COVER PAGE

Filing Checklist for 2022 Tax Return Filed On Standard Forms

Prepared on: 04/14/2023 02:32:49 pm

Return: C:\Users\Krishna\Documents\HRBlock\Sudarsana Mullangi 2022 Tax Return.T22

To file your 2022 tax return, simply follow these instructions:

Step 1. Sign and date the return

Because you're filing a joint return, Sudarsana and Swapna both need to sign the tax return.

If your return is signed by a representative for you, you must have a power of attorney attached that specifically authorizes the representative to sign your return. To do this, you can use Form 2848, Power of Attorney and Declaration of Representative.

Step 2. Assemble the return

These forms should be assembled behind Form 1040: U.S. Individual Income Tax Return

- Schedule A

- Schedule B
- Schedule D
- --Form 8949
- Schedule E
- Schedule 8812
- Form 8889
- Form 8959
- Form 8960
- Form 8283
- Form 4562
- Form 8582 Page 1
- - Form 8582 Page 2 (Regular Tax)

Staple these documents to the front of the first page of the return:

Form W-2: Wage and Tax Statement

1st (EMPOWER RETIREMENT LLC)

Step 3. Mail the return

Mail the return to this address:

Department of the Treasury Internal Revenue Service Ogden, UT 84201-0002

We recommend that you use one of these IRS-approved methods to send your return. Retain the proof of mailing to avoid a late filing penalty:

- U.S. Postal Service certified mail.

- DHL Express, Express 9:00, Express 10:30, Express 12:00, Express Worldwide, Express Envelope, Import Express 10:30, Import Express 12:00, and Import Express Worldwide.

- FedEx First Overnight, Priority Overnight, Standard Overnight, 2 Day, International Next Flight Out, International Priority, International First, or International Economy.

- UPS Next Day Air Early A.M., Next Day Air, Next Day Air Saver, 2nd Day Air, 2nd Day Air A.M., Worldwide Express Plus, or Worldwide Express.

Step 4. Keep a copy

Print a second copy of the return for your records. We recommend that you also print and retain these supporting forms, which don't need to be sent to the IRS:

- -- Background Worksheet
- - Dependents Worksheet
- - Child Tax Credit Worksheet
- -- Last Year's Data Worksheet
- -- Form 1099-INT/OID
- -- Form 1099-DIV
- - Home Mortgage Interest Worksheet
- - Charitable Worksheet
- - State and Local Income Tax
- - Non-W2 Wages
- - Self-Employed Health Insurance
- - Depreciation Summary
- - Depreciation Worksheet

- - Vehicle Worksheet
- -- Form 1099-B Account
- - Capital Gains and Losses Worksheet
- -- Sale of Home Worksheet
- - Rentals and Royalties - K-1 Partnership/S Corporation
- - Noncash or Item Donations - Form 8962 Information

2022 return information - Keep this for your records

Here is some additional information about your 2022 return. Keep this information with your records.

You will need your 2022 AGI to electronically sign your return next year.

Quick Summary		
Income		\$289,549
Adjustments	-	\$0
Adjusted gross income		\$289,549
Deductions	-	\$41,668
Taxable income		\$247,881
Taxable income Tax withheld or paid already		\$247,881 \$50,226
	-	
Tax withheld or paid already	-	\$50,226

* Your long-term capital gains and qualifying dividends are taxed at a lower rate than your other income. As a result, your total federal tax is less than the tax shown on the IRS's Tax Table.

1040	partment of the Treasury—Internal Revenue S .S. Individual Income	ervice Tax Return 2	022 OMB No. 15	545-0074 IRS Us	e Onlv—Do not w	rite or staple in this space.
Filing Status	Single X Married filing jointly ecked the MFS box, enter the name of your dependent:	Married filing separately (MR	S) Head of househo		Qualifying survi spouse (QSS)	ving
Your first name and mid	ddle initial	Last name			Your social s	ecurity number
Sudarsana	К	Mullangi			652-0)7-6074
If joint return, spouse's	first name and middle initial	Last name			Spouse's so	ial security number
Swapna		Mullangi			651-	52-8004
-	r and street). If you have a P.O. box, see	=		Apt. no.	Presidential E	lection Campaign
13970 E Mapl	ewood Pl				Check here if	
	e. If you have a foreign address, also con	nplete spaces below.	State ZIP of	code		jointly, want \$3
Centennial				111	box below will	nd. Checking a not change
Foreign country name		Foreign province/st		ign postal code	your tax or refu	e e
r ereigir eeuna y name		i oloigii protinoo,ot		.g., poota, oodo		You Spouse
	ny time during 2022, did you: (a) rea ange, gift, or otherwise dispose of a					X Yes No
Standard Som	eone can claim: You as a de		e as a dependent		, L	
Deduction	Spouse itemizes on a separate return o	r you were a dual-status alien				
Age/Blindness Yo	u: Were born before January 2, 19	958 Are blind Spo	use: Was born be	fore January 2, 1	958 🗌 Is t	blind
Dependents (see (1) First	,	(2) Social security number	(3) Relationship to you	(4) Check the Child tax cred		for (see instructions): other dependents
If more Sai	Mullangi	652-30-8544	Son			Х
	5			X		
see instructions Shra	ddha Mullangi	652-48-7208	Daughter			
here 🛄						
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	Total amount from Form(s) W-2, Household employee wages not r Tip income not reported on line 1a Medicaid waiver payments not re Taxable dependent care benefits Employer-provided adoption bene	eported on Form(s) W-2 a (see instructions) ported on Form(s) W-2 (s from Form 2441, line 26 fits from Form 8839, line	ee instructions)	· · · · · · · · · · · ·	1b 1c 1d 1e 1f	278,434
	Wages from Form 8919, line 6 . Other earned income (see instruc					0
W-2, see instructions.	Nontaxable combat pay election (,			1h	0
	Add lines 1a through 1h				· · 1z	278,434
Attach 2a	Tax-exempt interest	2a 0	b Taxable interest		2b	1,298
Sch. B if required. 3a		3a 4,162	b Ordinary dividends .			5,128
4a	IRA distributions	4a	b Taxable amount		4b	0
_		5a				0
Standard Deduction for- 6a	Pensions and annuities Control Pensions and annuities Social security benefits	6a	b Taxable amount . b Taxable amount .		5b • • • • 6b	0
	If you elect to use the lump-sum e	election method check he				
filing separately, 7	Capital gain or (loss). Attach Schedule					-3,000
\$12,950 • Married filing 8	Other income from Schedule 1, li					7,689
jointly or 9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. This is your tota	lincome		9	289 , 549
Qualifying surviving spouse, 10	Adjustments to income from Sche	edule 1, line 26			10	0
\$25,900 11	Subtract line 10 from line 9. This	is your adjusted gross i l	ncome		11	289,549
Head of household, 12	Standard deduction or itemized	d deductions (from Sche	edule A)		12	41,668
\$19,400 13	Qualified business income deduc	tion from Form 8995 or F	orm 8995-A		13	0
• If you checked any box under 14						41,668
Standard 15 Deduction,	Subtract line 14 from line 11. If ze	ero or less, enter -0 This	s is your taxable incom	e	• • • 15	247,881
see instructions.						

