

(Rev. July 2021)

► Use this revision to amend 2019 or later tax returns.  
 ► Go to [www.irs.gov/Form1040X](http://www.irs.gov/Form1040X) for instructions and the latest information.

**This return is for calendar year** (enter year) **2022** **or fiscal year** (enter month and year ended)

|   |                               |  |
|---|-------------------------------|--|
| Your first name and middle initial<br>SAI PAVAN MANIDEEP  | Last name<br>TAMMANA          | Your social security number<br>817-98-8927 |
| If joint return, spouse's first name and middle initial   | Last name                     | Spouse's social security number            |
| Current home address (number and street). If you have a P.O. box, see instructions.<br>5337 N MACARTHUR BLVD                                    |                               | Apt. no.                                   |
| City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.<br>IRVING TX 75038 |                               | Your phone number<br>(734) 262-1993        |
| Foreign country name  | Foreign province/state/county | Foreign postal code                        |

**Amended return filing status.** You must check one box even if you are not changing your filing status. **Caution:** In general, you can't change your filing status from married filing jointly to married filing separately after the return due date.

Single    Married filing jointly    Married filing separately (MFS)    Head of household (HOH)    Qualifying widow(er) (QW)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ►

Enter on lines 1 through 23, columns A through C, the amounts for the return year entered above.  
 Use Part III on page 2 to explain any changes.

|  | A. Original amount reported or as previously adjusted (see instructions) | B. Net change—amount of increase or (decrease)—explain in Part III | C. Correct amount |
|--|--|--|-------------------|
|--|--|--|-------------------|

**Income and Deductions**

|   |           |         |         |         |
|---|-----------|---------|---------|---------|
| 1 Adjusted gross income. If a net operating loss (NOL) carryback is included, check here . . . . . <input type="checkbox"/> | <b>1</b>  | 46,545. | 24,170. | 70,715. |
| 2 Itemized deductions or standard deduction . . . . .   | <b>2</b>  | 12,950. | 0.      | 12,950. |
| 3 Subtract line 2 from line 1 . . . . .   | <b>3</b>  | 33,595. | 24,170. | 57,765. |
| 4a Reserved for future use . . . . .  | <b>4a</b> |         |         |         |
| b Qualified business income deduction . . . . .   | <b>4b</b> | 0.      | 0.      |         |
| 5 Taxable income. Subtract line 4b from line 3. If the result is zero or less, enter -0- . . . . .                          | <b>5</b>  | 33,595. | 24,170. | 57,765. |

**Tax Liability**

|  |           |        |        |        |
|--|-----------|--------|--------|--------|
| 6 Tax. Enter method(s) used to figure tax (see instructions):<br><u>Table</u>  | <b>6</b>  | 3,824. | 4,504. | 8,328. |
| 7 Nonrefundable credits. If a general business credit carryback is included, check here . . . . . <input type="checkbox"/> | <b>7</b>  | 0.     | 0.     |        |
| 8 Subtract line 7 from line 6. If the result is zero or less, enter -0- . . . . .  | <b>8</b>  | 3,824. | 4,504. | 8,328. |
| 9 Reserved for future use . . . . .  | <b>9</b>  |        |        |        |
| 10 Other taxes . . . . .   | <b>10</b> | 0.     | 0.     | 0.     |
| 11 Total tax. Add lines 8 and 10 . . . . .   | <b>11</b> | 3,824. | 4,504. | 8,328. |

**Payments**

|   |           |        |        |         |
|---|-----------|--------|--------|---------|
| 12 Federal income tax withheld and excess social security and tier 1 RRTA tax withheld. (If changing, see instructions.) . . . . .  | <b>12</b> | 7,158. | 2,907. | 10,065. |
| 13 Estimated tax payments, including amount applied from prior year's return . . . . .  | <b>13</b> | 0.     | 0.     |         |
| 14 Earned income credit (EIC) . . . . .   | <b>14</b> | 0.     | 0.     |         |
| 15 Refundable credits from: <input type="checkbox"/> Schedule 8812 Form(s) <input type="checkbox"/> 2439 <input type="checkbox"/> 4136 <input type="checkbox"/> 8863 <input type="checkbox"/> 8885 <input type="checkbox"/> 8962 or <input type="checkbox"/> other (specify): . . . . . | <b>15</b> | 0.     | 0.     |         |
| 16 Total amount paid with request for extension of time to file, tax paid with original return, and additional tax paid after return was filed . . . . .  | <b>16</b> |        |        | 0.      |
| 17 Total payments. Add lines 12 through 15, column C, and line 16 . . . . .   | <b>17</b> |        |        | 10,065. |

