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	y number
RIYAZ AHMAD SHAIK	816-59-	-0163
Spouse's name	Spouse's soci	al security number
NIHA KOUSAR SYED	983-95-	-3226
Part I Tax Return Information — Tax Year Ending December 31, 2023	(Enter year you ar	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 Adjusted gross income		1 85,637.
2 Total tax		2 6,511.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 13,329.
4 Amount you want refunded to you		4 531.
5 Amount you owe		5
Part II Taxpayer Declaration and Signature Authorization (Be sure you ge	t and keep a copy	y of your return)
my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Pa 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 reaso 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 accipayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial 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 cancellar business days prior to the payment (settlement) date. I also authorize the financial institutions involve taxes to receive confidential information necessary to answer inquiries and resolve issues related personal identification number (PIN) below is my signature for the income tax return (original or amen Electronic Funds Withdrawal Consent.	, transmitter, or electron for rejection of the traze the U.S. Treasury arount indicated in the tainstitution to debit the erminate the authorization requests must be do in the processing of to the payment. I furtil	nic return originator (ERO) ansmission, (b) the reason and 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		
	enerate my PIN	0 1 6 3 as my
ERO firm name signature on the income tax return (original or amended) I am now authorizing.	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 and your return is filed using the Practitioner PI below.		
Your signature ▶	ate ▶	
Spouse's PIN: check one box only		
	don	3 2 2 6 as my er five digits, but o't enter all zeros
if you are entering your own PIN and your return is filed using the Practitioner PI below.		
Spouse's signature ▶ Da	ate ▶	
Practitioner PIN Method Returns Only—continue	below	
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.		5 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 ir authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I a requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the process of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the process of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Provided in the process of	ım submitting this retu	rn in accordance with the
ERO's signature ▶ Da	ate ▶	
ERO Must Retain This Form — See Instructi		

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

Form **9325**

Department of the Treasury - Internal Revenue Service

(January 2017)

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

i nank y	ou for participating in IRS <i>e-file</i> . 816–59–0163	
Гахрауе	r name RIYAZ AHMAD SHAIK & NIHA KOUSAR SYED	
Гахрауе	r address (optional)	
9849 W	VALLEY RANCH PKWY APT 2053	
IRVING	, TX 75063	
1. 🛚	Your federal income tax return for 2023	
	Submission Processing Center. The electronic filing	services were provided byGLOBAL TAXES LLC
2. 🗵		ing a Personal Identification Number (PIN) as your electronic ctronic Return Originator (ERO) to enter or generate a PIN is
3.	Your return was accepted on	Allow 4 to 6 weeks for the processing of your return.
		tion on your return may be reduced or disallowed due to a
4.	Your electronic funds withdrawal payment request v	vas accepted for processing.
5.	Your electronic funds withdrawal payment request varues are section.	vas not accepted for processing. Refer to the "If You Owe
6.	Your Form 4868, Application for Automatic Extension accepted on The Suits	on of Time to File U.S. Individual Income Tax Return, was abmission ID assigned to your extension

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to <code>www.irs.gov</code> and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

BAA REV 03/07/24 PRO Form **9325** (Rev. 1-2017)

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to <code>www.irs.gov</code>. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.

You have requested a refund check mailed to your home address. For the latest information on the status of you refund go to www.irs.gov and select the 'Where's My Refund?' link under Refunds. The IRS does not guarantee a specific date that a refund will be mailed to a taxpayer's home address.

Catalog Number 12901K BAA www.irs.gov REV 03/07/24 PRO Form **9325** (Rev. 1-2017)

1040-X € 1040-X

Carryback Claim Department of the Treasury—Internal Revenue Service

Amended U.S. Individual Income Tax Return

(Rev. February 2024)

Go to www.irs.gov/Form1040X for instructions and the latest information.