Form 1040 (20	022)									Page 2
Tax and	16	Tax (see instructions). Check if any from	m Form(s):	1 8814 2	4972 3				16	46,788
Credits	17	Amount from Schedule 2, line 3							17	0
	18	Add lines 16 and 17							18	46,788
	19	Child tax credit or credit for other	dependent	ts from Schedu	ıle 8812				19	2,500
	20	Amount from Schedule 3, line 8							20	160
	21	Add lines 19 and 20							21	2,660
	22	Subtract line 21 from line 18. If ze	ero or less	, enter -0					22	44,128
	23	Other taxes, including self-employ	yment tax,	from Schedul	e 2, line 21 .				23	1,354
	24	Add lines 22 and 23. This is your								45,482
Payments	25	Federal income tax withheld from								
	а	Form(s) W-2				25a		48,830)	
	b	Form(s) 1099				25b		C)	
	с	Other forms (see instructions) .				25c		1,396	5	
	d								25d	50,226
If you have a	26	2022 estimated tax payments and	d amount a	applied from 20	021 return					0
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)				27				
	28	Additional child tax credit from So	chedule 88	312		· · 28			_	
	29	American opportunity credit from	Form 886	3, line 8		29			_	
	30	Reserved for future use				· · 30			_	
	31	Amount from Schedule 3, line 15				· · 31		C)	
	32	Add lines 27, 28, 29, and 31. The	-		-				32	0
	33	Add lines 25d, 26, and 32. These	are your t	total payments	s				33	50,226
Refund	34	If line 33 is more than line 24, sul	otract line	24 from line 33	3. This is the a	amount you	overpai	d	34	4,744
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here						35a	4,744	
Direct deposit?	b	Routing number 211391825								
See instructions.		Account number13459144								
				r 2022 aatima	tod toy			<i>.</i>		
	36	Amount of line 34 you want appli	-			• • 36		()	
Amount You Owe	37	Subtract line 33 from line 24. This For details on how to pay, go to w	vww.irs.go	ov/Payments or	see instruction	-			37	
	38	Estimated tax penalty (see instru-								
Third Party		o you want to allow another person structions	to discus	s this return wi	th the IRS? S	ee	Vos	Complet	e helow	X No
Designee		esignee's		Ph	one			onal iden		
		ame		no.	· · · · ·			ber (PIN)		
Sign Here	ar	nder penalties of perjury, I declare that I l nd belief, they are true, correct, and comp nowledge.								
		our signature		Date	Your occupa	ition				ent you an Identity
Joint return?					Asst. V:	ico Pro	eidan		ection P inst.)	IN, enter it here
See instructions.	Sp	oouse's signature. If a joint return,		Date	Spouse's oc		STUCII		,	nt your spouse an
Keep a copy for your records.	bo	oth must sign.						Iden	tity Prot	ection PIN, enter it
your records.					Home Mal	ker		nere	(see inst)
	Pł	none no. 719-531-6790		Email addres	s ms_Kri:	shnapra	sad@y	ahoo.c	com	
	Pr	reparer's name P	reparer's s	signature		Date		PTIN	(Check if:
Paid										Self-employed
Preparer Use Only	Fi	rm's name						Phone no).	
ose only										
KIA Go to ww		rm's address gov/Form1040 for instructions and the lat	est informat	tion.				Firm's El	IN	Form 1040 (2022)

SCHEDULE	1
(Form 1040)	

Department of the Treasury Internal Revenue Service

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

Additional Income and Adjustments to Income

OMB No. 1545-0074

Sequence No. 01

L

Your social security number

Attachment

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

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

Sud	arsana K Mullangi		6	52-07-6074
Part				1
1	Taxable refunds, credits, or offsets of state and local income taxes			0
2a b	Alimony received		· 2a	
3	Business income or (loss). Attach Schedule C		. 3	0
4	Other gains or (losses). Attach Form 4797		. 4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		. 5	7,689
6	Farm income or (loss). Attach Schedule F		· 6	0
7	Unemployment compensation		. 7	
8	Other income:			
а	Net operating loss	8a (0)	
b	Gambling	8b 0		
с	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (0)	
е	Income from Form 8853	8e 0		
f	Income from Form 8889	8f 0		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i 0		
j	Activity not engaged in for profit income	8j 0	_	
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 0		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m 0		
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 0	-	
r	Scholarship and fellowship grants not reported on Form W-2	8r 0	-	
s	Nontaxable amount of Medicaid waiver payments included on Form		-	
t	1040, line 1a or 1d	8s 0	-	
•	or a nongovernmental section 457 plan	8t 0	_	
u	Wages earned while incarcerated	8u 0	_	
z	Other income. List type and amount:			
		8z 0	_	
9	Total other income. Add lines 8a through 8z		9	0
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	7,689
KIA	For Paperwork Reduction Act Notice, see your tax return instructions.	<u></u>	-	nedule 1 (Form 1040) 2022

	dule 1 (Form 1040) 2022			Page 2
Part	II Adjustments to Income			
11	Educator expenses		11	0
12	Certain business expenses of reservists, performing artists, and fee-basis gov			0
	Attach Form 2106		12	0
13	Health savings account deduction. Attach Form 8889		13	0
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	0
15	Deductible part of self-employment tax. Attach Schedule SE		15	0
16	Self-employed SEP, SIMPLE, and qualified plans		16	0
17	Self-employed health insurance deduction		17	0
18	Penalty on early withdrawal of savings		18	0
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):		20	0
20 24	IRA deduction			0
21	Student loan interest deduction			
22	Reserved for future use		22	
23	Archer MSA deduction		23	0
24	Other adjustments:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81	24c 0		
d	Reforestation amortization and expenses	24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f 0		
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)	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		
j	Housing deduction from Form 2555	24j 0		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k 0	-	
z	Other adjustments. List type and amount:	24z 0		
25	Total other adjustments. Add lines 24a through 24z		25	0
			20	0
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enthere and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	0

KIA

Schedule 1 (Form 1040) 2022

SCHEDULE	2
(Form 1040)	

Additional Taxes

OMB No. 1545-0074

Departm	nent of the Treasury	Attach to Form 1040, 1040-SR, or 1040-NR.		
	Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Sequence No. 02
``	,	0, 1040-SR, or 1040-NR		social security number
		Mullangi	6	552-07-6074
Part	t I Tax			1
1	Alternative minir	num tax. Attach Form 6251	. 1	0
2	Excess advance	premium tax credit repayment. Attach Form 8962	. 2	
3	Add lines 1 and	2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	. 3	0
Part	II Other Taxe	9S		
4	Self-employmen	t tax. Attach Schedule SE	. 4	0
5	Social security a Attach Form 413	and Medicare tax on unreported tip income. 5 0		
6		ial security and Medicare tax on wages. Attach 6 6		
7	Total additional	social security and Medicare tax. Add lines 5 and 6	. 7	0
8		n IRAs or other tax-favored accounts. Attach Form 5329 if required.	8	0
9	Household empl	loyment taxes. Attach Schedule H 9	0
10	Repayment of fir	rst-time homebuyer credit. Attach Form 5405 if required	. 10	0
11	Additional Medic	care Tax. Attach Form 8959	. 11	946
12	Net investment i	ncome tax. Attach Form 8960	. 12	408
13		ial security and Medicare or RRTA tax on tips or group-term life Form W-2, box 12	. 13	0
14		ue on installment income from the sale of certain residential lots	. 14	
15		eferred tax on gain from certain installment sales with a sales price	. 15	
16	Recapture of low	v-income housing credit. Attach Form 8611	· 16	
			(co	ntinued on page 2)

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

Schedule 2 (Form 1040) 2022

	ule 2 (Form 1040) 2022				Page 2
Part	II Other Taxes (continued)				
17	Other additional taxes:				
а	Recapture of other credits. List type, form number, and amount:	17a	0	_	
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b			
С	Additional tax on HSA distributions. Attach Form 8889	17c	0		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	0		
е	Additional tax on Archer MSA distributions. Attach Form 8853	17e	0		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	0		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g			
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h			
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i			
j	Section 72(m)(5) excess benefits tax	17j			
k	Golden parachute payments	17k	0		
I	Tax on accumulation distribution of trusts	171			
m	Excise tax on insider stock compensation from an expatriated corporation	17m			
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n			
0	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	170		_	
р	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p			
q	Any interest from Form 8621, line 24	17q			
z	Any other taxes. List type and amount:				
-		17z	0		
18	Total additional taxes. Add lines 17a through 17z			18	0
19	Reserved for future use			19	
20	Section 965 net tax liability installment from Form 965-A	20			
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	here a	nd	21	1,354
KIA					dule 2 (Form 1040) 202

