X X X X C Type: Checking Savings		
See instructions.	d	Account number X X X X X X X X X X X X X X X X X X X		
	36	Amount of line 34 you want applied to your 2023 estimated tax		
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to <i>www.irs.gov/Payments</i> or see instructions	37	
	38	Estimated tax penalty (see instructions)		
Third Party	Do	you want to allow another person to discuss this return with the IRS? See		
Designee		structions	below.	X No
		signee's Phone Personal ident no. number (PIN)	ification	
Sign		der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and t	o the bes	st of my knowledge and
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	h prepar	er has any knowledge.
Here	Yo			nt you an Identity
		land the second	tection P e inst.)	IN, enter it here
Joint return? See instructions.		ENGLINEER		nt your spouse an
Keep a copy for your records.	Ор	Ider		ection PIN, enter it here
	Ph	one no. (940)799-1221 Email address RAMAKRISHNAGARINE@GMAIL.COM		
Doid	Pre	eparer's name Preparer's signature Date PTIN	_	Check if:
Paid	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 03/30/2023 P0208	2703	Self-employed
Preparer	Fire	m's name GLOBAL TAXES LLC Pho	ne no. (678)965-9522
Use Only	Fire		n's FIN	84-3171965

SCHEDULE E (Form 1040)

Internal Revenue Service

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 Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number RAMAKRISHNA GARINE 633-73-6195

Par	Note: If you are in the	From Rental Real Estate and e business of renting personal proper from Form 4835 on page 2, line 40.	d Ro ty, use	yalties Schedule	e C. See ir	nstruc	ctions. If you ar	e an indiv	vidual, repo	ort farm	
Α		nts in 2022 that would require you	to file	Form(s) 1	1099? Se	e ins	tructions		. \(\text{Ye} \)	s 🛛 No	
		"Yes," did you or will you file required Form(s) 1099?									
1a		ch property (street, city, state, ZIF									
Α	IN										
В											
С											
1b	Type of Property (from list below) 2									QJV	
Α	3	personal use days. Check the QJ			Α		365	0			
В		if you meet the requirements to fi qualified joint venture. See instru			В						
С		qualified joint venture. See instru	CHOIR	5.	C						
	of Property:										
	Single Family Residence Multi-Family Residence	3 Vacation/Short-Term Rent4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (descri	be)			
				1,			Propertie				
ncon	ne:				A		В	3.		С	
3			3		55	0					
4			_			•					
	nses:					-					
5			5								
6		tructions)									
7	•	nce	7		1,20	0.					
8	_		8								
9			9								
10		ional fees	10								
11			-11		1,00	0.					
12		to banks, etc. (see instructions)	12								
13	Other interest		13								
14			14		3,21	0.					
15	Supplies		15		3,65	0.					
16	Taxes		16								
17	Utilities		17		2,80	0.					
18	Depreciation expense o	r depletion	18								
19	Other (list)		19								
20	· ·	es 5 through 19	20		11,86	0.					
21	_	ne 3 (rents) and/or 4 (royalties). If									
		structions to find out if you must			11 21						
	file Form 6198		21	-	-11,31	0.					
22		state loss after limitation, if any, ructions)	22	(11,310	.)()	()	
23a	Total of all amounts rep	orted on line 3 for all rental prope	rties		2	23a		550.			
b		orted on line 4 for all royalty prope	erties		2	23b					
С		orted on line 12 for all properties			2	23c					
d	·	orted on line 18 for all properties			2	23d					
е		orted on line 20 for all properties				23e	11,	860.			
24	•	amounts shown on line 21. Do no		-				24			
25	Losses. Add royalty loss	ses from line 21 and rental real estat	e loss	ses from lir	ne 22. Ent	ter to	tal losses here	25	(]	<u>11,310.)</u>	
26		e and royalty income or (loss).									
		and line 40 on page 2 do not a line 5. Otherwise, include this ar						26	-	-11,310.	