OMB No. 1545-0074

(Rev. Fe	ebruary 2024)	Go to www.irs.	gov/Form1040	OX for i	nstructions and	the la	atest in	ormation.				
This r	eturn is for cal	lendar year (enter year)	2023 or	fiscal y	/ear (enter moi	nth ar	nd year	ended)		_		
	st name and middle	initial		Last na	me				Your social security number			
RIYA	AZ AHMAD			SHAIK					816-5	59-016	53	
If joint re	eturn, spouse's first	name and middle initial		Last name				'		curity number		
NIHA KOUSAR				SYEI)				983-95-3226			
		d street). If you have a P.O. box,	see instructions.				Apt.				tion Campaign	
9849	W VALLEY	RANCH PKWY					205	53	Check here if you, or your spouse if filing jointly, didn't previously			
•	•	you have a foreign address, also	complete spaces	below.	State		ZIP code		want \$3 to go to this fund, but no			
IRVI			1		TX		75063		do. Checking a box below will r			
Foreign	country name		Foreign province	ce/state/	county		-oreign p	ostal code	change y		or refund. u	
chang Sin	e your filing stangle X Married checked the MF	ng status. You must checutus from married filling jointly Married filling jointly Married filling box, enter the name of you if the qualifying person is	ntly to marrie ling separately our spouse ur	d filing y (MFS) nless yo	separately after Head of head of head or are amending	er the nouse	return hold (H	due date	Qualifying	n: In ge	neral, you can't	
Enter		igh 23, columns A through			•		repor	nal amount ted or as sly adjusted	B. Net ch amount of or (decre	increase	C. Correct amount	
Use P	art II on page 2	to explain any changes.						structions)	explain in		amount	
Incon	ne and Dedu	ctions										
1	Adjusted gros	ss income. If a net ope	erating loss	(NOL)	carryback is							
		ck here				1	7	7,804.	7,	833.	85,637.	
2		etions or standard deduc				2		7,700.		0.	27,700.	
3	Subtract line 2					3	5	0,104.	7,	57,937.		
4a		uture use				4a				0.		
b		ness income deduction .				4b		0.				
5		ne. Subtract line 4b from				_	_	0 104		000	F7 027	
Torri		, enter -0- in column C .		• •		5	5	0,104.	/,	833.	57,937.	
1ax L	iability	thod(s) used to figure tax	(coo instructi	one).								
O	Table	inou(s) used to rigure tax	(See Ilistructi	0113).		6		5,575.		936.	6,511.	
7		e credits. If a general busin	ness credit ca	rnybac	k is included	_		3,373.		930.	0,311.	
•	check here					7		0.		0.		
8		7 from line 6. If the result i	s zero or less	s. enter	· -0	8		<u> </u>		936.	6,511.	
9	Reserved for f					9		,			,	
10	Other taxes					10		0.		0.	0.	
11	Total tax. Add	lines 8 and 10				11		5,575.		936.	6,511.	
Paym	nents											
12		e tax withheld and exces										
	,	If changing, see instructi	•			12	1	1,862.	1,	467.	13,329.	
13		payments, including amou				13		0.		0.		
14		e credit (EIC)				14		0.		0.		
15	□ 8863 □ 8		her (specify):			15		0.		0.		
16		paid with request for external								1 1	_	
47										16	0.	
17 Defer		ts. Add lines 12 through 1	5, column C,	and III	1e 16	• •				17	13,329.	
Hetur 18	nd or Amount	t You Owe , if any, as shown on origi	nal return or a	ae nrou	viously adjustes	d by +	ha IDC			18	6,287.	
19		18 from line 17. (If less tha		-		-				19	7,042.	
20		owe. If line 11, column C,								20	7,042.	
21		mn C, is less than line 19								21	531.	
22		e 21 you want refunded t					-			22	531.	
23		21 you want applied to y	-		estim			 23	- •		331.	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>, , , , , , , , , , , , , , , , , , , </u>						plete and	sign this	form on page 2.	

Form 1040-X (Rev. 2-2024)

	A. Original number of dependents reported or as previously adjusted	B. Net change— amount of increase or (decrease)	C. Correct number					
24								
25	0	0						
26								
27	0	0						
29								
this amended return.								
		(d) Check the box if qualifies for (see instructions):						
(b) Social security number	(c) Relationship to you	Child tax credit	Credit for other dependents					
Part II Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X.								
		page 1. page 1. page 1. page 1. page 2. page 2. page 3. page 3. page 4. page 4. page 4. page 5. page 6. page 6. page 6. page 7. pag	Description Description					

Attach any supporting documents and new or changed forms and schedules.