Schedule 2 (Form 1040) 2022

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074 1

Z

Z

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

	ment of the Treasury I Revenue Service		Attachment Sequence No. 03	
Name	(s) shown on Form 1040), 1040-SR, or 1040-NR	Your se	ocial security number
Sud		Mullangi	6	652-07-6074
Par		lable Credits		<u></u>
1		Attach Form 1116 if required	· · 1	160
2		nd dependent care expenses from Form 2441, line 11. Attach	2	0
3	Education credits	from Form 8863, line 19	3	0
4	Retirement saving	gs contributions credit. Attach Form 8880	· · 4	0
5	Residential energ	y credits. Attach Form 5695	5	
6	Other nonrefunda	able credits:		
а	General business	s credit. Attach Form 3800	0	
b	Credit for prior ye	ear minimum tax. Attach Form 8801 6b	0	
C	Adoption credit.	Attach Form 8839	0	
d	Credit for the eld	erly or disabled. Attach Schedule R	0	
е	Alternative motor	vehicle credit. Attach Form 8910 6e		
f	Qualified plug-in	motor vehicle credit. Attach Form 8936	0	
g	Mortgage interes	t credit. Attach Form 8396	0	
h	District of Colum	bia first-time homebuyer credit. Attach Form 8859 6h	0	
i	Qualified electric	vehicle credit. Attach Form 8834		
j	Alternative fuel v	ehicle refueling property credit. Attach Form 8911 6j		
k	Credit to holders	of tax credit bonds. Attach Form 8912		
I	Amount on Form	8978, line 14. See instructions		
z	Other nonrefunda	ble credits. List type and amount:		
		6z	_	
7	Total other nonre	fundable credits. Add lines 6a through 6z	7	0
8	Add lines 1 through	gh 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR,		
	line 20		· · 8	160
			(co	ontinued on page 2)
KIA	For Paperwork	Reduction Act Notice, see your tax return instructions.	Sch	nedule 3 (Form 1040) 2022

Schedu	ile 3 (Form 1040) 2022			Page 2
Part	II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	0
10	Amount paid with request for extension to file (see instructions)		10	
11	Excess social security and tier 1 RRTA tax withheld		11	0
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
а		3a 0		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	3b 0		
С	Reserved for future use 1	3c		
d	Credit for repayment of amounts included in income from earlier years	3d		
е	Reserved for future use	3e		
f	Deferred amount of net 965 tax liability (see instructions)	3f		
g	Reserved for future use 1	3g		
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	3h		
z		3z		
14	Total other payments or refundable credits. Add lines 13a through 13z \ldots .		14	0
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 104 line 31		15	0

KIA

Schedule 3 (Form 1040) 2022

SCHEDULE	Α
(Form 1040)	

and

Paid

Paid

Itemized Deductions

OMB No. 1545-0074

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Go to www.irs.gov/ScheduleA for instructions and the latest information. Attach to Form 1040 or 1040-SR. Department of the Treasury Attachment Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16. Sequence No. Internal Revenue Service Name(s) shown on Form 1040 or 1040-SR Your social security number K Mullangi 652-07-6074 Sudarsana Medical Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) 1,841 1 1 Dental 2 Enter amount from Form 1040 or 1040-SR. Expenses 2 289,549 21,716 Multiply line 2 by 7.5% (0.075). 3 3 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-4 Taxes You 5 State and local taxes. a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead 12,537 5a of income taxes, check this box 11,112 **b** State and local real estate taxes (see instructions) 5b 810 5c 24,459 d Add lines 5a through 5c 5d e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 10,000 5e 6 Other taxes. List type and amount : _____ 0 6 7 10,000 7 Add lines 5e and 6 **Interest You** Home mortgage interest and points. If you didn't use all of your 8 home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box Caution: Your mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be See instructions if limited See attached 24,819 8a limited. See instructions. **b** Home mortgage interest not reported to you on Form 1098. See . instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address 1,883 8b c Points not reported to you on Form 1098. See instructions for 0 8c 8d d Reserved for future use 26,702 e Add lines 8a through 8c 8e Investment interest. Attach Form 4952 if required. See instructions. 9 q 10 26,702 10 Gifts to 11 Gifts by cash or check. If you made any gift of \$250 or more, see 2,321 11 Charity instructions Other than by cash or check. If you made any gift of \$250 or more, 12 Caution: If you 2,645 12 see instructions. You must attach Form 8283 if over \$500 made a gift and 0 got a benefit for it, 13 13 Carryover from prior year see instructions. Add lines 11 through 13 4,966 14 14 Casualty and Casualty and theft loss(es) from a federally declared disaster (other than net qualified 15 Theft Losses disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See 15 Other 16 Other – from list in instructions. List type and amount: Itemized **Deductions**

0

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

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

Attach to Form 1040 or 1040-SR.



Department of the Treasury Internal Revenue Service		Attach to Form 1040 or 1040-SR.		Attachment Sequence No. 08			
Name(s) shown on return Sudarsana		K Mullangi	Your	social security number 652-07-6074			
	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amount			
Part I Interest	•	buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:					
		Digital Federal Credit Union		135			
(See instructions and the		Digital Federal Credit Union		63 1,003			
Instructions for		Canvas Credit Union		97			
Form 1040, line 2b.)		NATIONAL FINANCIAL SERVICES LLC					
20.)			1				
Notes If you							
Note: If you received a Form							
1099-INT, Form							
1099-OID, or substitute							
statement from							
a brokerage firm, list the firm's							
name as the							
payer and enter the total interest							
shown on that	2	Add the amounts on line 1	2	1,298			
form.	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989.	3				
		Attach Form 8815	3				
	4		4	1,298			
	Not	e: If line 4 is over \$1,500, you must complete Part III.		Amount			
Part II	5	List name of payer: NATIONAL FINANCIAL SERVICES LLC		5,128			
Ordinary							
Dividends							
(See instructions and the				· · · · · · · · · · · · · · · · · · ·			
Instructions for							
Form 1040, line 3b.)			5				
00.)							
Note: If you received a Form							
1099-DIV or							
substitute statement from							
a brokerage firm,							
list the firm's name as the							
payer and enter							
the ordinary dividends shown	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR,					
on that form.	0		6	5,128			
	Note:	If line 6 is over \$1,500, you must complete Part III.					
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) in account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign					
	Ioreigi		แนรเ.	Yes No			
Foreign	7a	At any time during 2022, did you have a financial interest in or signature authority over a fina	ncial				
Accounts		account (such as a bank account, securities account, or brokerage account) located in a fore	eign	X			
and Trusts		country? See instructions					
Caution: If required, fai		Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form		X			
to file FinCEN Form 114 may result in substantia	al _	and its instructions for filing requirements and exceptions to those requirements		· · · · · · · · · · · · · · · · · · ·			
penalties. Additionally, you may be required to	b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) when financial account(s) are located: India	re the				
file Form 8938, State- ment of Specified				·			
Foreign Financial Assets. See instructions	s. 8	During 2022, did you receive a distribution from, or were you the grantor of, or transferor to,					
		foreign trust? If "Yes," you may have to file Form 3520. See instructions		Х			

SCHEDULE D (Form 1040)

Capital Gains and Losses

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.