Form **8582**

Passive Activity Loss Limitations

See separate instructions.

Attach to Form 1040, 1040-SR, or 1041

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

OMB No. 1545-1008

2022

Attachment Sequence No. 858

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8582 for instructions and the latest information.

lame(s) shown on return	Identifying	number
RAMA	AKRISHNA GARINE	633-73	3-6195
Par	t I 2022 Passive Activity Loss		
	Caution: Complete Parts IV and V before completing Part I.		_
	Il Real Estate Activities With Active Participation (For the definition of active participation, see Spance for Rental Real Estate Activities in the instructions.)	ecial	
1a	Activities with net income (enter the amount from Part IV, column (a)) 1a	0.	
b	Activities with net loss (enter the amount from Part IV, column (b)) 1b (11, 3	310.)	
С	Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c (
d	Combine lines 1a, 1b, and 1c	1d	-11,310.
All Ot	her Passive Activities		
2a	Activities with net income (enter the amount from Part V, column (a)) 2a		
b	Activities with net loss (enter the amount from Part V, column (b)) 2b		
С	Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c)	
d	Combine lines 2a, 2b, and 2c	2d	
3	Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your reall losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report losses on the forms and schedules normally used		-11,310.
	If line 3 is a loss and: • Line 1d is a loss, go to Part II.		
	 Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 1 	0.	
Part II	on: If your filing status is married filing separately and you lived with your spouse at any time dur. Instead, go to line 10.		r, do not complet
Par	·		
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
4	Enter the smaller of the loss on line 1d or the loss on line 3	4	11,310.
5	Enter \$150,000. If married filing separately, see instructions		
6	Enter modified adjusted gross income, but not less than zero. See instructions 6 112,1	.90.	

Pai	Till Special Allowance for Rental Real Estate Activities With Active Participation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
4	Enter the smaller of the loss on line 1d or the loss on line 3	4	11,310.
5	Enter \$150,000. If married filing separately, see instructions		
6	Enter modified adjusted gross income, but not less than zero. See instructions 6 112,190.		
	Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0-on line 9. Otherwise, go to line 7.		
7	Subtract line 6 from line 5		
8	Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	8	18,905.
9	Enter the smaller of line 4 or line 8	9	11,310.
Par	t III Total Losses Allowed		
10	Add the income, if any, on lines 1a and 2a and enter the total	10	0.
11	Total losses allowed from all passive activities for 2022. Add lines 9 and 10. See instructions to find		
	out how to report the losses on your tax return	11	11,310.
Par	t IV Complete This Part Before Part I Lines 1a 1b and 1c. See instructions	,	

Complete This Part Before Part I, Lines Ta, Tb, and Tc. See instructions.							
Name of activity	Currer	nt year	Prior years	Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
	0.	11,310.			11,310.		
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	11,310.					

Page **2**

Part V Complete This Part Befor	e Part I, Lines 2	a, 2b, and 2c. S	ee instructions.			
Name of activity	Currer	nt year	Prior years	Overall gain or loss		
Name of activity	(a) Net income (b) Net loss (line 2a) (line 2b)		(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c						
Part VI Use This Part if an Amour	nt Is Shown on F	Part II, Line 9. S	ee instructions.			
	Form or schedule	,				
Name of activity	and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).	
	E Ln 22	11,310.	1.00000000	11,310	0.	
		,				
				V		
Total		11,310.	1.00	11,310	0.	
Part VII Allocation of Unallowed L						
Name of activity	Form or sche and line nur to be reporte (see instruct	mber ed on (a) I	_OSS	(b) Ratio	(c) Unallowed loss	
Total				1.00		
Part VIII Allowed Losses. See instr	uctions.					
Name of activity	Form or sch and line nur to be reporte (see instruct	mber ed on (a) I	_oss (b) U	nallowed loss	(c) Allowed loss	
Total						