**Refund or Amount You Owe**

|  |           |               |  |        |
|--|-----------|---------------|--|--------|
| 18 Overpayment, if any, as shown on original return or as previously adjusted by the IRS . . . . .                               | <b>18</b> |               |  | 3,334. |
| 19 Subtract line 18 from line 17. (If less than zero, see instructions.) . . . . .   | <b>19</b> |               |  | 6,731. |
| 20 <b>Amount you owe.</b> If line 11, column C, is more than line 19, enter the difference . . . . .                             | <b>20</b> |               |  | 1,597. |
| 21 If line 11, column C, is less than line 19, enter the difference. This is the amount <b>overpaid</b> on this return . . . . . | <b>21</b> |               |  |        |
| 22 Amount of line 21 you want <b>refunded to you</b> . . . . .   | <b>22</b> |               |  | 0.     |
| 23 Amount of line 21 you want <b>applied to your (enter year):</b> . . . . .   | <b>23</b> | estimated tax |  |        |

Complete and sign this form on page 2.

**Part I Dependents**

Complete this part to change any information relating to your dependents. This would include a change in the number of dependents. Enter the information for the return year entered at the top of page 1.

|           |   | A. Original number of dependents reported or as previously adjusted | B. Net change – amount of increase or (decrease) | C. Correct number |
|-----------|---|---|--|-------------------|
| <b>24</b> | Reserved for future use . . . . .   | <b>24</b>   |  |                   |
| <b>25</b> | Your dependent children who lived with you . . . . .                                    | <b>25</b>   | 0  | 0                 |
| <b>26</b> | Your dependent children who didn't live with you due to divorce or separation . . . . . | <b>26</b>   | 0  | 0                 |
| <b>27</b> | Other dependents . . . . .  | <b>27</b>   | 0  | 0                 |
| <b>28</b> | Reserved for future use . . . . .   | <b>28</b>   |  |                   |
| <b>29</b> | Reserved for future use . . . . .   | <b>29</b>   |  |                   |
| <b>30</b> | List <b>ALL</b> dependents (children and others) claimed on this amended return.        |   |  |                   |

**Dependents** (see instructions):

| If more than four dependents, see instructions and check here <input type="checkbox"/> | (a) First name | Last name | (b) Social security number | (c) Relationship to you | (d) <input checked="" type="checkbox"/> if qualifies for (see instructions): |                             |
|--|----------------|-----------|----------------------------|-------------------------|--|-----------------------------|
|  |                |           |                            |                         | Child tax credit   | Credit for other dependents |
|  |                |           |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                |           |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                |           |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                |           |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |

**Part II Presidential Election Campaign Fund** (for the return year entered at the top of page 1)

Checking below won't increase your tax or reduce your refund.

- Check here if you didn't previously want \$3 to go to the fund, but now do.
- Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

**Part III Explanation of Changes.** In the space provided below, tell us why you are filing Form 1040-X.

▶ Attach any supporting documents and new or changed forms and schedules.

I SAI PAVAN MANIDEEP TAMMANA FILED 1040 FOR THE TAX YEAR 2022, BUT I MISSED TO INCLUDE WAGES INCOME IN THE TAX RETURN FROM MAHAUGHA LLC, NOW THROUGH THIS AMENDMENT I INCLUDED WAGES STATEMENT AND I REQUEST IRS TO ACCEPT THE CHANGES.

**Remember to keep a copy of this form for your records.**

Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.

**Sign Here**

▶ T.S.P. Midy 04/10/2024 ETL ENGINEER  
 Your signature Date Your occupation

▶ \_\_\_\_\_ Date \_\_\_\_\_ Spouse's occupation  
 Spouse's signature. If a joint return, **both** must sign.

