# 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

Submi	ssion Identification Number (SID)		·					
Taxpaye	er's name	Social securit	Social security number					
RADI	HA YASASWINI UPPALA	835-07-9246						
Spouse'	s name	Spouse's soc	ial seci	ırity nun	nber			
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	year you a	re au	thorizii	ng.)			
	whole dollars only on lines 1 through 5.	, ,			<u> </u>			
Note:	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.							
1	Adjusted gross income		1		98,3	373.		
2	Total tax		2		13,9	903.		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3			<u>379.</u>		
4	Amount you want refunded to you		4		2,4	<u> 176.</u>		
5 Part	Amount you owe		5	OUR PO	turn	1		
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended)							
to send for any Agent t paymen authoriz paymen busines taxes t persona	original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmid my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejectled in 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 indinated from the financial institution account indinated 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 the I.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requises 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 pal identification number (PIN) below is my signature for the income tax return (original or amended) I arnic Funds Withdrawal Consent.	ction of the tr S. Treasury are cated in the ta n to debit the the authorizatests must be processing of ayment. I furt	ansmised the control of the control	ssion, (besignate paration to this a for revoluted no ectronic sknowled)	ted Fired ted Fired Fire	reason nancial rare for nt. This ncel) a than 2 nent of nat the		
					$\neg$			
Тахра	yer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate in the state of	7 DINI 7	9 2	2 4 (	6	ne my		
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	Ent		digits, ber	ut	as my		
	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 <b>and</b> your return is filed using the Practitioner PIN metholelow.							
Your s	ignature ▶ Date ▶							
Spous	se's PIN: check one box only							
	I authorize to enter or generate	nv PIN				as my		
	ERO firm name	Ent		digits, b	ut	.oy		
	signature on the income tax return (original or amended) I am now authorizing.			r all zero				
	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 <b>and</b> your return is filed using the Practitioner PIN methology.							
Spous	e's signature ▶ Date ▶							
	Practitioner PIN Method Returns Only—continue below							
Part	Certification and Authentication — Practitioner PIN Method Only							
FRO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 4 9	6 6	1 9	8	9		
		Don't ente						
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 subm ments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Providers of In	tting this retu	rn in a	accorda	nće w			
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						

# Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning				, 2023,	20	See separate instructions.				
Your first name	and i	niddle initial						our identifying number		
					(see instructions)					
RADHA YAS	SASV	INI	UPPA	LA			835-0	7-9246		
Home address	(numl	per and street). If you have a P.O. box	, see ins	tructions.		•		Apt. no.		
17112 DEE	R I	RAIL								
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code		
ALPHARETT	'A					GA	3	0004		
Foreign country	nam nam	e	Foreigr	n province/state/county		Foreign p	ostal code			
Filing		Single	aratelv (N	MFS) Qualifvir	ng surviving spouse (C	OSS)	☐ Estat	e 🗌 Trust		
Status		you checked the QSS box, enter the				,				
Check only		,		, , , , ,	Ź					
one box.			. ,							
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a t					(b) sell, ex			
<b>Dependents</b>				(2) 5		(4) Che	ck the box if	qualifies for (see inst.):		
(see instructions)	:	(1) First name Last name		(2) Dependent's identifying number	(3) Relationship to you	Child	tax credit	Credit for other dependents		
		(i) i i i i i i i i i i i i i i i i i i		, 0	(4)					
If more than four							П			
dependents, see instructions and							Ī			
check here										
Income	1a	Total amount from Form(s) W-2, box	x 1 (see i	nstructions)			1a	109,409.		
Effectively	b	Household employee wages not rep	orted on	Form(s) W-2			1b			
Connected	С	Tip income not reported on line 1a (	see instr	uctions)			1c			
With U.S.	d	Medicaid waiver payments not repo	rted on F	Form(s) W-2 (see instruct	tions)		1d			
Trade or	е	Taxable dependent care benefits from	m Form	2441, line 26			1e			
Business	f	Employer-provided adoption benefit	ts from F	form 8839, line 29 .			1f			
Attach	g	Wages from Form 8919, line 6					1g			
Form(s) W-2,	h	Other earned income (see instruction	1h							
1042-S,	i	Reserved for future use			<u>li</u>					
SSA-1042-S, RRB-1042-S,	J	Reserved for future use					1j			
and 8288-A here. Also	k	Total income exempt by a treaty from line 1(e)		,	tem L, <b>1k</b>					
attach	Z	Add lines 1a through 1h					1z	109,409.		
Form(s) 1099-R if	<b>2</b> a	Tax-exempt interest 2a	_	<b>b</b> Tax	able interest		2b			
tax was	3a	Qualified dividends 3			dinary dividends		3b			
withheld.	4a	IRA distributions 4			able amount		4b			
If you did not get a Form	5a	Pensions and annuities <u>5a</u>	_		able amount					
W-2, see	6	Reserved for future use					6			
instructions.	7	Capital gain or (loss). Attach Schedu	•		•			11 00		
	8	Additional income from Schedule 1						-11,036.		
9 Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8. This is your <b>total effectively connected income</b>								98,373.		
	10	Adjustments to income from Sched income					10			
	11	Subtract line 10 from line 9. This is y	your <b>adju</b>	ısted gross income			11	98,373.		
	12	<b>Itemized deductions</b> (from Schedudeduction (see instructions)						13,850.		
	13a	Qualified business income deductio			1 1					
	b	Exemptions for estates and trusts o								
	С	Add lines 13a and 13b	• .	•	· · · · · · · · · · · · · · · · · · ·		13c			
	14	Add lines 12 and 13c					14	13,850.		
	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your <b>ta</b> :	xable income	<u> </u>	15	84,523.		