Attachment Sequence No. 12

OMB No. 1545-0074

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

Sudarsana K Mullangi

o a a a z o a ma		marrang	-								001	-
Did you dispose o	far	ny investme	nt(s) in	a qualifie	d opportunit	y fund du	ring the	tax year?	Yes	Х	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 e dollars.	(d) Proceeds (sales price)	eds Cost to gain or los		rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	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	0	0			0
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	126 , 523	127,237	1,1	.25	411
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	0	0		0	0
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	0	20,000		0	-20,000
4	Short-term gain from Form 6252 and short-term gain or (and 8824	loss) from Forms 4	1684, 6781,		4	0
5	5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1					
6						(0)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	7	-19,589			

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

lines This	Proceeds Cos		(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and 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.	2,992	3,167			-175
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	0	0	0		0
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	0	0	0		0
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	1,195,000	813,092	-381,908		0
11	11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824					
12	Net long-term gain or (loss) from partnerships, S corpora	itions, estates, and	d trusts from Sche	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	151
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	14	(0)			
15	Net long-term capital gain or (loss). Combine lines 8a page 2	15	-24			
KIA	For Paperwork Reduction Act Notice, see your tax return	edule	D (Form 1040) 2022			

Your social security number 652-07-6074

Q]	τ.
Sudarsana	K

Mullangi

-19,613

16

Pa	rt III Summary
16	Combine lines 7 and 15 and enter the result
	 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.

KIA	Sch	edule	D (Forn	n 1040) 2022
	No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			
	Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040, line 16.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
	 The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) 	21	(3,000)
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
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 Forms 1040, line 16. Don't complete lines 21 and 22 below. 			
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	19		
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		
	No. Skip lines 18 through 21, and go to line 22.			
17	Are lines 15 and 16 both gains? Yes. Go to line 18.			

8949

Department of the Treasury

Part I

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.



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.

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)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)		(sales price) (see instructions)	and see <i>Column</i> (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
Short-term transactions for	various	12/30/22	126,523	127,237	W	1,125	411	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
2 Totals. Add the amounts in columns (c negative amounts). Enter each total he Schedule D, line 1b (if Box A above is above is checked), or line 3 (if Box C a	re and include or checked), line 2	í your (if Box B	126,523	127,237		1,125	411	

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.

OMB No. 1545-0074

Attachmen

Form 8949 (2022)	Attachment Sequence No. 12A	Page 2
Name(s) shown on return. Name and SSN or taxnaver identification no, not required if shown on Page 1	Social security number or taxpayer identification num	hor

652-07-6074

Sudarsana K Mullangi

Before you check Box D, E, or F 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 II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

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

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

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or		(e) Cost or other basis See the Note below	If you enter an enter a co	any, to gain or loss. amount in column (g), ide 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 <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
13990 E Maplewood place	3/30/18	4/21/22	1,195,000	813,092	EH	-381,908	0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
							0	
2 Totals. Add the amounts in columns negative amounts). Enter each total h Schedule D, line 8b (if Box D above above is checked). or line 10 (if Box	ere and include o is checked), line	on your 9 (if Box E	1,195,000	813.092		-381,908	0	

Note: If you checked Box D 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.

8949

Department of the Treasury

Part I

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.



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.

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.

(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

X (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 co	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 <i>Column (e)</i> in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
BTC and other Crypto currenc	2/11/22	11/04/22	0	20,000		0	-20,000
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
2 Totals. Add the amounts in columns (d negative amounts). Enter each total her Schedule D, line 1b (if Box A above is above is checked), or line 3 (if Box C a	e and include or checked), line 2	n your (if Box B	0	20,000		0	-20 000

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.

OMB No. 1545-0074

Attachmen

SCHEDULE	Е
(Form 1040)	

Department of the Treasury

Name(s) shown on return

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

Attachment 13 Sequence No. Your social security number 652-07-6074

OMB No. 1545-0074

No

Sudarsana	Κ	Mullangi

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 X No Yes **B** If "Yes," did you or will you file required Form(s) 1099? Yes

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

11377 Waldorf ct. Parker CO 80134 Α

С								
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and		Fair Rental Days	Personal Use Days	Q.	JV	
Α	1	personal use days. Check the QJV box only if you meet the requirements to file as	Α	365	0			
В			В					
С		a qualified joint venture. See instructions.	С					
Typ	e of Property:							

в

	ngle Family Residence	3 Vacation/Short-Term Rental	5 Lar				
2 Mu	Ilti-Family Residence	4 Commercial	6 Ro	oyalties 8 Othe	er (describe)		
					Properties:		
-	ome:		-	A	В		С
3			-	37,200			
_4		<u></u>	• 4	0		0	0
Exp	enses:						
5	•			0			
6	-	tructions)		242			
7	Cleaning and maintenar	псе	. 7	0			
8	Commissions		8	876			
9	Insurance		. 9	1,792			
10	Legal and other profess	ional fees	. 10	0			
11	Management fees		. 11	0			
12	Mortgage interest paid t	o banks, etc. (see instructions)	. 12	12,428			
13	Other interest		. 13	0			
14				1,000			
15	Supplies		. 15	0			
16	Taxes		16	4,947			
17	Utilities		17	0			
18	Depreciation expense o	r depletion	18	7,617			
19		tenance - furnace&OT	19	500			
20	()	es 5 through 19	20	29,402		0	0
21	result is a (loss), see ins	e 3 (rents) and/or 4 (royalties). If structions to find out if you must	. 21	7,798		0	0
22	Deductible rental real er on Form 8582 (see ins	state loss after limitation, if any, tructions)	. 22	(0)	() ()
222	•			23 a	37,2	200	/
zja b	-	orted on line 4 for all royalty properties			0.7	0	
c		orted on line 12 for all properties			12,4	-	
d	-			23d	7,6		
e	•	• •		23e	29,4		
24	•	mounts shown on line 21. Do not include				24	7,798
24 25	•	ses from line 21 and rental real estate	•			24 25 (0)
						25 (0)
26	here. If Parts II, III, IV, a Schedule 1 (Form 1040	and royalty income or (loss). Combi nd line 40 on page 2 do not apply to yo), line 5. Otherwise, include this amour	ou, also	enter this amount o			7,798
KIA	on page 2	eduction Act Notice, see the separate ins		<u></u>	<u></u>	26	(Form 1040) 2022
NIA		equention Act notice. See the separate ins	รถนับปีไปไ	13.	30	neuule E	11 01111 10401 2022

