8879 **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	ty number			
SAI KARTHIKEYA ADDAGADA	203-85-5348			
Spouse's name	Spouse's soc	cial security number		
SRI POOJITHA BATTINI	990-95	-7779		
Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter	r year you a	re 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 1		
1 Adjusted gross income		1 80,437.		
2 Total tax		2 5,887.		
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 5,922.		
4 Amount you want refunded to you		4 35.		
5 Amount you owe		5		
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)		· · · · · · · · · · · · · · · · · · ·		
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I aboreturn (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmosend my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejfor any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the LAGENT AGH electronic funds withdrawal (direct debit) entry to the financial institution account incompayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requirements days prior to the payment (settlement) date. I also authorize the financial institutions involved in the taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) I at Electronic Funds Withdrawal Consent.	nitter, or electro ection of the tr I.S. Treasury an iicated in the te on to debit the e the authoriza uests must be processing of payment. I furt	onic return originator (ERC ransmission, (b) the reason of its designated Financia ax preparation software for entry to this account. This ation. To revoke (cancel) are received no later than after the electronic payment of the racknowledge that the		
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or generate	my PINI 5			
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent	ter five digits, but n't enter all zeros		
I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Your signature ▶ Date ▶				
Spouse's PIN: check one box only				
X I authorize GLOBAL TAXES LLC to enter or generate signature on the income tax return (original or amended) I am now authorizing.	Ent	7 7 7 9 as my ter five digits, but n't enter all zeros		
I will enter my PIN as my signature on the income tax return (original or amended) I am r if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Spouse's signature ▶ Date ▶				
Practitioner PIN Method Returns Only—continue below	1			
Part III Certification and Authentication — Practitioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2		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 income tauthorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submarequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of I	nitting this retu	urn in accordance with the		

ERO's signature ▶

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Date ▶

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

2023

OMB No. 1545-007

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

						01112 1101 1010			30 mot m	no or orapio in time opacor
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20	S	See sep	parate instructions.
Your first name	and m	iddle initial	Last na	ame				Y	our so	cial security number
SAI KART	CHIK!	EYA	ADDA	AGADA					203	85 5348
If joint return, s	pouse's	s first name and middle initial	Last na	ame				s	pouse'	s social security number
SRI POOS	JITH	A	BAT	TINI					990	95 7779
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	tions.			Apt. no.	P	Preside	ntial Election Campaign
807 ROME										nere if you, or your
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.	Stat	te	ZIP code			if filing jointly, want \$3 this fund. Checking a
DURHAM					NC	!	27713	b	ox belo	ow will not change
Foreign country	y name		Foreign province/state/county Foreign postal co		code y	our tax	or refund.			
		7								∐ You ☐ Spouse
Filing Status		Single					ousehold (HC)H)		
Check only	×	Married filing jointly (even if only or	ne had	income)						
one box.	L	Married filing separately (MFS)					surviving sp			
		you checked the MFS box, enter the			u che	cked the HOF	l or QSS box	, enter t	the chi	d's name if the
	qu	alifying person is a child but not you	ir depe	ndent.						
Digital		ny time during 2023, did you: (a) rece					-			
Assets	exch	nange, or otherwise dispose of a digi	ital ass				t)? (See instr	uctions	.)	X Yes ☐ No
Standard	_	neone can claim:	•	•		a dependent				
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or yo	u were a dual-status	alien					
Age/Blindness	s You	: Were born before January 2, 1	959 [Are blind Spo	ouse:	Was bor	n before Jan	uary 2,	1959	☐ Is blind
Dependent	s (see	instructions):		(2) Social security	,	(3) Relationsh	ip (4) Check	the box	if quali	fies for (see instructions):
If more		irst name Last name		number		to you		I tax crec	dit	Credit for other dependents
than four										
dependents, see instructions										
and check	» 									
here]									
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	ee instructions)					1a	99,136.
Attach Form(s)	b	Household employee wages not re	eported	l on Form(s) W-2					1b	
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)						1c		
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)						1d		
1099-R if tax	е	Taxable dependent care benefits f		•					1e	
was withheld.	f	Employer-provided adoption bene	fits fror	m Form 8839, line 29	•				1f	_
If you did not get a Form	g								1g	
W-2, see	h	Other earned income (see instructi	,				· · · ·		1h	0.
instructions.	i	Nontaxable combat pay election (s	see inst	tructions)		<u>1i</u>				00 126
	<u>z</u>	Add lines 1a through 1h							1z	
Attach Sch. B if required.	2a	'	2a			axable interest			2b	_
	3a		3a	J.		rdinary divider axable amoun			3b	
Standard	4a		4a 5a			axable amoun			4b 5b	
Deduction for —	5a 6a		6a			axable amoun			6b	
Single or Married filing	C	· -		mothod chock horo					OD	
separately, \$13,850	7	If you elect to use the lump-sum election method, check here (see instructions)							7	33.
Married filing	8	Additional income from Schedule						. Ш	8	-18,735.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9	80,437.
surviving spouse, \$27,700	10	Adjustments to income from Sche							10	·
Head of household,	11	Subtract line 10 from line 9. This is							11	
\$20,800	12	Standard deduction or itemized	-						12	
If you checked any box under	13	Qualified business income deducti				5-A			13	
Standard Deduction,	14	Add lines 12 and 13							14	
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter -0 This is y	our t	axable incom	ie		15	