Form 1040-NR (	2023)				Page 2				
Tax and	16	Tax (see instructions). Check if any from Form(s): 1  8814 2  497	2 <b>3</b> 🗌		13,903.				
Credits	17	Amount from Schedule 2 (Form 1040), line 3	· · · <u>  1</u>	17 0.					
	18	Add lines 16 and 17			13,903.				
	19	Child tax credit or credit for other dependents from Schedule 8812 (Form 10		19					
	20	Amount from Schedule 3 (Form 1040), line 8			20				
	21	Add lines 19 and 20		<del></del>	21				
	22	Subtract line 21 from line 18. If zero or less, enter -0		2	13,903.				
	23a	23a Tax on income not effectively connected with a U.S. trade or business from Schedule NEC (Form 1040-NR), line 15							
	b	Other taxes, including self-employment tax, from Schedule 2 (Form 1040),							
		line 21	23b						
	С	Transportation tax (see instructions)	23c						
	d	Add lines 23a through 23c			3d				
-	24	Add lines 22 and 23d. This is your <b>total tax</b>		2	13,903.				
<b>Payments</b>	25	Federal income tax withheld from:							
	а	Form(s) W-2	<b>25a</b> 16	5,379.					
	b	Form(s) 1099	25b						
	С	Other forms (see instructions)	25c						
	d	Add lines 25a through 25c		<u>2</u>	5d 16,379.				
	е	Form(s) 8805		2	5e				
	f	Form(s) 8288-A		2	25f				
	g	Form(s) 1042-S		<u>2</u>	5g				
	26	2023 estimated tax payments and amount applied from 2022 return		2	26				
	27	Reserved for future use	27						
	28	Additional child tax credit from Schedule 8812 (Form 1040)	28						
	29	Credit for amount paid with Form 1040-C	29						
	30	Reserved for future use	30						
	31	Amount from Schedule 3 (Form 1040), line 15	31						
	32	Add lines 28, 29, and 31. These are your total other payments and refunda	· · · <u> </u>	32					
	33	Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your <b>total payments</b> .			16,379.				
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amour	•		2,476.				
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, chec		5a 2,476.					
Direct deposit? See instructions.	b		Savings						
See instructions.	d	Account number 1 5 2 3 2 1 9 6 6 1 4 4							
	е	If you want your refund check mailed to an address outside the United State	page 1,						
		enter it here.							
	36	Amount of line 34 you want applied to your 2024 estimated tax	36						
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> .			_				
You Owe	00	For details on how to pay, go to www.irs.gov/Payments or see instructions .			37				
	38	Estimated tax penalty (see instructions)	38		below. X No				
Third Party	•	ou want to allow another person to discuss this return with the IRS? See instru		es. Complete					
Designee	Desig name	no		nal identificat er (PIN)	cion				
		penalties of perjury, I declare that I have examined this return and accompanying schedu	, ,	est of my knowledge and					
		they are true, correct, and complete. Declaration of preparer (other than taxpayer) is base							
Sign	Your	signature Date Your occupation		If the IF	RS sent you an Identity				
Here				Protect	ion PIN, enter it here				
		RADHAYASASWINI	UPPALA@GMAIL.(	COM (see ins	it.)				
	Phone								
Paid	Prepa	Preparer's signature	Date	PTIN	Check if:				
Preparer	VENKA	ATA SAI PAVAN KUMAR DUDIPALLI VENKATA SAI PAVAN KUMAR DUDIPALLI		P024708	33 Self-employed				
Use Only	Firm's	s name GLOBAL TAXES LLC							
	Firm's	Firm's EIN	88-2145487						

