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

	5				
Submi	ssion Identification Number (SID)				
Taxpaye	r's name	Social securi	ty numl	ber	
DIV	A SHRI KARANAM	749-46	-906	8	
Spouse's	s name	Spouse's so	ial sec	urity number	•
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	Vear vou a	re all	thorizina	1
	whole dollars only on lines 1 through 5.	year you a	ıı e au	uionzing.	<u>) </u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1	91	,463.
2	Total tax		2		,385.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	+	,176.
4	Amount you want refunded to you		4		, 1 / 0 .
5	Amount you owe		5	3	,310.
Part		кеер а сор	y of y	our retu	rn)
my knoreturn (to send for any Agent to paymer authorize paymer business taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) will will be sufficiently a complete. I further declare that the amounts in Part I above original or amended) I am now authorizing. I consent to allow my intermediate service provider, transming return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected on processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U originate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indict of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate at, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requisions days prior to the payment (settlement) date. I also authorize the financial institutions involved in the payment confidential information necessary to answer inquiries and resolve issues related to the pation for the payment (PIN) below is my signature for the income tax return (original or amended) I an information withdrawal Consent.	e are the am itter, or electr action of the t S. Treasury a cated in the t in to debit the the authoriz uests must b processing o ayment. I fur	ounts for ounits reconstruction its construction. The receive output the reconstruction is to be received in the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction is the reconstruction in the reconstruction in the reconstruction in the reconstruction in the reconstruction is the reconstruction in t	from the inc turn original ssion, (b) the designated paration soff to this accordance To revoke (eved no late lectronic paracknowledge	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X	•	my PIN 6	9 (0 6 8	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but er all zeros	ao my
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Your s	gnature ▶ Date ▶				
Snous	e's PIN: check one box only				
Ороцо	I authorize to enter or generate	my PINI			as my
_	ERO firm name		ter five	digits, but	asiny
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Spous	e's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part I	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	2 4 9 Don't ent	6 0	8 2 7	1
		Don rem	or all Zt	0103	
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual income taged to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of Ir	itting this ret	urn in a	accordance	
ERO's	signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To I	o So			