Form 1040 (2023	3)								Page
Гах and	16	Tax (see instructions). Check if any from Form	(s): 1 \square 881	4 2 🗌 4972	з 🗌			16	5 , 887.
Credits	17	Amount from Schedule 2, line 3						17	
	18	Add lines 16 and 17						18	5,887.
	19	Child tax credit or credit for other dependent	ts from Sched	ule 8812				19	
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0					22	5 , 887.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21				23	0.
	24	Add lines 22 and 23. This is your total tax						24	5,887.
Payments	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	5,9	922.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	5,922.
you have a	26	2023 estimated tax payments and amount a	pplied from 20	22 return				26	
ualifying child, tach Sch. EIC.	27	Earned income credit (EIC)			27				
itacii ocii. Lio.	28	Additional child tax credit from Schedule 8812			28				
	29	American opportunity credit from Form 8863	8, line 8		29				
	30	Reserved for future use			30				
	31	Amount from Schedule 3, line 15			31				
	32	Add lines 27, 28, 29, and 31. These are your	total other pa	ayments and refu	ndable cı	redits		32	
	33	Add lines 25d, 26, and 32. These are your to	tal payments					33	5,922.
Refund	34	If line 33 is more than line 24, subtract line 24	4 from line 33.	This is the amoun	nt you ove	rpaid		34	35.
	35a	Amount of line 34 you want refunded to you		is attached, chec	k here .			35a	35.
Direct deposit?	b	Routing number 1 0 1 1 0 0 0			Checking	Sa'	vings		
See instructions.	d	Account number 5 1 8 0 0 8 6	2 0 3 9	9 8					
	36	Amount of line 34 you want applied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24. This is the amo	ount you owe.						
You Owe		For details on how to pay, go to www.irs.gov	//Payments or	see instructions .				37	
	38	Estimated tax penalty (see instructions) .			38				
Third Party		you want to allow another person to disc							
Designee		structions							⊠ No
		esignee's Phone Personal identif me no. number (PIN)							
Sian .		der penalties of perjury, I declare that I have examined		accompanying sched	dules and st		. ,	ne best d	of my knowledge and
Sign		lief, they are true, correct, and complete. Declaration of							,
Here	Yο	ur signature	Date	Your occupation			If the	IRS sen	nt you an Identity
	.0	a. o.ga.u. o	2410	. Sai Sosapation			Prote	ection PI	N, enter it here
Joint return?				SOFTWARE E	NGINEE	:R	(see	inst.)	