BAA

# 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

RADHA YASASWINI UPPALA

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.

Your social security number 835-07-9246

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. Atta	ach Schedule E .	5	-11,036.
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		
I	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 <b>additional income</b> . Ente	r here and on Form	10	-11 036

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				
16	Self-employed SEP, SIMPLE, and qualified plans				
17	Self-employed health insurance deduction				
18	Penalty on early withdrawal of savings				
19a	Alimony paid				
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				Į.
20	IRA deduction				
21	Student loan interest deduction				
22	Reserved for future use				
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	the state of the s	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				
	<del>-</del>	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			Į.
25	Total other adjustments. Add lines 24a through 24z				
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Form 1040, 1040-SR, or 1040-NR, line 10	. Enter	r here and	on <b>26</b>	
	1 OITH 1070, 1070-011, 01 1070-1111, 11110-10	• •		.   20	

#### **SCHEDULE NEC** (Form 1040-NR)

## Tax on Income Not Effectively Connected With a U.S. Trade or Business

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

Attach to Form 1040-NR. Go to www.irs.gov/Form1040NR for instructions and the latest information. Sequence No. 7B

Your identifying number

835-07-9246 RADHA YASASWINI UPPALA Enter amount of income under the appropriate rate of tax. See instructions. (d) Other (specify) **Nature of Income** (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c 3 4 5 Real property income and natural resources royalties 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings \_\_\_\_\_ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) . . . . . . . . . . . . 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and (f) LOSS 16 (a) Kind of property and description (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources subtract (d) from (e). descriptive details not shown below) subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). 18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-18 Form 4797, or both.

## **SCHEDULE OI** (Form 1040-NR)

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L

1.

2. 3.

## Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information.

OMB No. 1545-0074

Department of the Treasury Attachment Answer all questions. Sequence No. 7C Internal Revenue Service Name shown on Form 1040-NR Your identifying number 835-07-9246 RADHA YASASWINI UPPALA Of what country or countries were you a citizen or national during the tax year? INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . . . ⊠ No D Were you ever: X No 1. A U.S. citizen? Yes X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1 X No F Yes If you answered "Yes," indicate the date and nature of the change: G List all dates you entered and left the United States during 2023. See instructions. Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date departed United States Date entered United States Date departed United States mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 \_\_\_\_\_\_, 2022 \_\_\_\_\_\_, and 2023 \_\_\_\_\_\_. Did you file a U.S. income tax return for any prior year? . . . . . . . . . . . . . . X Yes ☐ No ı If "Yes," give the latest year and form number you filed: 1040NR X No ☐ Yes J

If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a 

If "Yes," did you use an alternative method to determine the source of this compensation? . . . . . . . . . . .

