#### 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.

Submission Identification Number (SID)

Taxpayer's name	Social security number
DIVYA SHRI KARANAM	749-46-9068
Spouse's name	Spouse's social security number
Part I Tax Return Information – Tax Year Ending December 31, 2	2023 (Enter year you are 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> 91,463.
<b>2</b> Total tax	<b>. 2</b> 12,385.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>. 3</b> 9,176.
4 Amount you want refunded to you	4
<b>5</b> Amount you owe	<b>5</b> 3,310.
Part II Taxpayer Declaration and Signature Authorization (Be sure you	u get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Тахрау	er's PIN: che	ck one box	only						C O		60	
×	I authorize	GLOBAL 7	AXES			to enter or	generate	my PIN	69	ive digi	6 8	as my
	signature or	the income	tax retu	ERO firm name Irn (original or amended)	I am now a	uthorizing.				enter all		
			0	ure on the income tax re I <b>and</b> your return is filed	· · ·		,	hod. The	ERO m			-
Your sig	nature 🕨	200	507.				Date 🕨	04/14	/2024			
Spouse	's PIN: chec	k one box o	nly							<del></del>		
	I authorize					to enter or	generate	my PIN				as my
	olonoturo or	the income	tov rotu	ERO firm name Irn (original or amended)	Lom now o	uthorizing				ive digitenter all		
	I will enter n	ny PIN as my	v signati	I and your return is filed	turn (origina	l or amend	,		•			-
Spouse	's signature 🕨	. Bh	N				Date 🕨	04/1	4/2024			
				titioner PIN Method I				V				
Part II	Certific	ation and A	Authen	tication – Practitior	er PIN Me	thod Only	/					
ERO's I	EFIN/PIN. En	ter your six-	digit EFI	N followed by your five-	digit self-sel	ected PIN.	2 2	2 4	96	0 8	2 7	7 1
								Don	't enter al	l zeros		
				IN, which is my signature f								

dance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date 🕨	
Don't	ERO Must Retain This Form — Submit This Form to the IRS Uni		
			F 0070 (D 01 0001)

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use Only	—Do not w	ite or staple in this space.
For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning			, 2023, end	ing			, 20	See sep	arate instructions.
Your first name	and mi	 ddle initial	Last na							Your so	cial security number
DIVYA SH			KARA								46 9068
		s first name and middle initial	Last na							-	s social security number
						360	13 5423				
Home address	(numbe	r and street). If you have a P.O. box, see	instructi	ons.				A	pt. no.		tial Election Campaign
13911 RU	JSSEI	LL ST						1	26	Check h	ere if you, or your
		ce. If you have a foreign address, also co	mplete s	paces bel	low.	Sta	te	ZIP c	ode		f filing jointly, want \$3
OVERLANI	) PAF	RK				KS	3	662	23		this fund. Checking a owned will not change
Foreign country	/ name			Foreign pr	rovince/state/o	count	ty	Foreig	n postal code		or refund.
											You Spouse
Filing Status	;	Single					Head of h	ouseh	old (HOH)		
Check only		Married filing jointly (even if only or	ne had i	income)			_				
one box.	X	Married filing separately (MFS)					Qualifying	surviv	ving spouse	(QSS)	
		ou checked the MFS box, enter the						l or Q	SS box, ente	r the chil	d's name if the
	qu	alifying person is a child but not you	ır deper	ndent: N	NITHESH	BAI	NDI				
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward	d, award, or	payr	nent for prope	rty or	services); or	(b) sell,	
Assets		ange, or otherwise dispose of a digi				-		-			🗌 Yes 🛛 No
Standard	Som	eone can claim: 🗌 You as a de	penden	t 🗌	Your spouse	e as	a dependent				
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	u were a	dual-status a	alien	l				
Age/Blindness	s You:	Were born before January 2, 1	959 <b>[</b>	Are bl	ind <b>Spo</b>	use	: 🗌 Was bor	n befo	ore January 2	2. 1959	Is blind
Dependents		•	-	(2) 5	Social security		(3) Relationsh				ies for (see instructions):
If more		irst name Last name		(-) (	number		to you	·•	Child tax ci	redit	Credit for other dependents
than four											
dependents,											
see instructions and check	s ——										
here											
Income	1a	Total amount from Form(s) W-2, be	ox 1 (se	e instruc	tions)	•				. 1a	106,381.
Attach Form(s)	b	Household employee wages not re	eported	on Form	n(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	rom Fo	rm 2441,	line 26 .	•				. 1e	
was withheld.	f	Employer-provided adoption bene								. 1f	
lf you did not get a Form	g	Wages from Form 8919, line 6 .								. <b>1</b> g	
W-2, see	h	Other earned income (see instructi	,			•	· · · ·	· ·		. <u>1h</u>	0.
instructions.	i	Nontaxable combat pay election (s	see inst	ructions)		•	<b>1</b> i			_	100 201
		Add lines 1a through 1h	 .		· · · ·					. <u>1z</u>	106,381.
Attach Sch. B if required.	2a	· · -	2a				axable interest			. 2b	26.
	<u>3a</u>		3a				ordinary divide				
Standard	4a		4a				axable amoun				
Deduction for—	5a 6a		5a 6a				axable amoun axable amoun			. <u>5b</u> . 6b	
<ul> <li>Single or Married filing</li> </ul>	6а с	Social security benefits		mothod				ι	 Г	. 00	
separately, \$13,850	7	Capital gain or (loss). Attach Scher						• •	· · · L	7	-39.
<ul> <li>Married filing</li> </ul>	8	Additional income from Schedule						• •	· · · L	. 8	-14,905.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							• • •	· 0 . 9	91,463.
surviving spouse, \$27,700	10	Adjustments to income from Sche					• · · · · ·			. <u> </u>	<u> </u>
<ul> <li>Head of household,</li> </ul>	11	Subtract line 10 from line 9. This is								. 11	91,463.
\$20,800	12	Standard deduction or itemized	-							. 12	13,850.
<ul> <li>If you checked any box under</li> </ul>	13	Qualified business income deducti					5-A			. 13	
Standard Deduction,	14	Add lines 12 and 13								. 14	13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	s, enter -	-0 This is y	our <b>i</b>					77,613.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form 1040 (2023)