Preparer's name
SYAM PRIYA RAM SAGAR GUPTA TALLAM
Firm's name
GLOBAL TAXES LLC
Firm's address
245 ROONEY CT E BRUNSWICK NJ 08816

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

Phone no.

Spouse's signature. If a joint return, both must sign.

(816) 772-3447

See instructions.

Keep a copy for your records.

REV 03/04/24 PRO

84-3171965 Form **1040** (2023)

If the IRS sent your spouse an Identity Protection PIN, enter it here

Phone no. (678) 965-9522

Firm's EIN

Spouse's occupation

Date

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023
Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
SAI KARTHIKEYA ADDAGADA & SRI POOJITHA BATTINI

203-85-5348

Par	Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	0.
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach Schedule E .	5	-18,735.
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		
ı	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 (<u>)</u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente			10 505
	1040, 1040-SR, or 1040-NR, line 8		10	-18 , 735.

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

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-b	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	, , , , , , , , , , , , , , , , , , ,	24a	-	
b	Deductible expenses related to income reported on line 8l from the			
		24b	-	
С	The state of the s			
		24c	-	
d		24d	-	
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
f	Contributions to section 501(c)(18)(D) pension plans	24f		
g		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	· · · · · · · · · · · · · · · · · · ·	24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
		24k		
Z	Other adjustments. List type and amount:			
		24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number 203-85-5348 SAI KARTHIKEYA ADDAGADA & SRI POOJITHA BATTINI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 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) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 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 73. 40. 33. Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

33.

15

Schedule D (Form 1040) 2023 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 33. 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. Are lines 15 and 16 both gains? 17 X 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 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see 19 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? X 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. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?

Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions

for Form 1040, line 16.

No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form 8949 (2023) Attachment Sequence No. **12A** P

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SAI KARTHIKEYA ADDAGADA & SRI POOJITHA BATTINI

Social security number or taxpayer identification number 203 - 85 - 5348

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☐ (E) Long-term transactions☐ (F) Long-term transactions	reported on	Form(s) 1099	-B showing bas	•	,)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.	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.)			(f) (g) Code(s) from instructions Amount of adjustment	Amount of	from column (d) and combine the result with column (g).
Robinhood Securities LLC	05/20/22	12/31/23	73.	40.			33.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above	al here and inc	lude on your					

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.

73.

above is checked), or line 10 (if Box F above is checked) .

BAA REV 03/04/24 PRO Form **8949** (2023)

40.

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Sequence No. 13

Go to www.irs.gov/ScheduleE for instructions and the latest information. Name(s) shown on return Your social security number SAI KARTHIKEYA ADDAGADA & SRI POOJITHA BATTINI 203-85-5348 **Income or Loss From Rental Real Estate and Royalties** Part I 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 В 1a Physical address of each property (street, city, state, ZIP code) PLOT NO-124, H.NO: 8-4-371/ B/19, SARADHI NAGAR ROAD NO # 7 OPP: VENKAT SAI BAR AND RESTAURANT LANE BORABONDA MAIN ROAD HYDERABAD 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 Days** 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: 1 Single Family Residence 3 Vacation/Short-Term Rental 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 650. 3 Rents received . 3 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 80. 1,059. 7 7 Cleaning and maintenance . . . 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 2,500. 12 12 Mortgage interest paid to banks, etc. (see instructions) 13 13 14 4,155. 14 Repairs 15 15 6,250. Supplies 16 16 Taxes 17 Utilities 17 2,250. 18 3,091. 18 Depreciation expense or depletion 19 19 Other (list) 20 20 19,385. Total expenses. Add lines 5 through 19 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 -18,735.file Form 6198 21 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 18,735.) 650. 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 3,091. Total of all amounts reported on line 18 for all properties 23d 19,385. e Total of all amounts reported on line 20 for all properties . 23e 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 18,735. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26

-18**,**735.

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 ...