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

- Intellial	nevertue del vice					
Subm	ssion Identification Number (SID)					
Taxpaye	er's name	Social securi	ty numb	per		
YESI	WANTH ESWAR PRATHIPATI	486-69	-994	8		
Spouse	s name	Spouse's social security number				
Part		year you a	re au	thorizing.)	
	whole dollars only on lines 1 through 5.					
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.		La	ا م	200	
1 2	Adjusted gross income		2		,200. ,340.	
3	Total tax		3			
4	Amount you want refunded to you		4		,436. ,096.	
5	Amount you owe		5	3	,096.	
Part		еер а сор		our retu	rn)	
my know return to send for any Agent to payme authori payme business taxes to person	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) by by by and belief, it is true, correct, and 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, transmit my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejected and processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U. to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicant 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 ont, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation request days prior to the payment (settlement) date. I also authorize the financial institutions involved in the or receive confidential information necessary to answer inquiries and resolve issues related to the particle funds withdrawal Consent.	e are the am tter, or electrication of the to S. Treasury a cated in the to n to debit the the authoriz- ests must be processing of ayment. I fur	ounts for the counts of the co	from the incurrence of the control o	come tax tor (ERO) ne reason Financial tware for bunt. This cancel) a er than 2 syment of that the	
	nic Funds Withdrawai Consent. Nyer's PIN: check one box only					
X		nv PIN		9 4 8	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ř En		digits, but r all zeros	ασ,	
	I will enter my PIN as my signature on the income tax return (original or amended) I am not if you are entering your own PIN and your return is filed using the Practitioner PIN method below.					
Your s	signature ▶ Date ▶					
Snous	se's PIN: check one box only					
Ороц	I authorize to enter or generate r	ov DINI			as my	
	ERO firm name	_	ter five	digits, but	asiny	
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros		
	I will enter my PIN as my signature on the income tax return (original or amended) I am no if you are entering your own PIN and your return is filed using the Practitioner PIN method below.					
Spous	e's signature ▶ Date ▶					
	Practitioner PIN Method Returns Only—continue below					
Part	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 4 9 Don't ent	6 0 er all ze	8 2 7 eros	1	
authori	that the above numeric entry is my PIN, which is my signature for the electronic individual income ta zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submit ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Providers of In	tting this retu	ırn 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 D	o So				

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



1040		artment of the Treasury—Internal Revenue Servi		urn 2	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this	space.
For the year Jai	n. 1–Dec	c. 31, 2023, or other tax year beginning			, 2023, endi	ng			, 20		See se	oarate i	instructi	ons.
Your first name	and m	iddle initial	Last nar	name						Your social security number			mber	
YESWANT	H ES	WAR	PRAT	HIPATI							486	69	9948	}
If joint return, s	pouse's	s first name and middle initial	Last nar								Spouse'	s social	security	number
											659	53	5445)
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.		Preside	ntial Ele	ection Ca	ampaign
6713 BE	RMUD	A AVE											ou, or yo	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete sp	paces below	' -	Sta	te	ZIP c	ode			· .	jointly, w nd. Chec	
MCKINNE:	Y					ΤX		750	70		•		not chan	•
Foreign countr	y name		F	oreign provi	ince/state/c	ount	у	Foreig	gn postal c	ode	your tax	or refu		Spouse
Filing Status	s 🗆	Single					☐ Head of h	ouseh	old (HO	⊣)				
Check only		Married filing jointly (even if only o	ne had ir	ncome)			_							
one box.	×	Married filing separately (MFS)					Qualifying	surviv	ing spou	use (C	QSS)			
		you checked the MFS box, enter the		•	•			or Q	SS box,	enter	the chi	ld's na	me if the	е
	qu	ıalifying person is a child but not you	ır depen	dent: LAK	SHMI GO	DHA	MUMMADI							
Digital		ny time during 2023, did you: (a) rec				-		-				X Ye		No
Assets		nange, or otherwise dispose of a digneone can claim: You as a de						:1) ? (3	ee msuu	CHOIL	5.)		<u>,,, </u>	INO
Standard Deduction	_		•		•		a dependent							
Deduction	<u> </u>	Spouse itemizes on a separate retur	n or you	were a dua	ai-status a	anen								
Age/Blindnes	s You	: Were born before January 2, 1	959	Are blind	Spo	use	: Was bor	n befo	ore Janua	ary 2,	1959	ls	s blind	
Dependent	s (see	instructions):			ial security		(3) Relationsh	hip (4) Check the						
If more	(1) F	irst name Last name		number to you			Child tax o		edit	Credit fo	r other de	pendents		
than four														
dependents, see instruction	s								l	<u> </u>			ᆜ	
and check	, —									<u> </u>			屵	
here L														201
Income	1a	Total amount from Form(s) W-2, b	,		,						1a		<u>93,</u>	321.
Attach Form(s)	b	Household employee wages not re	•								1b			
W-2 here. Also attach Forms	C	Tip income not reported on line 1a	•	•							1c			
W-2G and	d	Medicaid waiver payments not rep				istru	ctions)				1d			
1099-R if tax	e	Taxable dependent care benefits f				•					1e			
was withheld. If you did not	f	Employer-provided adoption bene Wages from Form 8919, line 6.	ents from	1 FOIIII 663	9, 11110 29	•					1f			
get a Form	g	=	 iona)								1g			0.
W-2, see instructions.	h i	Other earned income (see instruct Nontaxable combat pay election (s	,			•		i ·			1h			
instructions.	z	Add lines 1a through 1h	300 111311	actions, .		•					1z		93.	321.
Attach Sch. B	<u>_</u> 2a		2a		· j ·	· b T	axable interest	 t			2b			<u>·</u>
if required.	3a	· –	3a				rdinary divide				3b			81.
		_	4a				axable amoun				4b			
Standard	5a		5a				axable amoun				5b			
Deduction for— Single or	6a	_	6a				axable amoun				6b			
Married filing	С	If you elect to use the lump-sum e	_	nethod. ch						. Ė				
separately, \$13,850	Capital gain or (loss). Attach Sche	•	,		,			. Ē	7			3.		
 Married filing jointly or 	7 8	Additional income from Schedule		•							8	1	-11,	
Qualifying surviving spouse,	9		Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income						9			200.		
\$27,700	10	Adjustments to income from Sche									10			
 Head of household, 	djusted gro	oss incom	ne					11		82,	200.			
\$20,800 If you checked	12	Standard deduction or itemized	deducti	ons (from s	Schedule .	A)					12			850.
any box under	13	Qualified business income deduct					5-A				13			
Standard Deduction,	14	Add lines 12 and 13									14		13,	850.
see instructions.	15	Subtract line 1/1 from line 11. If zer	o or less	ontor O	This is we	Sur #	avahla incom				15		68	350