DEAR IRS WE RIYAZ AHMAD SHAIK & NIHA KOUSAR SYED FILED THE TAX RETURN FOR 2023 TAX YEAR. WE GOT THE CORRECTED W2 FROM MY EMPLOYER AND NOW WE ARE AMENDING MY TAX RETURN WITH OUR CORRECTED W2 FORM.

WE ARE REQUESTING THE IRS TO ACCEPT THE CHANGES AND RELEASE THE EXTRA REFUNDS OF \$531.

	Remember to keep a copy of this	Remember to keep a copy of this form for your records.										
	Under penalties of perjury, I declare that I have filed an original return, and that I have examined this amended return and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. De taxpayer) is based on all information about which the preparer has any knowledge.											
Here	Your signature	Date	Your occupation SOFTWARE EN	NGINEER		If the IRS sent you an Identity Protection PIN, enter it here (see inst.)						
	Spouse's signature. If a joint return, both mu	Date	Spouse's occupation HOME MAKER	on		If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)						
	Phone no. (940)205-3484		Email address	•								
Paid	Preparer's name	Preparer's	s signature		Date	PTIN	Check if:					
Preparer	SYAM PRIYA RAM SAGAR GUPTA	SYAM	PRIYA RAM	SAGAR GUPTA	04/03/2024	P02082703	Self-employed					
Use Only	Firm's name GLOBAL TAXES I	LC				Phone no. (67	Phone no. (678)965-9522					
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816						Firm's EIN					

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

2023

OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–De	c. 31, 2023, or other tax year beginning		, 2023, end	ding		, 20		See ser	oarate instr	ructions.
Your first name	and m	niddle initial	Last na	ame					Your so	cial security	y number
RIYAZ AH	HMAD)	SHA	TK					816	59 01	-
		's first name and middle initial	Last na						Spouse's social security number		
NIHA KOU	ISAR	,	SYEI	D					983	95 32	226
		per and street). If you have a P.O. box, see					Apt. no.				n Campaigr
9849 W T	JATIT	EY RANCH PKWY					2053			nere if you,	
		fice. If you have a foreign address, also co	mplete	spaces below.	Sta	te	ZIP code			if filing joint	
IRVING					TX	Σ	75063			this fund. (ow will not (
Foreign country	y name	•		Foreign province/state/	count	ty	Foreign postal of			or refund.	onango
										You	Spouse
Filing Status	. [Single				Head of ho	ousehold (HO	H)			
•		✓ Married filing jointly (even if only or	ne had	income)			•	,			
Check only one box.		☐ Married filing separately (MFS)		•		☐ Qualifying	surviving spo	use (0	QSS)		
	lf	you checked the MFS box, enter the	name	of your spouse. If you	u che	ecked the HOH	l or QSS box,	enter	r the chi	ld's name	if the
		ualifying person is a child but not you									
	^+ ~	any time during 2002 did yey (a) ree	air (a (a a			mant far nrana). o. /	/b) a a ll		
Digital Assets		any time during 2023, did you: (a) rece hange, or otherwise dispose of a digi	•				•	,.	. ,	Yes	⊠ No
	-	meone can claim: You as a de		_			1): (000 1113110	CLIOIT	3.)		
Standard Deduction	_	Spouse itemizes on a separate return	•	•		-					
Deduction	ш	Spouse iternizes on a separate return	ii oi yo	u were a duar-status	allell	<u> </u>					
Age/Blindness	s You	u: Were born before January 2, 1	959	Are blind Spo	ouse	: Was bor	n before Janu	ary 2	, 1959	Is bli	nd
Dependent	s (see	instructions):		(2) Social security	/	(3) Relationshi	ib I.,			•	instructions):
If more	(1) F	First name Last name		number		to you	Child	tax cre	edit	Credit for oth	ner dependents
than four											
dependents, see instruction	s —										
and check	. —							<u>Ц</u>			
here L											
Income	1a	Total amount from Form(s) W-2, bo	ox 1 (se	ee instructions) .					1a	9	94,000.
Attach Form(s)	b	1 , 0	•	` ,					1b		
W-2 here. Also	С	Tip income not reported on line 1a	•	•					1c		
attach Forms W-2G and	d	Medicaid waiver payments not rep		` ,	nstru	ıctions)			1d		
1099-R if tax	е	Taxable dependent care benefits f		·					1e		
was withheld.	f	Employer-provided adoption bene							1f		
If you did not get a Form	g	Wages from Form 8919, line 6.							1g		
W-2, see	h	,	,				;		1h	_	0.
instructions.	i	Nontaxable combat pay election (s	see inst	tructions)		<u>li</u>				-	1 000
		- I		· · · · · i					1z		94,000.
Attach Sch. B if required.	2a	'	2a			axable interest			2b		
	3a	_	3a			ordinary divider			3b		
Standard	4a		4a 5a			axable amount axable amount			4b 5b		
Deduction for—	5a										
Single or Married filing	6а с	Social security benefits (6a	mothod obselvhers		axable amount			6b		
separately, \$13,850		Capital gain or (loss). Attach Sched		•	•	,		·			
Married filing	7 8	Additional income from Schedule				•		. ∟	8	+	-8,363.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,							9		35,637.
surviving spouse, \$27,700	10	Add lines 12, 2b, 3b, 4b, 5b, 6b, 7, Adjustments to income from Sche		•					10		5,057.
Head of	11	Subtract line 10 from line 9. This is							11		5 627
household, \$20,800	12	Standard deduction or itemized	-	-					12		<u>85,637.</u> 27,700.
If you checked any box under	13	Qualified business income deducti		,	,	5-Δ			13		1,700.
Standard	14					υ Λ			14		27,700.
Deduction, see instructions.	15	Subtract line 1/1 from line 11. If zer				 tavahla incom			15		7 937