**Paid Preparer Use Only**

|                                   |                                    |            |   |           |
|-----------------------------------|------------------------------------|------------|---|-----------|
| Print/Type preparer's name        | Preparer's signature               | Date       | Check <input type="checkbox"/> if self-employed | PTIN      |
| SYAM PRIYA RAM SAGAR GUPTA TALLAM | SYAM PRIYA RAM SAGAR GUPTA TALLAM  | 04/06/2024 |   | P02082703 |
| Firm's name ▶                     | GLOBAL TAXES LLC                   |            | Firm's EIN ▶ 84-3171965                         |           |
| Firm's address ▶                  | 245 ROONEY CT E BRUNSWICK NJ 08816 |            | Phone no. (678) 965-9522                        |           |

Filing Status [X] Single [ ] Married filing jointly [ ] Married filing separately (MFS) [ ] Head of household (HOH) [ ] Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Personal information section including name, address, and social security numbers for both filers.

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) [ ] Yes [X] No

Standard Deduction Someone can claim: [ ] You as a dependent [ ] Your spouse as a dependent [ ] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [ ] Were born before January 2, 1958 [ ] Are blind Spouse: [ ] Was born before January 2, 1958 [ ] Is blind

Table for Dependents with columns for (1) First name, Last name, (2) Social security number, (3) Relationship to you, and (4) Child tax credit/Credit for other dependents.

Main income tax calculation table with rows 1a through 15, including sub-rows for tax-exempt interest, dividends, and pension benefits.

|                        |           |  |           |        |
|------------------------|-----------|--|-----------|--------|
| <b>Tax and Credits</b> | <b>16</b> | <b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____ | <b>16</b> | 8,328. |
|                        | <b>17</b> | Amount from Schedule 2, line 3   | <b>17</b> |        |
|                        | <b>18</b> | Add lines 16 and 17  | <b>18</b> | 8,328. |
|                        | <b>19</b> | Child tax credit or credit for other dependents from Schedule 8812   | <b>19</b> |        |
|                        | <b>20</b> | Amount from Schedule 3, line 8   | <b>20</b> |        |
|                        | <b>21</b> | Add lines 19 and 20  | <b>21</b> |        |
|                        | <b>22</b> | Subtract line 21 from line 18. If zero or less, enter -0-  | <b>22</b> | 8,328. |
|                        | <b>23</b> | Other taxes, including self-employment tax, from Schedule 2, line 21   | <b>23</b> | 0.     |
|                        | <b>24</b> | Add lines 22 and 23. This is your <b>total tax</b>   | <b>24</b> | 8,328. |

|                 |           |   |            |         |
|-----------------|-----------|---|------------|---------|
| <b>Payments</b> | <b>25</b> | Federal income tax withheld from:   |            |         |
|                 | <b>a</b>  | Form(s) W-2   | <b>25a</b> | 10,065. |
|                 | <b>b</b>  | Form(s) 1099  | <b>25b</b> |         |
|                 | <b>c</b>  | Other forms (see instructions)  | <b>25c</b> |         |
|                 | <b>d</b>  | Add lines 25a through 25c   | <b>25d</b> | 10,065. |
|                 | <b>26</b> | 2022 estimated tax payments and amount applied from 2021 return                                 | <b>26</b>  |         |
|                 | <b>27</b> | Earned income credit (EIC)  | <b>27</b>  |         |
|                 | <b>28</b> | Additional child tax credit from Schedule 8812  | <b>28</b>  |         |
|                 | <b>29</b> | American opportunity credit from Form 8863, line 8  | <b>29</b>  |         |
|                 | <b>30</b> | Reserved for future use   | <b>30</b>  |         |
|                 | <b>31</b> | Amount from Schedule 3, line 15   | <b>31</b>  |         |
|                 | <b>32</b> | Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b> | <b>32</b>  |         |
|                 | <b>33</b> | Add lines 25d, 26, and 32. These are your <b>total payments</b>                                 | <b>33</b>  | 10,065. |

|                                      |            |   |                |   |
|--------------------------------------|------------|---|----------------|---|
| <b>Refund</b>                        | <b>34</b>  | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>            | <b>34</b>      | 1,737.  |
|                                      | <b>35a</b> | Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/> | <b>35a</b>     | 1,737.  |
| Direct deposit?<br>See instructions. | <b>b</b>   | Routing number 072000326  | <b>c</b> Type: | <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings |
|                                      | <b>d</b>   | Account number 760251665  |                |   |
|                                      | <b>36</b>  | Amount of line 34 you want <b>applied to your 2023 estimated tax</b>  | <b>36</b>      |   |

|                       |           |   |           |  |
|-----------------------|-----------|---|-----------|--|
| <b>Amount You Owe</b> | <b>37</b> | Subtract line 33 from line 24. This is the <b>amount you owe</b> .<br>For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions | <b>37</b> |  |
|                       | <b>38</b> | Estimated tax penalty (see instructions)  | <b>38</b> |  |

