# Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

### IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)								
Taxpayer's name	Social security	Social security number						
VINOD MULE	709-49-	-0307						
Spouse's name	Spouse's soci	Spouse's social security number						
NANDINI YANAMALA	988-91-	-8752						
Part I Tax Return Information — Tax Year Ending December 31, 2023	(Enter year you ar	e authorizing.)						
Enter whole dollars only on lines 1 through 5.								
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
1 Adjusted gross income		<b>1</b> 87,397.						
2 Total tax		<b>2</b> 6,721.						
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 7,938.						
4 Amount you want refunded to you		4 1,217.						
5 Amount you owe		5						
Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an								
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution acco payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial is authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	transmitter, or electro for rejection of the tra- e the U.S. Treasury ar unt indicated in the ta notitution to debit the erminate the authoriza on requests must be d in the processing of the payment. I furti	nic return originator (ERO) ansmission, (b) the reason its designated Financial x preparation software for entry to this account. This tion. To revoke (cancel) a received no later than 2 the electronic payment of the racknowledge that the						
Taxpayer's PIN: check one box only								
▼ I authorize GLOBAL TAXES LLC to enter or ger	nerate my PIN	0 3 0 7 as my						
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř Ent	er five digits, but 't enter all zeros						
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.								
Your signature ►	te▶							
Spouse's PIN: check one box only								
★ I authorize GLOBAL TAXES LLC to enter or ger	porato my DINI 1	8 7 5 2 as my						
ERO firm name	_	8 / / 5 2 as my er five digits, but						
signature on the income tax return (original or amended) I am now authorizing.		't enter all zeros						
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN below.								
Spouse's signature ▶ Da	te ▶							
Practitioner PIN Method Returns Only—continue	below							
Part III Certification and Authentication — Practitioner PIN Method Only								
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.		6 0 8 2 7 1 er all zeros						
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual incauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I are requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provide	n submitting this retu	rn in accordance with the						
ERO's signature ► Da	te ▶							
FRO Must Retain This Form — See Instruction								

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

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



<b>1040</b>		artment of the Treasury-Internal Revenue Servi		urn	20 <b>2</b>	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this space.	
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, end	ling			, 20		See se	oarate i	instructions.	
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity number	_
VINOD			MULE								709	49	0307	
	pouse's	s first name and middle initial	Last na										security numb	ber
NANDINI	•		YANA	MALA							988	91	8752	
	(numbe	er and street). If you have a P.O. box, see						A	Apt. no.			•	ection Campai	ian
518 S 32	21.ST	STREET						-	7C	- 1			ou, or your	•
		ce. If you have a foreign address, also co	mplete s	paces belo	w.	Sta	te	ZIP c				0	jointly, want \$	
FEDERAL						W.A	A	980	103		•		nd. Checking a not change	a
Foreign countr			F	Foreign pro	vince/state/				gn postal c		your tax		•	
													ou 🗌 Spou	se
Filing Status	s [	Single					☐ Head of h	ouseh	old (HOI	 				
Check only		Married filing jointly (even if only o	ne had i	ncome)					`	•				
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (C	QSS)			
	lf y	you checked the MFS box, enter the	name c	of your spo	ouse. If you	ı che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	alifying person is a child but not you	ır deper	ndent:										_
Digital	Δt 21	ny time during 2023, did you: (a) rec	oivo (ac	a roward	award or	navn	nent for prope	rty or	convices	): or (	h) call			_
Digital Assets		nange, or otherwise dispose of a digi										ΠYe	es 🗵 No	
Standard		neone can claim:  You as a de					a dependent	.,. (		01.0	J.,			_
Deduction	_	Spouse itemizes on a separate retur	•				•							
														_
Age/Blindnes	s You	: Were born before January 2, 1	959 _	_ Are blir	nd <b>Sp</b>	ouse:	: U Was bor						s blind	_
Dependent					cial security	'	(3) Relationsh	ip (4	-				see instruction	-
If more	<u>(1)</u> ⊢	irst name Last name	Turnber		number		to you		Child t	ax cre	eait	Credit 10	or other depende	nts
than four dependents,										<u> </u>			<del></del>	
see instruction	s									<u> </u>			<u> </u>	
and check	ı —									_				
here L	J	Tatal and a set from Farma(a) M. O. b.	1 /	- :							4-		00 005	
Income	1a	Total amount from Form(s) W-2, b	,		,						1a		98,905	•
Attach Form(s)	b	Household employee wages not re		•	•						1b			_
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•								1c			_
W-2G and	d	Medicaid waiver payments not rep Taxable dependent care benefits f				nstru	ctions)				1d			_
1099-R if tax was withheld.	e	Employer-provided adoption bene									1e 1f			_
If you did not	f	Wages from Form 8919, line 6.	1115 11011	1 FUIII 00	39, III le 29						-			_
get a Form	g	=	iona)								1g		0	_
W-2, see instructions.	h i	Other earned income (see instruction (see instruction) (see instru	,					i .			1h			÷
instructions.	z	Add lines 1a through 1h	366 111311	uctions							1z		98,905	
Attach Sch. B	<u></u> 2a		2a		<u>i</u>	 Ь Т	axable interest				2b			-
if required.	3a	· —	3a		3.		rdinary divide				3b		3	_
	<u> </u>		4a				axable amoun				4b			÷
Standard	5a		5a				axable amoun				5b			_
Deduction for— Single or	6a		6a				axable amoun				6b			_
Married filing	C	If you elect to use the lump-sum e		method c	heck here					. r	]			_
separately, \$13,850	7	Capital gain or (loss). Attach Sche		•		`	,			. –	7		7 <b>,</b> 523	
Married filing jointly or	8	Additional income from Schedule								. –	8		-19 <b>,</b> 034	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	•								9		87,397	
surviving spouse, \$27,700	10	Adjustments to income from Sche		•							10			_
Head of household,	11	Subtract line 10 from line 9. This is									11		87,397	_
\$20,800	12	Standard deduction or itemized	•	-							12		27,700	
If you checked any box under	13	Qualified business income deducti									13		2///	•
Standard Deduction,	14										14		27,700	_
see instructions.	15	Subtract line 14 from line 11. If zer							•		15		59 697	