Form 1040 (2023	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	12,385.
Credits	17	Amount from Schedule 2, lin	e3				🗌	17	
	18	Add lines 16 and 17						18	12,385.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	ie8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	12,385.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	12,385.
Payments	25	Federal income tax withheld	from:						
-	а	Form(s) W-2				<b>25a</b> 9	,176.		
	b	Form(s) 1099				25b			
	с	Other forms (see instructions	s)			25c			
	d	Add lines 25a through 25c					2	25d	9,176.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	)22 return			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812	2		28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lin	ie 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and ref	undable credits	;	32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	otal payments			;	33	9,176.
Refund	34	If line 33 is more than line 24	1, subtract line 2	4 from line 33.	This is the amou	nt you <b>overpaid</b>		34	
	35a	Amount of line 34 you want			3 is attached, che	ck here	. 🗆 🖪	85a	
Direct deposit?	b	Routing number       X							
See instructions.	d	Account number X X X	X X X X	XXXX	X X X X X	XX			
	36	Amount of line 34 you want a	applied to your	2024 estimate	edtax	36			
Amount	37	Subtract line 33 from line 24							
You Owe		For details on how to pay, g	o to <i>www.irs.go</i> v	//Payments or	see instructions		· · [;	37	3,310.
	38	Estimated tax penalty (see in	nstructions) .			38	101.		
<b>Third Party</b>		you want to allow another	person to disc	cuss this retu	rn with the IRS?				_
Designee		structions					omplete belo		× No
	De nai	signee's ne		Phone no.			onal identifica per (PIN)	tion	
Sian		der penalties of perjury, I declare tl	nat I have examined		accompanying sche		. ,	oest o	f my knowledge and
Sign Here		ief, they are true, correct, and com							
nere	Yo	ur signature		Date	Your occupation		If the IR	S sent	t you an Identity
									N, enter it here
Joint return?				SECURITY ANALYST			(see inst	,	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat	tion			t your spouse an otion PIN, enter it here
your records.							(see inst		
	Ph	one no. (330) 794-321	5	Email address	NTTHESHBAND	1993@GMAIL.CC	)M		
		eparer's name	Preparer's signat			Date	PTIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA	SYAM PRIY.	A RAM SAG	GAR GUPTA	04/14/2024	P020827	03	Self-employed
Preparer		m's name GLOBAL TAX		511		, , , = 1, 2021			578)965-9522
Use Only			Y CT E BRU	NSWICK N	J 08816		Firm's E		84-3171965
Go to www.irs.or		11040 for instructions and the late			BAA	REV 03/07/24 PRO			Form <b>1040</b> (2023)
					DAA	NEV 03/07/24 PRO			

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Internal Revenue Service

# Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

2023 Attachment Sequence No. **01** 

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
DIVYA SHRI KARANAM	749-46-9068
Dort L. Additional Income	