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS? See instructions  **Yes**. Complete below.  **No**

Designee's name \_\_\_\_\_ Phone no. \_\_\_\_\_ Personal identification number (PIN) \_\_\_\_\_

**Sign Here** Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

|   |                                      |                                 |   |
|---|--------------------------------------|---------------------------------|---|
| Your signature  | Date                                 | Your occupation<br>ETL ENGINEER | If the IRS sent you an Identity Protection PIN, enter it here (see inst.)         |
| Spouse's signature. If a joint return, <b>both</b> must sign. | Date                                 | Spouse's occupation             | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) |
| Phone no. (734) 262-1993                                      | Email address MANIDEEP1562@GMAIL.COM |                                 |   |

**Paid Preparer Use Only**

|  |   |                    |                             |   |
|--|---|--------------------|-----------------------------|---|
| Preparer's name<br>SYAM PRIYA RAM SAGAR GUPTA TALLAM | Preparer's signature<br>SYAM PRIYA RAM SAGAR GUPTA TALLAM | Date<br>04/06/2024 | PTIN<br>P02082703           | Check if:<br><input type="checkbox"/> Self-employed |
| Firm's name<br>GLOBAL TAXES LLC                      | Firm's address<br>245 ROONEY CT E BRUNSWICK NJ 08816      |                    | Phone no.<br>(678) 965-9522 | Firm's EIN<br>84-3171965                            |

**SCHEDULE 1  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

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

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2022**  
Attachment  
Sequence No. **01**

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

SAI PAVAN MANIDEEP TAMMANA

Your social security number

817-98-8927

**Part I Additional Income**

|           |   |               |           |         |
|-----------|---|---------------|-----------|---------|
| <b>1</b>  | Taxable refunds, credits, or offsets of state and local income taxes . . . . .  |               | <b>1</b>  |         |
| <b>2a</b> | Alimony received . . . . .  |               | <b>2a</b> |         |
| <b>b</b>  | Date of original divorce or separation agreement (see instructions): _____  |               |           |         |
| <b>3</b>  | Business income or (loss). Attach Schedule C . . . . .  |               | <b>3</b>  |         |
| <b>4</b>  | Other gains or (losses). Attach Form 4797 . . . . .   |               | <b>4</b>  |         |
| <b>5</b>  | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . . . .   |               | <b>5</b>  | -6,455. |
| <b>6</b>  | Farm income or (loss). Attach Schedule F . . . . .  |               | <b>6</b>  |         |
| <b>7</b>  | Unemployment compensation . . . . .   |               | <b>7</b>  |         |
| <b>8</b>  | Other income:   |               |           |         |
| <b>a</b>  | Net operating loss . . . . .  | <b>8a</b> ( ) |           |         |
| <b>b</b>  | Gambling . . . . .  | <b>8b</b>     |           |         |
| <b>c</b>  | Cancellation of debt . . . . .  | <b>8c</b>     |           |         |
| <b>d</b>  | Foreign earned income exclusion from Form 2555 . . . . .  | <b>8d</b> ( ) |           |         |
| <b>e</b>  | Income from Form 8853 . . . . .   | <b>8e</b>     |           |         |
| <b>f</b>  | Income from Form 8889 . . . . .   | <b>8f</b>     |           |         |
| <b>g</b>  | Alaska Permanent Fund dividends . . . . .   | <b>8g</b>     |           |         |
| <b>h</b>  | Jury duty pay . . . . .   | <b>8h</b>     |           |         |
| <b>i</b>  | Prizes and awards . . . . .   | <b>8i</b>     |           |         |
| <b>j</b>  | Activity not engaged in for profit income . . . . .   | <b>8j</b>     |           |         |
| <b>k</b>  | Stock options . . . . .   | <b>8k</b>     |           |         |
| <b>l</b>  | 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 . . . . . | <b>8l</b>     |           |         |
| <b>m</b>  | Olympic and Paralympic medals and USOC prize money (see instructions) . . . . .   | <b>8m</b>     |           |         |
| <b>n</b>  | Section 951(a) inclusion (see instructions) . . . . .   | <b>8n</b>     |           |         |
| <b>o</b>  | Section 951A(a) inclusion (see instructions) . . . . .  | <b>8o</b>     |           |         |
| <b>p</b>  | Section 461(l) excess business loss adjustment . . . . .  | <b>8p</b>     |           |         |
| <b>q</b>  | Taxable distributions from an ABLÉ account (see instructions) . . . . .   | <b>8q</b>     |           |         |
| <b>r</b>  | Scholarship and fellowship grants not reported on Form W-2 . . . . .  | <b>8r</b>     |           |         |
| <b>s</b>  | Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d . . . . .  | <b>8s</b> ( ) |           |         |
| <b>t</b>  | Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan . . . . .                                   | <b>8t</b>     |           |         |
| <b>u</b>  | Wages earned while incarcerated . . . . .   | <b>8u</b>     |           |         |
| <b>z</b>  | Other income. List type and amount: _____   | <b>8z</b>     |           |         |
| <b>9</b>  | Total other income. Add lines 8a through 8z . . . . .   |               | <b>9</b>  |         |
| <b>10</b> | Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8   |               | <b>10</b> | -6,455. |