	edule E (Form 1040) 2022					Attachment Sec				age 2
	e(s) shown on return. Do not enter n	,	r if shown on page 1.				Y		ecurity num	ber
	darsana K Mullar ution: The IRS compares ar	5	tox roturn with	amounto	o o b o	wh on Schodulo(a)		652-0	7-6074	
		rom Partnerships an			SIL	JWII OII SCHEdule(S)	X-1.			
	Note: If you report a lot the box in column (e) o	ss, receive a distribution, di n line 28 and attach the req ou must check the box in c	spose of stock, or uired basis comp	⁻ receive utation. I	f vou	report a loss from an a	it-risk a	ration, you ctivity for v	must chec /hich any	k
27	Are you reporting any loss passive activity (if that los	s was not reported on Fo						ou answe	red "Ye <u>s</u> ,	"
	see instructions before co	mpleting this section .	(h) Enter D for	(c) Che	· ·					No
28	(a) Name		(b) Enter P for partnership; S	foreig	jn	(d) Employer identification	basis c	Check if omputation	(f) Check any amou not at ris	nt is
Δ	ARM PEF LLC		for S corporation	partner	snip	number 85-3194465	ISTO	equired		sĸ
A B C D	arm mineral llc		P			84-3778339				
С										
D										
	Passive Incor	ne and Loss			N	onpassive Income a	and Lo	DSS		
<u> </u>	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassiv (see Sch	/e loss allo edule K-1		(j) Section 179 expe deduction from Form		(k) Nonpa from So	assive incom chedule K-1	e
A	10	9								
B C	10									
D										
	Totals	0							()
b	Totals 10	9			0		0			
30	Add columns (h) and (k) o	of line 29a					30	,	100	-
31	Add columns (g), (i), and						31	(109	,
32	Total partnership and S			e lines (30 ai	nd 31	32		-109)
	Income or Loss	s From Estates and T	rusts					(b) F m	nlover	
33 A		(a) Nan	ne					(b) Em identificatio		
B										
	Pass	ive Income and Loss	5		N	Ionpassive Incom	e anc	l Loss		
	(c) Passive deduction or loss : (attach Form 8582 if requi	(-)	ive income nedule K-1			Deduction or loss m Schedule K-1		(f) Other in Sched		
A										
B	Tatala		0				-		()
54a b	Totals	0			_	0				
35 36	Add columns (d) and (f) of Add columns (c) and (e) o						35 36	1	(
50								(,
37	Total estate and trust in Income or Loss	come or (loss). Combin s From Real Estate M					37	dual Ho	(dor)
Fd			(c) Excess inclus			• •				
38	(a) Name	(b) Employer identification number	Schedules Q, (see instruct	line 2c		Taxable income (net loss) om Schedules Q , line 1b		(e) Incon Schedules)
39	Combine columns (d) and	(e) only. Enter the resul	t here and inclu	-	e tot:		39		(
	Irt V Summary				04		1 00	I		
40	Net farm rental income or	(loss) from Form 4835.	Also, complete	line 42 k	oelov	N	40		()
41	Total income or (loss). Com	bine lines 26, 32, 37, 39, a	nd 40. Enter the r	esult here			41		7,689	-
42	(Form 1040), line 5 Reconciliation of farming a			•••••••••••••••••••••••••••••••••••••••	1.		41	l	7,003	
72	farming and fishing income re (Form 1065), box 14, code B AD; and Schedule K-1 (Form	eported on Form 4835, line ; Schedule K-1 (Form 1120	7; Schedule K-1 -S), box 17, code	42	2					
43	Reconciliation for real estate pr (see instructions), enter the net in 1040, Form 1040-SR, or Form 10 you materially participated under t	ofessionals. If you were a real come or (loss) you reported any 40-NR from all rental real estate	estate professional where on Form activities in which	43	3	0				

SCHEDULE 8812 (Form 1040) Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

2022	2
Attachment Sequence No.	47

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Name(s) shown on return		al security number
Sud	arsana K Mullangi	652	-07-6074
Pa	t I Child Tax Credit and Credit for Other Dependents		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	. 1	289,549
2a	Enter income from Puerto Rico that you excluded		
b	Enter the amounts from lines 45 and 50 of your Form 2555 2b 0		
С	Enter the amount from line 15 of your Form 4563 2c 0		
d	Add lines 2a through 2c	. 2d	0
3	Add lines 1 and 2d	. 3	289,549
4	Number of qualifying children under age 17 with the required social security number 1		
5	Multiply line 4 by \$2,000	. 5	2,000
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number 6 1		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.		
7	Multiply line 6 by \$500	. 7	500
8	Add lines 5 and 7	. 8	2,500
9	Enter the amount shown below for your filing status.		,
	Married filing jointly—\$400,000 All other filing statuses—\$200,000	9	400,000
10	Subtract line 9 from line 3.		
	• If zero or less, enter -0		
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For		
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. J	. 10	0
11	Multiply line 10 by 5% (0.05)	. 11	0
12	Is the amount on line 8 more than the amount on line 11?	. 12	2,500
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.		
	X Yes. Subtract line 11 from line 8. Enter the result.		
13	Enter the amount from the Credit Limit Worksheet A	. 13	46,628
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents	. 14	2,500
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2022

Sched	ule 8812 (Form 1040) 2022		Page 2
Pa	t II-A Additional Child Tax Credit for All Filers		
Саι	ition: If you file Form 2555, you cannot claim the additional child tax credit.		
15		-0- on	line 27
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0
b	Number of qualifying children under 17 with the required social security number: x \$1,500.	10	
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.	16b	
	Enter -0- on line 27		
17		17	
	Earned income (see instructions)		
	Nontaxable combat pay (see instructions) 18b		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result . 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	
	Next. On line 16b, is the amount \$4,500 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Pa	t II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resi	dents	s of Puerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s)		
	W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1		
	RRTA taxes, see instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2		
	(Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040),		
	line 13	-	
23	Add lines 21 and 22		
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0-	25	
26	Enter the larger of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
Par	t II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	0
KIA	S	chedul	e 8812 (Form 1040) 2022

Form	8	8	8	9	

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074

Name(s) shown on Forn	n 1040,	1040-SR, or 1040-NR	Social security number of HSA	
Sudarsana	K	Mullangi	beneficiary. If both spouses have HSAs, see instructions. 652	-07-6074

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	I HSA Contributions and Deduction. See the instructions before completing this part. If you a and both you and your spouse each have separate HSAs, complete a separate Part I for each		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions	Se	elf-only 🔀 Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	0
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	7,300
4 5	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also include any amount contributed to your spouse's Archer MSAs	4	0
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2022, see the instructions for the amount to enter .	-	7,300
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions	7	
8	Add lines 6 and 7	8	7,300
9	Employer contributions made to your HSAs for 2022 9 3, 333		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	3,333
12	Subtract line 11 from line 8. If zero or less, enter -0	12	3,967
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040),		
15	Part II, line 13	13	0
Part		HSA	s complete
	a separate Part II for each spouse.	110/1	o, complete
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	
	Distributions included on line 14a that you rolled over to another HSA. Also include any excess		
IJ	contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b	0
с	Subtract line 14b from line 14a	14c	0
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	0
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional		
	20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	0
Part		-	-
rait	If you are filing jointly and both you and your spouse each have separate HSAs, complete a se spouse.		
18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I,		
		20	0
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2		
	(Form 1040), Part II, line 17d	21	0
KIA	For Paperwork Reduction Act Notice, see your tax return instructions.		Form 8889 (2022)

Form 8959

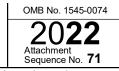
Department of the Treasury

Name(s) shown on return

Internal Revenue Service

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions. Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. Go to www.irs.gov/Form8959 for instructions and the latest information.