E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



1040		artment of the Treasury—Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	e 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	parate i	instructions.	_
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity number	_
DIVYA SI	HRI		KARA	NAM							749	46	9068	
		s first name and middle initial	Last na										security numb	ber
•	•										360	13	5423	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.				ection Campai	ign
13911 R	JSSE	LL ST							26	- 1			ou, or your	Ŭ
		ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP c					jointly, want \$	
OVERLANI	D PAI	RK				KS	S	662	23		0		nd. Checking a not change	a
Foreign countr			F	Foreign pr	ovince/state/	count	ty		n postal c		your tax		•	
												Yo	ou 🗌 Spou	se
Filing Status	s [Single					☐ Head of h	ouseh	old (HOI	H)				
Check only		Married filing jointly (even if only o	ne had i	ncome)					•	·				
one box.	X	Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (C	QSS)			
	If y	you checked the MFS box, enter the	name c	of your sp	oouse. If you	ı che	ecked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the	
	qu	alifying person is a child but not you	ur depen	ndent: N	NITHESH	ВА	NDI							
District	Λ+ αι	ny time during 2023, did you: (a) rec	oivo (as	a roward	l award or	navn	mont for propo	rtv or	convicos). or (h) coll			_
Digital Assets		nange, or otherwise dispose of a dig								,		ΠYe	es 🗵 No	
Standard		neone can claim: You as a de					a dependent	79. (0						_
Deduction	_	Spouse itemizes on a separate retur	•		-		•							
						unon								_
Age/Blindnes	s You	: Were born before January 2, 1	959 _	_ Are bl	ind Sp	ouse	: U Was bor						s blind	_
Dependent		(see instructions):		(2) Social security (3) Relationship		nip (4						-		
If more	(1) F	irst name Last name		number			to you		Child t	tax cre	edit	Credit to	or other depende	nts
than four														
dependents, see instruction	s									<u> </u>				_
and check	, —									<u> </u>				
here L				L								_	106 201	
Income	1a	Total amount from Form(s) W-2, b	,		,						1a		106,381	•
Attach Form(s)	b	Household employee wages not re			• •						1b			
W-2 here. Also	С.	Tip income not reported on line 1a (see instructions)								1c				
attach Forms W-2G and	d									1d			_	
1099-R if tax	e	Taxable dependent care benefits f									1e	_		_
was withheld.	f	Employer-provided adoption bene	etits from	1 Form 8	839, line 29	•					1f			_
If you did not get a Form	g	Wages from Form 8919, line 6 .	• • •								1g		0	_
W-2, see	h :	Other earned income (see instruct	,					i.			1h			<u>•</u>
instructions.	i _	Nontaxable combat pay election (s	see instr	ructions)			<u>1</u> i				- 4-		106,381	
A# C ! 5	<u>z</u>	Add lines 1a through 1h	2a		· · i	 ьт	 axable interes				1z 2b	_	26	
Attach Sch. B if required.	2a	· –	2a 3a				axable interes: Ordinary divide				3b	_		<u>.</u>
·	<u>3a</u> 4a	_	4a				axable amoun				4b	_		_
Standard	4а 5а	_	4 а 5а				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	check here					· ·]			_
separately, \$13,850	7	Capital gain or (loss). Attach Sche				`	,				7		-39	
Married filing jointly or	8	Additional income from Schedule								. –	8		-14 , 905	
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	•								9		91,463	
surviving spouse, \$27,700	10	Adjustments to income from Sche		-							10			_
Head of household,	11	Subtract line 10 from line 9. This is									11		91,463	_
\$20,800	12	Standard deduction or itemized	-								12		13,850	
If you checked any box under	13	Qualified business income deduct									13			·
Standard Deduction,	14										14		13,850	_
see instructions.	15	Subtract line 14 from line 11. If zer							-		15		77 613	

Form 1040 (2023	3)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		. 1	6	12,385.
Credits	17	Amount from Schedule 2, lir					 .	. 1	7	
	18	Add lines 16 and 17						. 1	8	12,385.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			. 1	9	
	20	Amount from Schedule 3, lir	ne 8					. 2	20	
	21	Add lines 19 and 20						. 2	21	
	22	Subtract line 21 from line 18	I. If zero or less,	enter -0				. 2	2	12,385.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			. 2	23	0.
	24	Add lines 22 and 23. This is	your total tax					. 2	24	12,385.
Payments	25	Federal income tax withheld								
•	а	Form(s) W-2				25a	9,1	76.		
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c						. 2	5d	9,176.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20)22 return			. 2	26	
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit from	m Schedule 8812	·		28				
	29	American opportunity credit	from Form 8863	3, line 8		29				
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lir								
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable cred	dits .	. 3	2	
	33	Add lines 25d, 26, and 32. T						. 3	3	9,176.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amour	nt you overp	aid .	. 3	4	
	35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here									
Direct deposit?	b									
See instructions.	d	Account number X X X	X X X X	X X X X	X X X X	XX				
	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 am o	ount you owe.						
You Owe		For details on how to pay, g						. з	7	3,310.
	38	Estimated tax penalty (see in	nstructions) .			38	10	01.		
Third Party	Do	you want to allow another	person to disc	cuss this retu	n with the IRS?	See		,		
Designee	ins	instructions						lete belo	w.	⋉ No
		signee's		Phone Personal identif no. number (PIN)						
<u>C:</u>										of my knowledge and
Sign	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which									
Here	Yo	ur signature		Date Your occupation					sen	t you an Identity
										N, enter it here
Joint return?						(see inst.)			
See instructions. Keep a copy for	Spouse's signature. If a joint return, both must sign.		both must sign.	Date	Spouse's occupation	on				t your spouse an ction PIN, enter it here
your records.							(see inst.		CHOIT FIN, enter it here	
	———Ph	one no. (330) 794-321	5	Email address	NITHESHBANDI	 1993@смат	I T. COM		-	
		eparer's name	Preparer's signat	1	1,1111011011111111111111111111111111111	Date	PTI	IN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA	SYAM PRIY	A RAM SAC	GAR GUPTA	04/14/20)24 PO	208270	3	Self-employed
Preparer		m's name GLOBAL TA	1			, , , ,	1-01		_	678) 965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816			Firm's El		84-3171965
		2 10 110011		22011				5 21	_	<u> </u>

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

DIVYA SHRI KARANAM

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.