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

Schedule 1 (Form 1040) 2022

**Part II Adjustments to Income**

|            |  |            |            |  |
|------------|--|------------|------------|--|
| <b>11</b>  | Educator expenses . . . . .  |            | <b>11</b>  |  |
| <b>12</b>  | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .  |            | <b>12</b>  |  |
| <b>13</b>  | Health savings account deduction. Attach Form 8889 . . . . .   |            | <b>13</b>  |  |
| <b>14</b>  | Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .  |            | <b>14</b>  |  |
| <b>15</b>  | Deductible part of self-employment tax. Attach Schedule SE . . . . .   |            | <b>15</b>  |  |
| <b>16</b>  | Self-employed SEP, SIMPLE, and qualified plans . . . . .   |            | <b>16</b>  |  |
| <b>17</b>  | Self-employed health insurance deduction . . . . .   |            | <b>17</b>  |  |
| <b>18</b>  | Penalty on early withdrawal of savings . . . . .   |            | <b>18</b>  |  |
| <b>19a</b> | Alimony paid . . . . .   |            | <b>19a</b> |  |
| <b>b</b>   | Recipient's SSN . . . . .  |            |            |  |
| <b>c</b>   | Date of original divorce or separation agreement (see instructions): _____   |            |            |  |
| <b>20</b>  | IRA deduction . . . . .  |            | <b>20</b>  |  |
| <b>21</b>  | Student loan interest deduction . . . . .  |            | <b>21</b>  |  |
| <b>22</b>  | Reserved for future use . . . . .  |            | <b>22</b>  |  |
| <b>23</b>  | Archer MSA deduction . . . . .   |            | <b>23</b>  |  |
| <b>24</b>  | Other adjustments:   |            |            |  |
| <b>a</b>   | Jury duty pay (see instructions) . . . . .   | <b>24a</b> |            |  |
| <b>b</b>   | Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit . . . . .                                       | <b>24b</b> |            |  |
| <b>c</b>   | Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m . . . . .   | <b>24c</b> |            |  |
| <b>d</b>   | Reforestation amortization and expenses . . . . .  | <b>24d</b> |            |  |
| <b>e</b>   | Repayment of supplemental unemployment benefits under the Trade Act of 1974 . . . . .  | <b>24e</b> |            |  |
| <b>f</b>   | Contributions to section 501(c)(18)(D) pension plans . . . . .   | <b>24f</b> |            |  |
| <b>g</b>   | Contributions by certain chaplains to section 403(b) plans . . . . .   | <b>24g</b> |            |  |
| <b>h</b>   | Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) . . . . .  | <b>24h</b> |            |  |
| <b>i</b>   | 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 . . . . . | <b>24i</b> |            |  |
| <b>j</b>   | Housing deduction from Form 2555 . . . . .   | <b>24j</b> |            |  |
| <b>k</b>   | Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) . . . . .  | <b>24k</b> |            |  |
| <b>z</b>   | Other adjustments. List type and amount: _____   | <b>24z</b> |            |  |
| <b>25</b>  | Total other adjustments. Add lines 24a through 24z . . . . .   |            | <b>25</b>  |  |
| <b>26</b>  | Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a . . . . .   |            | <b>26</b>  |  |

**SCHEDULE E  
(Form 1040)**

**Supplemental Income and Loss**

OMB No. 1545-0074

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

**2022**  
Attachment  
Sequence No. **13**

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

Name(s) shown on return

SAI PAVAN MANIDEEP TAMMANA

Your social security number

817-98-8927

**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.

- A** Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . . . . .  Yes  No  
**B** If "Yes," did you or will you file required Form(s) 1099? . . . . .  Yes  No