Form 1040 (202	3)								Page <b>2</b>	
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌		16	6,721.	
Credits	17	Amount from Schedule 2, line	17							
	18	Amount from Schedule 2, line 3							6,721.	
	19	Child tax credit or credit for o	other dependent	ts from Sched	ule 8812			19		
	20	Amount from Schedule 3, line	e8					20		
	21							21		
	22	Subtract line 21 from line 18.	If zero or less,	enter -0				22	6,721.	
	23	Other taxes, including self-er	mployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is y			·			24	6,721.	
Payments	25	Federal income tax withheld							,	
,	а	Form(s) W-2				<b>25a</b> 7	,938.			
	b	Form(s) 1099				25b	·			
	С	Other forms (see instructions				25c				
	d	Add lines 25a through 25c .	•					25d	7 <b>,</b> 938.	
If you have a	26	2023 estimated tax payments						26	· ·	
qualifying child,	27	Earned income credit (EIC) .				27				
attach Sch. EIC.	28	Additional child tax credit from				28				
	29	American opportunity credit	from Form 8863	3. line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line				31				
	32	Add lines 27, 28, 29, and 31.				indable credits		32		
	33	Add lines 25d, 26, and 32. Th						33	7,938.	
Refund	34	If line 33 is more than line 24	•					34	1,217.	
rioidila	35a							35a	1,217.	
Direct deposit?	b	Routing number 0 1 1				_	Savings		·	
See instructions.		Account number 0 0 4					3-			
	36	Amount of line 34 you want a				36				
Amount	37	Subtract line 33 from line 24.	This is the amo	ount vou owe		1				
You Owe	0.	For details on how to pay, go						37		
	38	Estimated tax penalty (see in	structions) .			38				
Third Party Designee		you want to allow another	person to disc	cuss this retur			mplete b	elow.	⊠ No	
_ 00.g00	De	signee's		Phone			nal identif			
	na			no.			er (PIN)			
Sign Here		der penalties of perjury, I declare thief, they are true, correct, and comp								
11010	Yo	ur signature		Date	Your occupation		1		nt you an Identity	
				SOFTWARE ENGINEE		NCTNEED	(see i		IN, enter it here	
Joint return? See instructions.	Sn	ouse's signature. If a joint return. <b>h</b>	oth must sign	Date	Spouse's occupati				nt vour spouse an	
Keep a copy for your records.		Spouse's signature. If a joint return, <b>both</b> must sign.		HOME MAKER			Ident	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	———Ph	one no. (626) 495-6167	7	Email address		.36@GMAIL.CO	' M			
		eparer's name	Preparer's signat	l .		Date	PTIN		Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAG	GAR GUPTA	03/28/2024	P02082	2703	Self-employed	
Preparer		m's name GLOBAL TAX				., ., -,			678) 965-9522	
Use Only		m's address 245 ROONEY		NSWICK N	J 08816		Firm'			
Go to www irs a		n1040 for instructions and the lates			DAA	DEV 02/07/24 DDO	'		Form <b>1040</b> (2023)	

# SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment Sequence No. 01

Your social security number

Department of the Treasury Internal Revenue Service

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

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

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

VINC	D MULE & NANDINI YANAMALA	709-49-	030	7	
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes		1		
2a	Alimony received	2a	3		
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C	3			
4	Other gains or (losses). Attach Form 4797				
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedul	eE . <b>5</b>		-19,034.
6	Farm income or (loss). Attach Schedule F		6		
7	Unemployment compensation		7		
8	Other income:				
а	Net operating loss	8a (	)		
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d (	)		
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
I	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
S	Nontaxable amount of Medicaid waiver payments included on Form				
	1040, line 1a or 1d	8s (	)		
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
Z	Other income. List type and amount:				
_		8z			
9	Total other income. Add lines 8a through 8z			_	
10	Combine lines 1 through 7 and 9. This is your additional income. Ente	r here and o	n Form		

10

-19,034.

Page **2** Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a		_	
b	Deductible expenses related to income reported on line 8l 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 8m	24c		-	
d	Reforestation amortization and expenses	24d			
е	Repayment of supplemental unemployment benefits under the Trade				
_	Act of 1974	24e		-	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful	041			
_	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	04:			
	Housing deduction from Form 2555	24i 24j		-	
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	<b>24</b> j		-	
k	1041)	24k			
_		24K		-	
Z	Other adjustments. List type and amount:	24z			
25	Total other adjustments. Add lines 24a through 24z			25	
25 26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b>			23	
_0	Form 1040, 1040-SR, or 1040-NR, line 10	. LIIIGI		26	
	BAA		07/24 PRO		le 1 (Form 1040) 2023
	BAA	INEV U3/	ULIZA ENO	uu	

#### **SCHEDULE D** (Form 1040)

VINOD MULE & NANDINI YANAMALA

### **Capital Gains and Losses**

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

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return

Your social security number 709-49-0307

	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
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)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	1,104,736.	1,103,744.	12,4	90.	13,482.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	•			5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	ny, from line 8 of y	our Capital Loss	Carryover	6	( 5,959.)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis			e any long-	7	7,523.
Pai				One Year	(see i	
	instructions for how to figure the amounts to enter on the below.	(d)	(e)	(g) Adjustmen		(h) Gain or (loss) Subtract column (e)
	form may be easier to complete if you round off cents to e dollars.	Proceeds (sales price)	Cost (or other basis)	to gain or loss Form(s) 8949, I line 2, colum	Part II,	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.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions				14	( )
15	Net long-term capital gain or (loss). Combine lines 88				45	

Schedule D (Form 1040) 2023 Page 2

#### Part III **Summary** 7,523. 16 Combine lines 7 and 15 and enter the result 16 • 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 • 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. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

## 8949

### **Sales and Other Dispositions of Capital Assets**

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number 709-49-0307

VINOD MULE & NANDINI YANAMALA 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 Part I 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 Adjustment, if any, to gain or loss 1 If you enter an amount in column (g), (h)

(a)	(b)	(c) Date sold or	(d) Proceeds	Cost or other basis See the <b>Note</b> below		ode in column (f).	Gain or (loss) Subtract column (e)	
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).	
Robinhood Securities LLC	01/01/23	12/31/23	1,104,736.	1,103,744.	W	12,490.	13,482.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			1,104,736.	1,103,744.		12,490.	13,482.	

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.

