Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

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

Submission Identification Number (SID)

T.....

Taxpay	/er's name	Social securi	ity numb	er
ANU	JDEEP KOLLIPARA	844-48	-0365	7
Spous	e's name	Spouse's so	cial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2022 (En	iter year you a	are aut	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	111,053.
2	Total tax		2	17,386.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	19,832.
4	Amount you want refunded to you		4	2,446.
5	Amount you owe		5	
Par			y of y	our return)

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

Taxpayer's PIN: check one box only

X	I authorize	GLOBAL TAXES	LLC	to enter or generate my PIN

8	0	3	6	7				
Ent don	Enter five digits, but don't enter all zeros							

my

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

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

Your signature

Date 🕨

Spouse's PIN: check one box only

I authorize

to	enter	or	generate	my	PIN

as mv Enter five digits, but don't enter all zeros

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

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

Spouse's signature 🕨	Date 🕨
Practitioner PIN Me	hod Returns Only—continue below
Part III Certification and Authentication – Prac	titioner PIN Method Only
ERO's EFIN/PIN. Enter your six-digit EFIN followed by you	r five-digit self-selected PIN. 2 2 2 4 9 6 6 1 9 8 9

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

ERO's signature ►		Date 🕨	
	t Retain This Form — Sea Form to the IRS Unless		
For Denemicarly Deduction Act Nation and vous toy set		DEV 02/05/22 DDO	Earm 8879 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/05/23 PRO

E 1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn 20	22	OMB No. 1545	5-0074	IRS Use	Only-	–Do not w	vrite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly	ame of y	ed filing separately	, , ,				,	spo	lifying sur use (QSS) a name if t	0
Your first name		, ,	Last na	me						Your so	cial securi	ity number
ANUDEEP				IPARA							48-036	-
-	oouse's	s first name and middle initial	Last na									curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructio	ons.				Apt. no.		Preside	ntial Electi	ion Campaigr
1674 BOE											here if you	
		ce. If you have a foreign address, also co	mplete s	paces below.	Sta	ite	ZIP	code		•		ntly, want \$3
MAITLANI)				FI	J	32	751		0	o this fund. ow will not	Checking a
Foreign country			F	oreign province/sta	ite/count	ty	Forei	gn postal c	ode		k or refund	•
											🗌 You	Spouse
Digital Assets		ny time during 2022, did you: (a) rec ange, gift, or otherwise dispose of a									Yes	X No
Standard Deduction	_	eone can claim:	•	— ·		a dependent						
Age/Blindness	You	: 🗌 Were born before January 2, 1	958 🛛	Are blind	Spouse	: 🗌 Was bo	rn bef	ore Janu	ary 2	, 1958	🗌 ls b	lind
Dependents		• • • • • • • • • • • • • • • • • • •		(2) Social secu	•	(3) Relationsh					fies for (see	e instructions):
If more		irst name Last name		number	inty	to you		Child t	ax cr	edit	Credit for of	ther dependents
than four	.,											<u> </u>
dependents,									=			
see instructions and check	s ——								=			\square
here									_			
Incomo	1a	Total amount from Form(s) W-2, b	ox 1 (se	e instructions) .						1a	1	23,418.
Income	b	Household employee wages not re								1b		
Attach Form(s)	с	Tip income not reported on line 1a	(see ins	structions)						10	;	
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s) W-2 (se	e instru	uctions)				1d	I	
W-2G and	е	Taxable dependent care benefits f	rom For	m 2441, line 26						1e	•	
1099-R if tax was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line	29.					1f	:	
If you did not	g	Wages from Form 8919, line 6 .								1g	1	
get a Form	h	Other earned income (see instruct	ions) .							1h	1	0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see instr	uctions)		1 i	i					
	z	Add lines 1a through 1h								1z	. 1	23,418.
Attach Sch. B	2a	Tax-exempt interest	2a		bΤ	axable interes	t.			2b)	
if required.	3a	Qualified dividends	3a		b C	Ordinary divide	nds .			3b		
	4a	IRA distributions	4a		bΤ	axable amoun	ıt			4b		
Standard	5a	Pensions and annuities	5a		bТ	axable amoun	ıt			5b		
Deduction for -	6a	Social security benefits	6a		bΤ	axable amoun	ıt			6b)	
 Single or Married filing 	с	If you elect to use the lump-sum e	lection r	nethod, check he	re (see	instructions)			. [
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D if	required. If not re	equired	, check here			. [7		-95.
 Married filing 	8	Other income from Schedule 1, lin	e10 .							8	-	12,270.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	and 8.	This is your total	incom	e				9	1	11,053.
surviving spouse, \$25,900	10	Adjustments to income from Sche	dule 1, l	ine 26						10)	
Head of	11	Subtract line 10 from line 9. This is	s your a	djusted gross inc	come					11	1	11,053.
household, \$19,400	12	Standard deduction or itemized	deducti	i ons (from Sched	ule A)					12	2	12,950.
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Fo	rm 899	5-A				13	;	
any box under Standard	14	Add lines 12 and 13								14	,	12,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -0 This i	s your t	taxable incom	ne.			15		98,103.