Form 1040 (202)	3)						_		Page Z	
Tax and	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	3 🗌		16	10,340.	
Credits	17	Amount from Schedule 2, line	3					17		
	18	Add lines 16 and 17							10,340.	
	19	Child tax credit or credit for o	ther 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	10,340.	
	23	Other taxes, including self-em	nployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is ye	our total tax					24	10,340.	
Payments	25	Federal income tax withheld f	rom:							
•	а	Form(s) W-2				25a 13	3,436.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	13,436.	
If you have a	26	2023 estimated tax payments	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 Schedule 8812								
	29	American opportunity credit for	rom Form 8863	8, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15								
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. Th	ese are your to	tal payments				33	13,436.	
Refund	34	If line 33 is more than line 24,	subtract line 2	4 from line 33.	This is the amour	nt you overpaid		34	3,096.	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here [3,096.	
Direct deposit?	b	Routing number 1 1 1				Checking	Savings			
See instructions.	d	Account number 4 8 8	0 5 6 4	3 9 3 4	4 4					
	36	Amount of line 34 you want ap	pplied to your	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	· · ·	_	-		38		31		
Third Dort		Estimated tax penalty (see inso you want to allow another								
Third Party Designee		structions	•				omplete	below.	⊠ No	
Designee	De	signee's		Phone			onal ident			
	na	me		no.		num	ber (PIN)			
Sign		der penalties of perjury, I declare that lief, they are true, correct, and comp								
Here	Yo	ur signature		Date Your occupation				e IRS se	nt you an Identity	
									IN, enter it here	
Joint return?					SOFTWARE E					
See instructions. Keep a copy for your records.		Spouse's signature. If a joint return, both must s		Date	Spouse's occupati	on	Ider	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)		
	Ph	one no. (314) 938-7000		Email address	PRATHIPATIES	SWAR@GMAIL.C	OM			
Deid	Pre		Preparer's signat	ure		Date	PTIN		Check if:	
Paid	SYAN	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/24/2024	P0208	2703	Self-employed	
Preparer Use Only	Fir	m's name GLOBAL TAX	ES LLC			•			(678) 965-9522	
Use Only	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firn	n's EIN	84-3171965	
<u> </u>		40406 1 1 11 11 11					'		- 1040	