#### **SCHEDULE E** (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

#### Supplemental Income and Loss

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

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

Attachment

Your social security number

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

Sequence No. 13

OMB No. 1545-0074

VINOD MULE & NANDINI YANAMALA 709-49-0307 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. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . Physical address of each property (street, city, state, ZIP code) 1a 26-11-831, NEAR VIGILENCE PADARUPALLI, NELLORE ANDHRA PRADESH IN 524004 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. C C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 600. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,875. 8 Commissions . . . . . 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees . . . . . . . . . . 11 1,400. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 14 3,966. Repairs . . . . 15 Supplies . . . . . . . 15 3,486. 16 16 Taxes 17 Utilities . . . . . . . 17 4,551. 18 4,356. 18 Depreciation expense or depletion . . . . . . . Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 . . . . . 19,634. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 . . . . . . . . . . . . . . . . . 21 -19,034.22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . . . . . 22 19,034.) 600. 23a Total of all amounts reported on line 3 for all rental properties 23a Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 4,356. 23d Total of all amounts reported on line 18 for all properties 23e 19,634. Total of all amounts reported on line 20 for all properties 24 Income. Add positive amounts shown on line 21. Do not include any losses 24 25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here 25 19,034. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and 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

-19**,**034.

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# Form **4562**

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attach to your tax return.

Attachment

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form4562 for instructions and the latest information. Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number VINOD MULE & NANDINI YANAMALA Sch E 26-11-831, NEAR VIGILENCE 709-49-0307 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . . . . . . . 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . . . . . . . . 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . . . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 125,010. 4,356. 27.5 yrs. S/L property MM 39 yrs. ММ S/L i Nonresidential real S/L property MM Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L **b** 12-year 30 yrs. ММ S/L c 30-year ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . . . . . . . . . . . . . . . . . . . . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 4,356. 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs.

### Form **8582**

Department of the Treasury

Internal Revenue Service

### **Passive Activity Loss Limitations**

See separate instructions.

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

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

OMB No. 1545-1008

2023

Attachment
Sequence No. 858

Name(s) shown on return Identifying number VINOD MULE & NANDINI YANAMALA 709-49-0307 Part I 2023 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.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) . . . . 1b 19,034. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . **d** Combine lines 1a, 1b, and 1c . . . . . . . . . . . . . . . . . . 1d -19,034. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) . . . . 2b c Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c ( 2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -19,034. 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. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. Enter the **smaller** of the loss on line 1d or the loss on line 3 . . . . . . . 4 19,034. 5 Enter \$150,000. If married filing separately, see instructions . . . . . . 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 106,431. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 43,569. Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions 8 21,785. Enter the **smaller** of line 4 or line 8. If line 3 includes any CRD, see instructions . . . . . . . . . . 19,034. **Total Losses Allowed** Part III 10 10 0. Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 19,034. 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 26-11-831, NEAR VIGILENCE 0. 19,034. 19,034.

19,034.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2** 

Part V Complete This Part Befor	e Part I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instru	ctions.			
Name of activity	Currer	nt year		Prior years  (c) Unallowed loss (line 2c)		Overall g		ain or loss
ivame of activity	(a) Net income (line 2a)	<b>(b)</b> (li	Net loss ne 2b)					(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c								
Part VI Use This Part if an Amour	nt Is Shown on F	Part II,	<b>Line 9.</b> S	ee instru	ctions.			
Name of activity	Form or schedule and line number to be reported on (see instructions)	(a	) Loss	<b>(b)</b> Ra	(b) Ratio (c) Spe			(d) Subtract column (c) from column (a).
26-11-831, NEAR VIGILENCE	E Ln 22		19,034.	1.0000	0000	0 19,03		0.
Total			19,034.	1.0	o	19,03	4.	0.
Part VII Allocation of Unallowed L	osses. See instr				'	•		ı
Name of activity	Form or scho and line nur to be reporte (see instruct	nber ed on	(a) l	Loss	(b) Ratio		(c) Unallowed loss	
Total						1.00		
Part VIII Allowed Losses. See instru			1		1		l .	
Name of activity	Form or scho and line nur to be reporte (see instruct	nber ed on	(a) Loss		(b) Unallowed loss		(	c) Allowed loss
Total								