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

Form **1040** (2022)

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3	<u> </u>	16	17,	,386.
Credits	17	Amount from Schedule 2, lir	ne3					17		
	18	Add lines 16 and 17						18	17,	,386.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, lir	ne8					20		
	21	Add lines 19 and 20						21		
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	17,	,386.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23		0.
	24	Add lines 22 and 23. This is	your total tax					24	17,	,386.
Payments	25	Federal income tax withheld								
,, ,	а	Form(s) W-2				25a 19	9,832.			
	b	Form(s) 1099				25b		1		
	с	Other forms (see instruction:				25c		-		
	d	Add lines 25a through 25c	,					25d	19,	,832.
	26	2022 estimated tax payment						26		
If you have a l qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit				29		-		
	30	Reserved for future use .		,		30				
	31	Amount from Schedule 3, lir				31		-		
	32	Add lines 27, 28, 29, and 31						32		
	33	Add lines 25d, 26, and 32. T			-			33	19,	,832.
Defined	34	If line 33 is more than line 24	,					34		,446.
Refund	35a	Amount of line 34 you want	-				🗆	35a	2,	,446.
Direct deposit?	b	Routing number 0 5 5					Savings			
See instructions.	d	Account number 5 8 3					9			
	36	Amount of line 34 you want a			ed tax	36				
Amount	37	Subtract line 33 from line 24	,							
You Owe	07	For details on how to pay, g						37		
	38	Estimated tax penalty (see in	-			38				
Third Party		you want to allow another	,							
Designee		structions	•				omplete l	below.	× No	
3	De	signee's		Phone			sonal identi	fication		
	nai	ne		no.		num	iber (PIN)			
Sign		der penalties of perjury, I declare t								
Here		ief, they are true, correct, and com	iplete. Declaration (1	ased on all informati	1			
	Yo	ur signature		Date	Your occupation				nt you an Ide IN, enter it he	
Joint return?					PYTHON DE	VELOPER		inst.)		
See instructions.	Sp	ouse's signature. If a joint return, I	Date	Spouse's occupat		If the	e IRS sei	nt your spous	e an	
Keep a copy for your records.									ection PIN, er	nter it here
your records.							(see	inst.)		
		one no. (443)453-827		Email address	ANUDEEP97	90@GMAIL.CO				
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:	
Preparer	SYAM	I PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/11/2023	P0208	2703	Self-en	nployed
Use Only	Fir	m's name GLOBAL TA	XES LLC				Pho	ne no. (678)965	-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm	's EIN	84-31	71965
Go to www.irs.ge	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 02/05/23 PRO			Form 1 (040 (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 2 ((

Department of the Treasury Internal Revenue Service		Attachment Sequence No. 01	
Name(s) shown on Fo	Your social security number		
ANUDEEP KOLLIP	ARA	844-48	-0367
Dort Additi			

Fai	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. Att	ach Schedule E .	5	-12,270.
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		
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		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	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 (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SF	, or 1040-NR, line 8	10	-12,270.

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

Schedule 1 (Form 1040) 2022

Par	II Adjustments to Income					
11	Educator expenses				11	
12	Certain business expenses of reservists, performing artists, and fee			vernment		
	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:					
 a		24a				
	Deductible expenses related to income reported on line 8l from the					
		24b				
с	Nontaxable amount of the value of Olympic and Paralympic medals					
	and USOC prize money reported on line 8m	24c				
d		24d				
е	Repayment of supplemental unemployment benefits under the Trade					
-	Act of 1974	24e				
f	Contributions to section 501(c)(18)(D) pension plans	24f				
q	Contributions by certain chaplains to section 403(b) plans	24g				
•	Attorney fees and court costs for actions involving certain unlawful					
	discrimination claims (see instructions)	24h				
i	Attorney fees and court costs you paid in connection with an award					
•	from the IRS for information you provided that helped the IRS detect					
	tax law violations	24i				
i	Housing deduction from Form 2555	24j				
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form					
	1041)	24k				
z	Other adjustments. List type and amount:					
		24z				
25	Total other adjustments. Add lines 24a through 24z				25	
26	Add lines 11 through 23 and 25. These are your adjustments to income					
	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a				26	
	BAA	REV	02/05/23	PRO	Schedu	le 1 (Form 1040) 202

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

Go to *www.irs.gov/ScheduleD* for instructions and the latest information. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. 2022 Attachment Sequence No. 12

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

ANUDEEP KOLLIPARA

Your social security number

844-48-0367

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	1,161.	1,348.		92.	-95.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	Carryover	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	•	., .		7	-95.