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check it	f any from Form	(s): 1 881	4 2 4972	3 🗌		16	6,511.
Credits	17	Amount from Schedule 2, line	3					17	
	18	Add lines 16 and 17						18	6,511.
	19	Child tax credit or credit for o	ther dependent	s 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, e	enter -0				22	6,511.
	23	Other taxes, including self-en						23	0.
	24	Add lines 22 and 23. This is y						24	6,511.
Payments	25	Federal income tax withheld f							
•	а	Form(s) W-2				25a 1:	3,329.		
	b	Form(s) 1099				25b			
	С	Other forms (see instructions)				25c			
	d	Add lines 25a through 25c .						25d	13,329.
If you have a	26	2023 estimated tax payments	and amount a	oplied from 20	22 return			26	
qualifying child,	27	Earned income credit (EIC) .				27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit f	rom Form 8863	, 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	indable credits		32	
	33	Add lines 25d, 26, and 32. Th	ese are your to	tal payments				33	13,329.
Refund	34	If line 33 is more than line 24,	subtract line 24	4 from line 33.	This is the amour	nt you overpaid		34	6,818.
	35a	Amount of line 34 you want re	efunded to you	ı. If Form 8888	is attached, chec	ck here	🗌	35a	6,818.
Direct deposit?	b	Routing number X X X					Savings		
See instructions.	d	Account number X X X	X X X X	X X X Z	X X X X	XX			
	36	Amount of line 34 you want ap	pplied to your 2	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24. For details on how to pay, go		•				37	
rou owe	38	Estimated tax penalty (see ins	_	-		38		31	
Third Dorty		you want to allow another							
Third Party Designee		structions	•				omplete	below.	X No
200.900	De	signee's		Phone			onal ident		_
		me		no.			ber (PIN)		
Sign		der penalties of perjury, I declare that lief, they are true, correct, and comp							
Here					, , , i	isca on an imormat			, ,
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					SOFTWARE E	INGINEER		inst.)	,
See instructions.	Sp	ouse's signature. If a joint return, be	oth must sign.	Date	Spouse's occupati	on			nt your spouse an
Keep a copy for your records.		, , , , , , , , , , , , , , , , , , ,						tity Proto inst.)	ection PIN, enter it here
,		HOME MAKEK						11131.)	
		one no. (940)205-3484 eparer's name	Preparer's signati	Email address	RSHAIK9798	B@GMAIL.COI │Date	M PTIN		Check if:
Paid		·			NAD GIIDMA			2702	Self-employed
Preparer		M PRIYA RAM SAGAR GUPTA		A KAM SAG	AR GUPTA	04/03/2024	P0208		
Use Only									(678)965-9522
	Fir	m's address 245 ROONEY	CI E BRU	MONTCK NO	0 0 0 0 0 0 0		Firm	i's EIN	- 1040