**1a** Physical address of each property (street, city, state, ZIP code)

**A** 60-12-14, SBI COLONY-2 RD NO -2, VIJAYAWADA ANDHRA PRADESH IN 520008

**B**  
**C**

| 1b Type of Property (from list below) | 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. | Fair Rental Days |   | Personal Use Days | QJV                      |
|---------------------------------------|--|------------------|---|-------------------|--------------------------|
|                                       |  | A                | B | C                 |                          |
| <b>A</b> 3                            |  | 365              |   | 0                 | <input type="checkbox"/> |
| <b>B</b>                              |  |                  |   |                   | <input type="checkbox"/> |
| <b>C</b>                              |  |                  |   |                   | <input type="checkbox"/> |

**Type of Property:**

- 1 Single Family Residence      3 Vacation/Short-Term Rental      5 Land      7 Self-Rental  
 2 Multi-Family Residence      4 Commercial      6 Royalties      8 Other (describe) \_\_\_\_\_

| Income:   | Properties:          |   |   |
|---|----------------------|---|---|
|   | A                    | B | C |
| <b>3</b> Rents received . . . . .   | <b>3</b> 574.        |   |   |
| <b>4</b> Royalties received . . . . .   | <b>4</b>             |   |   |
| <b>Expenses:</b>  |                      |   |   |
| <b>5</b> Advertising . . . . .  | <b>5</b>             |   |   |
| <b>6</b> Auto and travel (see instructions) . . . . .   | <b>6</b>             |   |   |
| <b>7</b> Cleaning and maintenance . . . . .   | <b>7</b> 1,696.      |   |   |
| <b>8</b> Commissions . . . . .  | <b>8</b>             |   |   |
| <b>9</b> Insurance . . . . .  | <b>9</b>             |   |   |
| <b>10</b> Legal and other professional fees . . . . .   | <b>10</b>            |   |   |
| <b>11</b> Management fees . . . . .   | <b>11</b> 1,142.     |   |   |
| <b>12</b> Mortgage interest paid to banks, etc. (see instructions)  | <b>12</b>            |   |   |
| <b>13</b> Other interest . . . . .  | <b>13</b>            |   |   |
| <b>14</b> Repairs . . . . .   | <b>14</b> 1,501.     |   |   |
| <b>15</b> Supplies . . . . .  | <b>15</b> 1,232.     |   |   |
| <b>16</b> Taxes . . . . .   | <b>16</b>            |   |   |
| <b>17</b> Utilities . . . . .   | <b>17</b> 1,458.     |   |   |
| <b>18</b> Depreciation expense or depletion . . . . .   | <b>18</b>            |   |   |
| <b>19</b> Other (list) _____  | <b>19</b>            |   |   |
| <b>20</b> Total expenses. Add lines 5 through 19 . . . . .  | <b>20</b> 7,029.     |   |   |
| <b>21</b> Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file <b>Form 6198</b> . . . . .  | <b>21</b> -6,455.    |   |   |
| <b>22</b> Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions) . . . . .   | <b>22</b> ( 6,455. ) |   |   |
| <b>23a</b> Total of all amounts reported on line 3 for all rental properties . . . . .  | <b>23a</b> 574.      |   |   |
| <b>b</b> Total of all amounts reported on line 4 for all royalty properties . . . . .   | <b>23b</b>           |   |   |
| <b>c</b> Total of all amounts reported on line 12 for all properties . . . . .  | <b>23c</b>           |   |   |
| <b>d</b> Total of all amounts reported on line 18 for all properties . . . . .  | <b>23d</b>           |   |   |
| <b>e</b> Total of all amounts reported on line 20 for all properties . . . . .  | <b>23e</b> 7,029.    |   |   |
| <b>24</b> <b>Income.</b> Add positive amounts shown on line 21. <b>Do not</b> include any losses . . . . .  | <b>24</b>            |   |   |
| <b>25</b> <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .  | <b>25</b> ( 6,455. ) |   |   |
| <b>26</b> <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result 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 . . . . . | <b>26</b> -6,455.    |   |   |

For Paperwork Reduction Act Notice, see the separate instructions.

NPA

-6,455.

Schedule E (Form 1040) 2022