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

	instructions for how to figure the amounts to enter on the below.	(d) Proceeds	(e) Cost	(g) Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
 lines below. This form may be easier to complet whole dollars. 8a Totals for all long-term transa 1099-B for which basis was rewhich you have no adjustr However, if you choose to repon Form 8949, leave this line best on Form 8949, leave this line best of the best of the	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824		11			
	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions		-	-	14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	0	() ()		15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 – 95 .
	• If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.	
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	r
17	Are lines 15 and 16 both gains?	
	No. Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	9 19
20	 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. 	3
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21 (95.
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.	3
	X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

REV 02/05/23 PRO

Schedule D (Form 1040) 2022

Form **8949**

Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

Name(s) shown on return	Social security number or taxpayer identification number
ANUDEEP KOLLIPARA	844-48-0367

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.) disposed of (Mo., day, yr.)		(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).		
Robinhood Securities LLC	06/11/22	12/31/22	1,161.	1,348.	W	92.	-95.		
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box A	al here and inc is checked), lir	lude on your 1e 2 (if Box B	1,161.	1,348.		92.	-95.		

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

Department of the Treasury Internal Revenue Service

							-							
)	www.ir	s.a	IOV	/Scl	hedu	IeE	for	inst	ruc	tions	and	the	lates	st

20 22
Attachment Sequence No. 13

information.

Name(s) shown on return						Your soci	al security	numbe	ər
	DEEP KOLLIPARA						844-4	8-0367		
Part	Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use	Schedule							
Α [Did you make any payments in 2022 that would require you	to file	Form(s) 1	099? S	See ins	tructions .		. 🗌 Ye	es 🛛	No
BI	f "Yes," did you or will you file required Form(s) 1099? .							. 🗌 Ye	es 🗌	No
1a	Physical address of each property (street, city, state, ZI	P code	e)							
Α	9-97, PEDANANDIPADU GUNTUR DISTRICT ANI	THRA	PRADES	H TN	522	235				
B		5111(11	THE	<u>, 11 ±11</u>	522	100				
c										
1b	Type of Property 2 For each rental real estate prope	arty list	ted		Fa	ir Rental	Persor	nal Use		
10	(from list below) above, report the number of fair				10	Days		ays		JN
Α	personal use days. Check the Q	JV bo	x only [Α		365		0		\Box
В	if you meet the requirements to f			B						
С	qualified joint venture. See instru	uctions	s	C						
	of Property:								1	
	Single Family Residence 3 Vacation/Short-Term Ren	ital	5 Land		7	Self-Rental				
	Multi-Family Residence 4 Commercial		6 Roya			Other (desc	ribe)			
	······································		1							
						Propert	ies:	1		
Incon				Α	2.0	В			С	
3		3		6	30.					
4	Royalties received	4								
Exper		_								
5	Advertising	5								
6	Auto and travel (see instructions)	6		1 -	6.0					
7	Cleaning and maintenance	7		1,5	60.					
8	Commissions	8								
9		9								
10	Legal and other professional fees	10								
11	Management fees	11		1,2	50.					
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13								
14		14		3,1						
15	Supplies	15		3,3	80.					
16		16								
17		17		3,6	00.					
18	Depreciation expense or depletion	18								
19 00	Other (list)	19		10.0	00					
20	Total expenses. Add lines 5 through 19	20		12,9	00.					
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			-12,2	70					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	21 22		12,27		,)	(
23a	Total of all amounts reported on line 3 for all rental prope		N	,_,	23a		630.			
b	Total of all amounts reported on line 4 for all royalty prop				23b					
c	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 12 for all properties				23d					
e	Total of all amounts reported on line 20 for all properties				23e	1:	2,900.			
24	Income. Add positive amounts shown on line 21. Do no			sses		 	. 24			
25	Losses. Add royalty losses from line 21 and rental real esta				nter to	tal losses he		(12.2	270.
26	Total rental real estate and royalty income or (loss).								/2	
20	here. If Parts II, III, IV, and line 40 on page 2 do not									

26

-12,270.

-12,270.

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