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

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

YESWANTH ESWAR PRATHIPATI

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

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

Your social security number 486-69-9948

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	-11, 205
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	
0	Combine lines 1 through 7 and 9. This is your additional income. Enter		1	
	1040, 1040-SR, or 1040-NR, line 8		10	-11,205

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	04			
_1	· · · · · · · · · · · · · · · · · · ·	24c		_	
d		24d			
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e			
f		24f			
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)	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				
	-	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			
05					
25	Total other adjustments. Add lines 24a through 24z	 E		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income .	. ∟nter	nere and on		
	Form 1040, 1040-SR, or 1040-NR, line 10			26	

SCHEDULE D (Form 1040)

Department of the Treasury

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**

Interna	al Revenue Service	Go to www.irs.gov/ScheduleD fe	or instructions and	the latest informati	on.		Sequence No. 12
	(s) shown on return SWANTH ESWAR	PRATHIPATI				ur social se	ecurity number 9948
-		y investment(s) in a qualified opportunity	_	-	⊠ No		
If "Ye	es," attach Form 8	3949 and see its instructions for additiona	al requirements for	r reporting your ga	in or loss	5.	
Pa	rt I Short-Te	erm Capital Gains and Losses—Ge	nerally Assets I	Held One Year o	r Less	(see ins	tructions)
lines This	below.	ow to figure the amounts to enter on the er to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjust to gain or Form(s) 89	ments loss from 149, Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result
	Totals for all sho 1099-B for which which you have However, if you	ort-term transactions reported on Form basis was reported to the IRS and for e no adjustments (see instructions). choose to report all these transactions ave this line blank and go to line 1b.			line 2, co	olumn (g)	with column (g)
1b	Totals for all tran Box A checked	sactions reported on Form(s) 8949 with					
2	Totals for all tran Box B checked	sactions reported on Form(s) 8949 with	3.	0.			3.
3	Totals for all tran	sactions reported on Form(s) 8949 with					
4	Short-term gain f	rom Form 6252 and short-term gain or (l	oss) from Forms 4	684, 6781, and 88	24 .	. 4	
5		gain or (loss) from partnerships,	S corporations,	estates, and tr	usts fro 	m . 5	
6	Short-term capita Worksheet in the	al loss carryover. Enter the amount, if an e instructions	-		_	er . 6	()
7	g- . 7	3.					
Par	t II Long-Te	rm Capital Gains and Losses – Ger	nerally Assets H	leld More Than	One Ye	ar (see	instructions)
lines	below.	ow to figure the amounts to enter on the	(d) Proceeds	(e) Cost	(ç Adjust to gain or	ments	(h) Gain or (loss) Subtract column (e) from column (d) and
This whol	form may be easi e dollars.	er to complete if you round off cents to	(sales price)	(or other basis)	Form(s) 89 line 2, co	49, Part II,	combine the result with column (g)
8a	1099-B for which which you have However, if you	g-term transactions reported on Form basis was reported to the IRS and for e no adjustments (see instructions). choose to report all these transactions ave this line blank and go to line 8b.					
8b	Totals for all tran	sactions reported on Form(s) 8949 with					
9	Totals for all tran	sactions reported on Form(s) 8949 with					
10	Totals for all tran Box F checked.	sactions reported on Form(s) 8949 with					
11		4797, Part I; long-term gain from Forms I, 6781, and 8824				s) . 11	
		in or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	lule(s) K-	1 12	
	Worksheet in the					. 14	()
15	Net long-term of	apital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	to Part	Ш	

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 3. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 X Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

<u>8949</u>

Department of the Treasury

Internal Revenue Service

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

Name(s) shown on return YESWANTH ESWAR PRATHIPATI Social security number or taxpayer identification number 486-69-9948

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 reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	d to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(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	3.	0.			3.
2 Totals. Add the amounts in column negative amounts). Enter each total Schedule D, line 1b (if Box A above the page is checked) or line 2 (if Box A)	al here and ince is checked), lir	lude on your ne 2 (if Box B	3	0			3

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,

Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Your social security number 486-69-9948 YESWANTH ESWAR PRATHIPATI Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40. Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions . ☐ Yes ☐ No 1a Physical address of each property (street, city, state, ZIP code) 4-21-45/A, CHAITANYAPURI 3RD LANE, SAIBABA ROAD GUNTUR, ANDHRA PRADESH IN 522007 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 650. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 780. 7 Cleaning and maintenance . . . 7 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,845. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 3,254. 14 Repairs 4,122. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,854. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 11,855. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198 21 -11,205. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 11,205.) 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 23d Total of all amounts reported on line 18 for all properties 11,855. 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 11,205. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on

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-11,205.

Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2