Par	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. Atta	ach Schedule E .	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		
	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 (	4	
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:	0_		
0	Tatal other income. Add lines to through 97	8z		
9 10	Total other income. Add lines 8a through 8z.		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter 1040, 1040-SR, or 1040-NR, line 8		10	-14,905.
For Pa	perwork Reduction Act Notice, see your tax return instructions.	· •		e 1 (Form 1040) 2023

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-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)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses    24d		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	-	
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)	_	
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	-	
j	Housing deduction from Form 2555	-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	-	
Z	Other adjustments. List type and amount:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	<b>BAA</b> REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

#### SCHEDULE D (Form 1040)

### **Capital Gains and Losses**

OMB No. 1545-0074

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.

Attachment Sequence No. **12** 

20

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

DIVYA SHRI KARANAM

Your social security number

749-46-9068

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X 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)

	instructions for how to figure the amounts to enter on the below.	<b>(d)</b> Proceeds	(e) Cost	<b>(g)</b> Adjustments to gain or loss f		(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, P line 2, column	art I,	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	72.	111.			-39.
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		-	-	6	( )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-39.

#### Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (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 le dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	s 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.					
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	
13	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 8a on the back .	•	.,		15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	<b>16</b> -39.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.	
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains?	
	<b>No.</b> Skip lines 18 through 21, and go to line 22.	
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	<b>21</b> ( 39.
	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.	
	BAA REV 03/07/24 PRO	Schedule D (Form 1040) 2023

Form **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.



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

Social security number or taxpayer identification number

DIVYA SHRI KARANAM

749-46-9068

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.

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

<b>1</b> (a) Description of property	<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	<b>(h)</b> 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) (g) Code(s) from Amount of adjustment		from column (d) and combine the result with column (g).	
ROBINHOOD SECURITIES LL	c 01/01/23	12/31/23	72.	111.			-39.	
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).			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.

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

(Form	1040)	(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)								20 <b>2</b> 3			
				1040-SR, 1040-NR, or 1041. instructions and the latest information.						Attachment Sequence No. 13			
Name(s) shown on return								Your socia	ial security number				
DIVY	DIVYA SHRI KARANAM									749-46-9068			
Part	Note: If yo	ou are in t	the business of rentiness from <b>Form 4835</b> c	ng personal proper			<b>C</b> . See	e instruc	ctions. If you	are an indiv	vidual, rep	ort farm	1
	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions											No No	
1a			ach property (stre										
Α	FL-2002,A	SIAN S	SUN CITY KON	IDAPUR HYDEF	RABAI	,TELAN	GANA	IN	500084				
В													
<u>C</u> 1b	Type of Prope							Fa	ir Rental	Person		QJ	V
A	(from list belov	st below) above, report the number of fair re personal use days. Check the QJV					•		<b>Days</b> 365	<b>Days</b>		<u> </u>	
	5		if you meet the r	equirements to f	file as	a	<u>А</u> В		203		0		<u></u>
		qualified joint venture. See instruction				s	C						1
Туре	of Property:	I				I	-	1					
	Single Family R Multi-Family Re			Short-Term Ren	tal	5 Land 6 Roya			Self-Rental Other (desc	ribe)			
									Propert				
Incom	e:						Α		В			С	
3	Rents received	b			3		6	57.					
4	Royalties rece	ived .			4								
Expen													
5	-				5								
6			structions)		6								
7	•		ance		7		2,7	89.					
8					8								
9					9								
10	•	•	sional fees		10								
11	-				11		2,5	10.					
12		•	I to banks, etc. (se	,	12								
13					13								
14					14		2,9						
15					15		2,2	31.					
16					16		0 1	- 0					
17					17			52.					
18		expense	or depletion		18 19		2,0	35.					
19 20	Other (list)		nes 5 through 19		20		15,5	62					
			ine 3 (rents) and/o		20		13,3	02.					
21		s), see ir	nstructions to find	out if you must	21	-	-14,9	05.					
22			estate loss after li		22	(	14,90		(	١	(		,
23a		-	ported on line 3 fo					23a		657.	\		,
23a b			ported on line 4 fo					23a					
c			ported on line 12 f					230 23c					
d			ported on line 18 f					23d		2,635.			
e			ported on line 20 f					23e		5,562.			
24			amounts shown of							. 24			
25			ses from line 21 and					nter to	tal losses he		( -	14,90	5.
26			te and royalty inc								·	, : :	

Supplemental Income and Loss

SCHEDULE E

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

Schedule E (Form 1040) 2023

26

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-14,905.

OMB No. 1545-0074