Your social security number

	rsana K Mullangi	652-07-6074			
Par	Additional Medicare Tax on Medicare Wages	1			
1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	355 , 142		
2	Unreported tips from Form 4137, line 6	2	0		
3	Wages from Form 8919, line 6	2	0		
4	Add lines 1 through 3	4	355,142		
4 5	Enter the following amount for your filing status:	4	555,142		
5	Married filing jointly		050,000		
-		5	250,000	•	105 140
6 7	Subtract line 5 from line 4. If zero or less, enter -0 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0. go to Part II	.9% (0	0.009). Enter here and	6 7	105,142 946
Part	II Additional Medicare Tax on Self-Employment Inco	me	r		
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8	0		
9	Enter the following amount for your filing status: Married filing jointly				
	Single, Head of household, or Qualifying surviving spouse \$200,000	9	250,000		
10	Enter the amount from line 4	10	355,142		
11	Subtract line 10 from line 9. If zero or less, enter -0	11	0		
12	- , -			12	0
13	Additional Medicare Tax on self-employment income. Multiply lin here and go to Part III			13	0
Part	III Additional Medicare Tax on Railroad Retirement Ta	ax Ao	t (RRTA) Compensat	ion	
14	Railroad retirement (RRTA) compensation and tips from				
	Form(s) W-2, box 14 (see instructions)	14	0	-	
15	Enter the following amount for your filing status:				
	Married filing jointly \$250,000				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	15	250,000		
16	Subtract line 15 from line 14. If zero or less, enter -0			16	0
17	Additional Medicare Tax on railroad retirement (RRTA) compens				
	0.9% (0.009). Enter here and go to Part IV			17	0
Part					
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2				
_	line 11 (Form 1040-PR or 1040-SS filers, see instructions), and g	go to I	Part V	18	946
Part	V Withholding Reconciliation		1		
19	Medicare tax withheld from Form W-2, box 6. If you have				
	more than one Form W-2, enter the total of the amounts		6 5 4 6		
•••	from box 6	19	6,546	-	
20	Enter the amount from line 1	20	355,142	-	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	5,150		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is you withholding on Medicare wages			22	1,396
23	Additional Medicare Tax withholding on railroad retirement (RRT, W-2, box 14 (see instructions)	, 	· · · · · · · · · · · · · · · ·	23	0
24	Total Additional Medicare Tax withholding. Add lines 22 and 2 with federal income tax withholding on Form 1040, 1040-SR, or 1 1040-PR or 1040-SS filers, see instructions)	1040-1		24	1,396
	1010110101000000000000000000000000000	• • •			

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

Form **8960**

Department of the Treasury

Net Investment Income Tax— Individuals, Estates, and Trusts

OMB No. 1545-2227

Ζ

Attachment Sequence No. 72

L

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.

Internal I	Revenue Service	Go	o to www.irs.gov/Form8960 for instruction	s and t	the latest information		Sequence No. 72
Name(s)	shown on your tax return	ı				Your socia	I security number or EIN
Suda	rsana K	Mullangi	L			6	552-07-6074
Part	I Investme	nt Income	Section 6013(g) election (see instruction	s)			
			Section 6013(h) election (see instructions	s)			
			Regulations section 1.1411-10(g) election	n (see i	nstructions)		
1	Taxable interes	t (see instruct	ions)			. 1	1,298
2	Ordinary divide	nds (see instr	uctions)			. 2	5,128
3	Annuities (see	•	<i>′</i>				0
4a	•	ate, royalties, _l	oartnerships, S corporations, trusts, etc.	4a	7,689		
h		,	loss derived in the ordinary course of	Ти	7,009	_	
D							
•			pusiness (see instructions)	4b	0	4c	7 600
				5a			7,689
	-		tion of property (see instructions)	Ja	-3,000	-	
D			tion of property that is not subject to e instructions)	5b	0		
				50	0	_	
С			of partnership interest or S corporation				
-	stock (see insti						
-	Combine lines	•					-3,000
6	•		come for certain CFCs and PFICs (see i		,		
7			· · · · · ·				0
8	Total investme	nt income. Co	mbine lines 1, 2, 3, 4c, 5d, 6, and 7			. 8	11,115
Part			Allocable to Investment Income a				
			s (see instructions)		0	_	
		-	me tax (see instructions)		384	_	
			penses (see instructions)				
d	Add lines 9a, 9		384				
10	Additional mod		0				
11	Total deduction	. 11	384				
Part							
12			ract Part II, line 11, from Part I, line 8. Ir				
		and trusts, co	mplete lines 18a–21. If zero or less, en	ter -0-		. 12	10,731
	Individuals:			i			
13	Modified adjust	ed gross inco	me (see instructions)	13	289,549		
14		•	tus (see instructions)	14	250,000		
15	Subtract line 14	from line 13.	If zero or less, enter -0	15	39,549		
16	Enter the small	er of line 12 o	r line 15			. 16	10,731
17			r individuals. Multiply line 16 by 3.8% (0				
	include on you	ır tax return (see instructions)			· 17	408
	Estates and	Trusts:					
18a	Net investment	income (line '	12 above)	18a			
b	Deductions for	distributions o	f net investment income and deductions				
	under section 6	642(c) (see ins	tructions)	18b			
С	Undistributed ne	et investment	income. Subtract line 18b from line 18a				
	(see instruction	s). If zero or le	ess, enter -0	18c			
19a	Adjusted gross	income (see i	nstructions)	19a			
		•	s and trusts for the year (see				
	•			19b			
с			a. If zero or less, enter -0				
20	Enter the small					. 20	
21		-	r estates and trusts. Multiply line 20 by				
			urn (see instructions)			. 21	
KIA			ct Notice, see your tax return instructions.				Form 8960 (2022)

Rev. I Depart	8283 November 2022) Iment of the Treasury Al Revenue Service	,	e or more Forms	s 8283 to ver \$500 t	your ta for all c	ontributed prop	claimed a erty.	total deduction	on	OMB No. 1545-0074 Attachment Sequence No. 155
	(s) shown on your inc	ome tax return	-							Identifying number
Sud	arsana K	Mullangi								652-07-6074
Note	: Figure the amo	ount of your contr	ibution deduction	on befor	e comp	leting this form	n. See yo	ur tax return	instructio	ns.
Sect	(or a g	ed Property of roup of similar ite ies and certain of	ms) for which y	/ou clain	ned a d	eduction of \$5	,000 or le	ss. Also list j	publicly tr	
Par	t I Informa	ation on Donat	ed Property-	-If you	need I	more space, a	attach a	statement.		
1		me and address of the onee organization		check t	the box. Al	erty is a vehicle (see i so enter the vehicle id ss Form 1098-C is atta	entification	(For a veh	icle, enter the	dition of donated property year, make, model, and as and other property, ructions.)
Α	Goodwill Indu 15810 Indiano Rockville		20855					Clothes,	shoes,	toys, books, fu
в		manity Restore						multiple		-
С										
D										
Е										
lote	: If the amount y	ou claimed as a	deduction for a	n item is	\$500	or less, you do	not have	to complete	columns	(e), (f), and (g).
	(d) Date of the	(e) Date acquired	(f) How acqu	iired	(g) D	onor's cost	(h) Fair	market value	(i) Me	thod used to determine
•	contribution	by donor (mo., yr.) various	by donor Purchase		or adj	usted basis 3,500	(see ii	,		e fair market value shop value
A B	12/30/22	various	Purchase			3,300		1,125		shop value
C	12/ 50/22	Various		•				1/120	11111110	bilop varae
D										
Ē										
Sect	Inven which Section qualifie	tory Reportable you claimed a dee n A). Provide a se ad appraisal is ge	e in Section A duction of more eparate form for nerally required	A) —Cor e than \$8 r each it	mplete 5,000 p em dor	this section for er item or grou ated unless it i	one item p (excep is part of	(or a group t contribution a group of si	of similar is reportal milar iterr	ble in [′]
Par 2		ation on Donat hat describes the ty		nated						
-		tribution of \$20,000	· · · · -		r Real E	state		i Ve	hicles	
		Conservation Cont	· –	=	rities					household items
	c Equipmer		g	=	ctibles**				her	
		tribution of less that			ectual P					
	*Art includes pai		watercolors, print				decorative	e arts, textiles,	carpets, s	ilver, rare manuscripts,
lote:		clude coins, stamps you must attach a c						ot art as defin	ed above.	
3		of donated property (i , attach a separate stat				ersonal property or rall physical condition				(c) Appraised fair market value
Α										
В										
С		1				1		1		
	(d) Date acquired by donor (mo., yr.)	(e) How acquired		Donor's c adjusted b		(g) For bargain enter amo receive	unt	(h) Amount cl as a deduc (see instruct	ction	(i) Date of contribution (see instructions)