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR RIYAZ AHMAD SHAIK & NIHA KOUSAR SYED

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
816-59	-0163

Par	t 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	-8,363.
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		
- 1	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. Enter			
	1040. 1040-SR. or 1040-NR. line 8		10	-8,363.

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-				
	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	Nontaxable amount of the value of Olympic and Paralympic medals				
	· · · · · · · · · · · · · · · · · · ·	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	Housing deduction from Form 2555	24j			
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	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	e. Enter	here and on	26	
	·				

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

RIYA	AZ AHMAD SHAIK & NIHA KOUSAR SYED						816-5	9-0163		
Part	Income or Loss From Rental Real Estate a	nd Ro	yalties							
	Note: If you are in the business of renting personal proper	erty, use	Schedule	e C . See	instru	ctions. If you are	e an ind	ividual, rep	ort farm	
	rental income or loss from Form 4835 on page 2, line 40		- ()	10000						
		rou make any payments in 2023 that would require you to file Form(s) 1099? See instructions								
В	f "Yes," did you or will you file required Form(s) 1099?							. <u> </u>	es 🗌 No)
1a	Physical address of each property (street, city, state, Z	IP code	e)							
Α	BANK COLONY, NEAR 60FT ROAD NARASARAOP	ET AI	IDHRA I	PRADE	SH I	N 522601				
В										
С										
1b	Type of Property 2 For each rental real estate prop	ertv list	ted		Fa	air Rental	Perso	nal Use	0.11/	
	(from list below) above, report the number of fair	r rental	and			Days	Da	ays	QJV	
Α	gersonal use days. Check the C			Α		365		0		
В	if you meet the requirements to			В						
С	qualified joint venture. See instr	ructions	ò.	С						
Туре	of Property:					•				
1	Single Family Residence 3 Vacation/Short-Term Re	ntal	5 Land	t	7	Self-Rental				
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (describ	oe)			
	·		<u> </u>							
l				Α		Propertie B	S:		С	
Incon 3	Rents received	3		Α _	00.	В				
4	Royalties received	4			00.					
Expe	noyalies received	-								
⊑xpei 5	Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7		8	59.					
8	Commissions	8			<i>JJ</i> .					
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11		9	85.					
12	Mortgage interest paid to banks, etc. (see instructions)	12			00.					
13	Other interest	13								
14	Repairs	14		1,3	45.					
15	Supplies	15		1,1						
16	Taxes	16								
17	Utilities	17		1,4	25.					
18	Depreciation expense or depletion	18		3,0	91.					
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20		8,8	63.					
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	f								
	result is a (loss), see instructions to find out if you must	:								
	file Form 6198	21		-8,3	63.					
22	Deductible rental real estate loss after limitation, if any,									
	on Form 8582 (see instructions)	22	(8,36	53.)	(()
23 a	Total of all amounts reported on line 3 for all rental prop				23a		500.			
b	Total of all amounts reported on line 4 for all royalty pro	-			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		091.			
е	Total of all amounts reported on line 20 for all properties				23e	8,	863.			
24	Income. Add positive amounts shown on line 21. Do no		-				24	,		
25	Losses. Add royalty losses from line 21 and rental real esta							(8,363	.)
26	Total rental real estate and royalty income or (loss).									
	here. If Parts II, III, and IV, and line 40 on page 2 do n Schedule 1 (Form 1040), line 5. Otherwise, include this a								0 26	2
	Schedule i (Form 1040), line 3. Otherwise, include this a	arriourit		ıaı UII II	116 4 I	un payez .	26	1	-8,363	J .