	Sequence No. 01
Your soc	ial security number
749-46	-9068

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	-14,905.
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 (_)	
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	r here and on Form		1
	1040, 1040-SR, or 1040-NR, line 8		10	-14,905.

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	24 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 adjustments to income			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)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12**

Your social security number

DT	VIA SHRI KARANAM			149	-40-	9000
-	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	_	-	_		
	rt I Short-Term Capital Gains and Losses—Ge	•			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 Box A checked	72.	111.			-39.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr		5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions			Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise			e any long-	7	-39.
Pai						
	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, 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 Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
	Net long-term gain or (loss) from partnerships, S corporat		trusts from Sched	dule(s) K-1	12	
13 14	Long-term capital loss carryover. Enter the amount, if any					,
15	Worksheet in the instructions	 Iumn (h). Then, go	o to Part III	14	
	on the back				15	

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -39. • 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 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 39.) 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 ☐ 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.

OMB No. 1545-0074 Attachment Sequence No. 12A

Internal Revenue Service Name(s) shown on return

Department of the Treasury

Social security number or taxpayer identification number

749-46-9068

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

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

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

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

★ (A) Short-term transactions★ (B) Short-term transactions★ (C) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	•			e)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) 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	72.	111.			-39.
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	72.	111.			-39.

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)

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.

OMB No. 1545-0074

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

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

Attachment Sequence No. 13

Your social security number

DIVY	A SHRI KARANAM						749-4	6-9068		
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	d Ro	yalties Schedule	c . See	instru	ctions. If you are	e an indiv	vidual, rep	ort farm	
	Did you make any payments in 2023 that would require you									
B I	f "Yes," did you or will you file required Form(s) 1099? .				s 🗌 No					
1a	Physical address of each property (street, city, state, ZIF	code	e)							
Α	FL-2002, ASIAN SUN CITY KONDAPUR HYDER	RABAI	D.TELAN	IGANA	IN	500084				
В			,							
С										
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	ir Rental Days	Person Da		QJV	
Α	personal use days. Check the Q			Α		365		0		
В	if you meet the requirements to f qualified joint venture. See instru	ile as	a	В						
С	quaimed joint venture. See institu	CLIOITS	o.	С						
Туре	of Property:									
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (describ	oe)			
						Properties	s:			
Incon	ne:			Α		В			С	
3	Rents received	3		6	57.					
4	Royalties received	4								
Exper										
5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		2,7	89.					
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		2,5		10.				
12	Mortgage interest paid to banks, etc. (see instructions)	12								
13	Other interest	13			4.5					
14	Repairs	14		2,9						
15	Supplies	15		2,2	3⊥.					
16 17	Taxes	16 17		2,4	5.2					
18	Utilities	18		2,4						
19		19		2,0	55.					
20	Other (list) Total expenses. Add lines 5 through 19	20		15,5	62					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		10,0	02.					
21	result is a (loss), see instructions to find out if you must file Form 6198	21		-14,9	05.					
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(14,90	5.)	()	()	
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		657.			
b	Total of all amounts reported on line 4 for all royalty prop	erties			23b					
С	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties				23d		635.			
е	Total of all amounts reported on line 20 for all properties				23e	15,	562.			
24	Income. Add positive amounts shown on line 21. Do not		-				24			
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. Er	nter to	tal losses here	25	(14,905.)	
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do no Schedule 1 (Form 1040), line 5. Otherwise, include this ar						26		-14,905.	