Α В С

Form 82	83 (R	ev. 11-2022)			F	Page 2
Name(s) shov	<i>i</i> n on your income tax return		Identifying numb	ber	
Suda	_			652-07-		4
Part	II	Partial Interests and Restricted Use Property (Oth Complete lines 4a through 4e if you gave less than a Complete lines 5a through 5c if conditions were place attach the required statement. See instructions.	n entire interest in a property liste	d in Section B, F	art I.	
4a		er the letter from Section B, Part I that identifies the propert ection B, Part II applies to more than one property, attach a		ire interest		
b		al amount claimed as a deduction for the property listed in S	-			
С	fron	ne and address of each organization to which any such con n the donee organization in Section B, Part V, below): ne of charitable organization (donee)	tribution was made in a prior year (co	omplete only if diff	erent	
	Add	ress (number, street, and room or suite no.)	City or town, state, and ZIP code			
b	For	tangible property, enter the place where the property is loca	ated or kept			
		ne of any person, other than the donee organization, having				
					1	
_					Yes	No
		here a restriction, either temporary or permanent, on the do				
D		you give to anyone (other than the donee organization or a anization in cooperative fundraising) the right to the income				
	-	property, including the right to vote donated securities, to a				
		ignate the person having such income, possession, or right				
		nere a restriction limiting the donated property for a particula				
Part		Taxpayer (Donor) Statement—List each item includer as having a value of \$500 or less. See instructions.	d in Section B, Part I above that the a	appraisal identifies	5	
l decla	re tha	at the following item(s) included in Section B, Part I above has to the	e best of my knowledge and belief an app	oraised value		
of not r	nore	than \$500 (per item). Enter identifying letter from Section B, Part I	and describe the specific item. See instru	ictions.		
Signatu	ure of	taxpayer (donor)	Date			
Part	IV	Declaration of Appraiser				
		m not the donor, the donee, a party to the transaction in which the donor acquired the pr o any of the foregoing persons. And, if regularly used by the donor, donee, or party to the				s.
I certify the quarting the quar	hat the alified a ction wi sed on	nat I perform appraisals on a regular basis; and that because of my qualifications as desc appraisal fees were not based on a percentage of the appraised property value. Further appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding th a return or claim for refund. I also understand that, if there is a substantial or gross val my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue d ending on the date of the appraisal barred from presenting evidence or testimony befor	more, I understand that a false or fraudulent overstaten and abetting the understatement of tax liability). I under luation misstatement of the value of the property claime e Code, as well as other applicable penalties. I affirm the	nent of the property value a stand that my appraisal wi d on the return or claim for at I have not been at any ti	as descr II be use refund me in th	ibed de
Sign Here		praiser signature		Date		
		raiser name ress (including room or suite no.)	Title	Identifying number	ər	
	own, s	tate, and ZIP code				
Part		Donee Acknowledgment				
		ble organization acknowledges that it is a qualified organization un , Part I, above on the following date	der section 170(c) and that it received the	donated property a	s desc	ribed
portion	there	e, this organization affirms that in the event it sells, exchanges, or or eof) within 3 years after the date of receipt, it will file Form 8282 , De cknowledgment does not represent agreement with the claimed fa	onee Information Return, with the IRS and			-
		ganization intend to use the property for an unrelated use?		Yes		No
Name of	t char	table organization (donee)	Employer identification number			
Address	(num	ber, street, and room or suite no.)	City or town, state, and ZIP code			
Authoriz	ed sig	nature	Title	Date		
1/1 4				0000		

Form 4562							
Department of the Treasury							

Depreciation and Amortization

(Including Information on Listed Property) Attach to your tax return. OMB No. 1545-0172

	Altach to your tax return. Altach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.									ttachment sequence No. 179	
) shown on return					ctivity to which this for	m relates		-	ng number	
		K Mulla	2			Royalty 1			652-	07-6074	
Par			Expense Cert								
			nave any listed	property, co	mplete F	Part V before	you comple	ete Part I.		1 000 000	
	Maximum amo	•	,							1,080,000	
				•		,				2 700 000	
						•	,			2,700,000	
			year. Subtract li						· -	0	
								<u></u>	. 5	1,080,000	
6			on of property			Cost (business us		(c) Elected cos		_, ,	
						· ·					
7	Listed propert	v Entert	he amount from	line 29			7		0		
		-								0	
				•						0	
10										0	
11	•			•				ne 5. See instruction		1,080,000	
12						•	,			0	
13		-	deduction to 2					13	0		
			rt III below for li								
Par							on't includ	e listed property.	See in	structions.)	
-		•	lowance for qua							,	
••	during the tax				•		• / •		. 14	0	
15	. 15										
16	16 Other depreciation (including ACRS)										
Par	Part III MACRS Depreciation (Don't include listed property. See instructions.)										
					Secti	ion A					
17	MACRS dedu	ctions for	assets placed i	n service in ta	ix years b	eginning befor	e 2022 .		. 17	7,617	
18			oup any assets						,		
	asset account								1		
	Sect	ion B—A					ng the Gen	eral Depreciation	Syster	n	
(a)	Classification of p	roperty	(b) Month and year placed in service	(business/invest only—see inst	tment use	(d) Recovery period	(e) Convent	ion (f) Method	(g) De	epreciation deductio	
19a	3-year prope	erty			/						
b	5-year prope	erty									
C	7-year prope										
	10-year prope										
_	15-year prope	-									
	20-year prope	,				25					
	25-year prope	-				25 yrs.	MM	S/L S/L			
n	Residential re property	ntal				27.5 yrs. 27.5 yrs.	MM	S/L S/L			
<u> </u>	Nonresidentia	lucel				39 yrs.	MM MM	S/L S/L			
-	property	ii real				39 YIS.	MM	S/L S/L			
		n C—Ase	sets Placed in 3	Service Durir	ng 2022 T	l ax Year Using		ative Depreciatio	n Syst	em	
202	Class life				9 2022 1			S/L		<u>,,,,</u>	
	12-year					12 yrs.		S/L			
_	30-year					30 yrs.	MM	S/L			
	40-year		1			40 yrs.	MM	S/L			
Part	-	mary (S	ee instructions	5.)			1 1 1 1				
			amount from line						21	0	
			m line 12, lines		7. lines 10	and 20 in colu	umn (a) an	d line 21. Enter			
								instructions	. 22	7,617	
23			e and placed in			rent year, enter	the	23			

Form	4562 (2022)	ina	K Mullangi 65								52-07-6074 Page				Page 2			
Ра	rt V Listed	Property (Inclu	ide autor	nobiles	, certa	in othe	r vehic	les, cer	rtain ai	rcraft,	and p	orope	rty us	sed fo	r			
		inment, recreati or any vehicle for			,	standa	ard mile	ane rate	or de	ducting	ı lease	evne	nse (compl	ete onl	v 24a		
	24b, col	umns (a) through	n (c) of See	ction A	, all of S	Section	B, and	Section	C if ap	plicabl	e.	. слрс	,1150, 1	oompr		y 240,		
	Section A—	Depreciation an	d Other I	nforma	ation (C	aution:	: See th	ne instru	ctions	for limi	ts for p	basse	nger a	autom	obiles.)			
24a	Do you have evid	lence to support th	e business/	investm	ient use	claimed	? Ye :	s X No	24b	f "Yes,	" is the	evider	nce wr	itten? [Yes	No		
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	(d) or other ba		(e) sis for dep siness/in	vestment	(f) Recove perio		(g) Metho Conven		Depre	(h) eciation uction		(i) section 179 cost		
25	Special deprec	iation allowance		d listed	d prope	rty place	use or ed in se	3,	uring									
	the tax year an	d used more than	n 50 [%] in a	qualifi	ed busi	ness us	e. See	instruct	ions .			25		()			
26	Property used i	more than 50% ir	<u>n a qualifie</u> %	ed busii	ness us	e:												
			%															
			%															
27		50% or less in a			s use:													
2	011 Nissa	04/16/18	5%	_							/L -				_			
			<u>%</u>								/L – /L –				_			
28	Add amounts ir	ו column (h), line			Enter h	ere and	d on line	e 21. pa	ae 1			28		()			
29		n column (i), line												2	9	0		
			Se	ction E	3—Info	rmatior	າ on Us	se of Ve	hicles									
	•	or vehicles used by	•		•						•							
to yo	ur employees, firs	t answer the questi	ons in Sect							-		n for th		ehicles.		D		
					a) icle 1		o) cle 2	(c Vehi						(d) (e) /ehicle 4 Vehicle		e 5	(1 Vehi	
30		vestment miles dri nclude commuting i	0		400													
31	, (miles driven during	,		0													
32	Total other perso	nal (noncommutino	g)	7	,600													
33		n during the year. A			,000		0		0		0			0		0		
34	Was the vehicle use during off-du	available for persor ty hours?	nal	Yes X	No	Yes	No	Yes	No	Yes	No	> Y	es	No	Yes	No		
35		used primarily by a r related person?			Х													
36	Is another vehicle	e available for pers	onal use?	Х														
		Section C—Que																
		ons to determine				n to con	npleting	g Sectio	n B for	vehicle	es use	d by e	emplo	yees v	vho are	en't		
		rs or related pers													Yes	No		
37	your employees	n a written policy s?	statemen				sonal u	se of ve	hicles,	includi	ng cor	nmuti 	ng, by 	/	103	NO		
38		a written policy sta the instructions for																
39	Do you treat all	use of vehicles	by employ	ees as	person	al use?												
40	Do you provide use of the vehic	more than five v cles, and retain t	ehicles to he informa	your ei ition ree	mployee ceived?	es, obta		mation i					out the					
41		e requirements o wer to 37, 38, 39, 4										ns.						
Pa	rt VI Amorti	zation							•					ı				
	(a) Description	of costs	(I Date amo beg	b) ortization gins		Amortiz	(c) able amo	unt	Code	(d) e section		e) Amortiz perio percer	zation d or	Amo	(f) tization for	this year		
42	Amortization of	costs that begin	s during y	our 202	22 tax ye	ear (see	e instru	ctions):	1			porcel						
														_				
				a									1					
43		costs that begar	-		-											^		
<u>44</u> KIA	i otal. Add amd	ounts in column (ij. See the	mstru	GUONS 10	or where	e io rep	UIL					. 44		n 456 2	0 2 (2022)		

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sudarsana

Part I

Passive Activity Loss Limitations

See separate instructions. Attach to Form 1040, 1040-SR, or 1041.

OMB No. 1545-1008

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

Attachment Sequence No. 858 Identifying number 652-07-6074 K Mullangi 2022 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) Т T

1a	Activities with net income (enter the amount from Part IV, column (a))	1a	7,798		
b	Activities with net loss (enter the amount from Part IV, column (b)) $\ .$	1b	(0)		
С	Prior years' unallowed losses (enter the amount from Part IV, column (c))	1c	(0)		
d	Combine lines 1a, 1b, and 1c			1d	7,798
All C	ther Passive Activities				
2a	Activities with net income (enter the amount from Part V, column (a))	2a	0		
b	Activities with net loss (enter the amount from Part V, column (b))	2b	(109)		
С	Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	(0)		
d	Combine lines 2a, 2b, and 2c			2d	-109
3	Combine lines 1d and 2d. If this line is zero or more, stop here and inc return; all losses are allowed, including any prior year unallowed losse Report the losses on the forms and schedules normally used	3	7,689		

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 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

Pa	rt II Special Allowance for Renta	al Real Estate	Activities With	Active Participati	ion			
	Note: Enter all numbers in Part	II as positive amo	ounts. See instru	ctions for an example) .			
4	Enter the smaller of the loss on line 10	d or the loss on li	ne3			4		
5	Enter \$150,000. If married filing separa	ately, see instruc	tions	5				
6	Enter modified adjusted gross income, but i	•		6				
	Note: If line 6 is greater than or equal to lin on line 9. Otherwise, go to line 7.	ne 5, skip lines 7 ar	nd 8 and enter -0-					
7	Subtract line 6 from line 5		L	7				
8	Multiply line 7 by 50% (0.50). Do not ent	ctions	8					
9	9							
Pai	t III Total Losses Allowed							
10	Add the income, if any, on lines 1a and	2a and enter the	e total			10		
11	Total losses allowed from all passive find out how to report the losses on yo					11		
Pa	t IV Complete This Part Before F	Part I, Lines 1a	, 1b, and 1c . S	ee instructions.				
	Name of activity	Current year Prior year				Overall gain or loss		
	Name of activity	(a) Net income	(b) Net loss	(c) Unallowed	(d)	Gain	(e) Loss	

Name of activity							
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
11377 Waldorf ct. Pa	7,798	0	0	7,798	0		
Total. Enter on Part I, lines 1a, 1b, and 1c	7,798	0	0				

Name of activity		Current year		Prior years	Overall g	Overall gain or loss	
		(a) Net income (line 2a)	(b) Net loss (line 2b)	(c)Unallowed loss (line 2c)	(d) Gain	(e) Loss	
ARM PEF LLC		0	0	0	0	C	
arm mineral llc		0	0	0	0	(
arm mineral llc		0	109	0	0	109	
otal. Enter on Part I, lines 2a, 2l	o, and 2c	0	109	0			
Part VI Use This Part if an		s Shown on Pa		e instructions.			
Name of activity	F ai to	orm or schedule nd line number be reported on see instructions)	(a)Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).	
otal				1.00			
otal Part VII Allocation of Unall			ctions.	1.00			
	For and to I	sses. See instru m or schedule d line number be reported on e instructions)	ctions. (a) Loss	1.00 (b)Ratio	(C) Unal	lowed loss	
Part VII Allocation of Unall	For and to I (se	rm or schedule d line number pe reported on		(b)Ratio	(C) Unal	lowed loss	
Part VII Allocation of Unall Name of activity	For and to I (se	rm or schedule d line number be reported on e instructions)	(a) Loss	(b)Ratio	(C) Unal		
Part VII Allocation of Unall Name of activity arm mineral llc	Sch Following	m or schedule d line number be reported on e instructions) E, line 28B	(a) Loss	(b)Ratio	(C) Unal		
Part VII Allocation of Unall Name of activity arm mineral llc	Fol and to I (se Sch I See instru	rm or schedule d line number be reported on e instructions) E, line 28B ctions.	(a) Loss	(b)Ratio	(C) Unal	0	
Part VII Allocation of Unall Name of activity arm mineral llc	Sch I Sch I See instru	m or schedule d line number be reported on e instructions) E, line 28B	(a) Loss	(b)Ratio		0	
Part VII Allocation of Unall Name of activity arm mineral llc Total Part VIII Allowed Losses.	Sch Fol and (se Sch F Sch F See instru Fol and (se	rm or schedule d line number be reported on e instructions) E, line 28B ctions. m or schedule d line number be reported on	(a) Loss	(b)Ratio		0	
Part VII Allocation of Unall Name of activity arm mineral llc 'otal Part VIII Allowed Losses. Name of activity	Sch Fol and (se Sch F Sch F See instru Fol and (se	rm or schedule d line number be reported on e instructions) E, line 28B Ctions. The or schedule d line number be reported on e instructions)	(a) Loss	(b)Ratio		0 0 wed loss	

Form 8582 (2022)