complete (1) through (3) below. See Pub. 901 for more in	nformation on tax treati	es.				
Enter the name of the country, the applicable tax treaty ar amount of exempt income in the columns below. Attach F			med the treaty benefit, a	and t		
(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year			
(e) Total. Enter this amount on Form 1040-NR, line 1k. I	Do not enter it anywher	re else on line 1				
Were you subject to tax in a foreign country on any of th	e income shown in 1(d	) above?	🗌 Yes	No		
Are you claiming treaty benefits pursuant to a Competer	nt Authority determinati	on?	🗌 Yes 🛭	⊠ No		
If "Yes," attach a copy of the Competent Authority deter	mination letter to your	return.				
Check the applicable box if:						
This is the first year you are making an election to treat in	ncome from real prope	rty located in the United S	tates as effectively con	nect		

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United 

Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country,

□No

X No

No

nе

Yes

Yes

Yes

## **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.

Your social security number

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

OMB No. 1545-0074

RADI	HA YASASWINI UPPALA						835-0	7-9246	
Par									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you a	are an indi	vidual, rep	ort farm
_	rental income or loss from <b>Form 4835</b> on page 2, line 40.		<b>F</b> () 4	2000					57.11
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <b>□</b> Ye	s U No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	BOPPANA'S SAI RAM RESIDE GUDIVADA ANDH	IRA I	PRADESH	IIN	5213	01			
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate properabove, report the number of fair						Person Da	QJV	
Α	above, report the number of rain personal use days. Check the Qu			Α		Days 364	Da	0	
B	if you meet the requirements to f	ile as	a '	B		304			
C	qualified joint venture. See instru	ictions	s	C					
	of Duomouthy			C					
	of Property: Single Family Residence 3 Vacation/Short-Term Ren	to!	Eland		7	Self-Rental			
	9	ıaı	5 Land				د حاند		
2	Multi-Family Residence 4 Commercial		6 Roya	lities	0	Other (desci	nbe)		
						Properti	es:		
Incor	ne:			Α		В			С
3	Rents received	3		5	20.				
4	Royalties received	4							
Ехре	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,6	80.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1,3	50.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		2,6	56.				
15	Supplies	15		2,5	95.				
16	Taxes	16							
17	Utilities	17		3,2	75.				
18	Depreciation expense or depletion	18							
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20		11,5	56.				
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 <b>Form 6198</b>	21	-	-11,0	36.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22		11,03	36.)	(	)	(	
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a		520.		
b	Total of all amounts reported on line 4 for all royalty prop				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				
е	Total of all amounts reported on line 20 for all properties				23e	11	,556.		
24	Income. Add positive amounts shown on line 21. Do not	inclu	de any los	sses			. 24		
25	Losses. Add royalty losses from line 21 and rental real estate		-		nter to	tal losses her	e <b>25</b>	(	11,036.
26	Total rental real estate and royalty income or (loss).	Comb	ine lines 2	24 and	25. E	nter the resu	ult		
	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	nount	in the tot	tal on li	ne 41	on page 2	. 26		-11,036.

**Passive Activity Loss Limitations** 

See separate instructions.

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

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

	2023 Attachment Sequence No. 858					
Identifying number						

OMB No. 1545-1008

RADHA YASASWINI UPPALA 835-07-9246 Part I 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) 1a Activities with net income (enter the amount from Part IV, column (a)) . . . **b** Activities with net loss (enter the amount from Part IV, column (b)) . . . . 1b 11,036. c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . 1d -11,036. **All Other Passive Activities** 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) . . . . 2b **c** Prior years' unallowed losses (enter the amount from Part V, column (c)) . 2c ( 2d Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules 3 -11,036. If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 . . . . . . . 11,036. 5 Enter \$150,000. If married filing separately, see instructions . . . . . . 150,000. 6 Enter modified adjusted gross income, but not less than zero. See instructions 109,409. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 7 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 20,296. 11,036. Part III **Total Losses Allowed** 10 0. 10 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find 11,036. 11 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Overall gain or loss Current year Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) loss (line 1c) (line 1b) 0. 11,036. BOPPANA'S SAI RAM RESIDE 11,036.

11,036.

Total. Enter on Part I, lines 1a, 1b, and 1c

Form 8582 (2023) Page **2** 

Part V C	Complete This Part Before	e P	art I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instru	ctions.			•
N	lana and analisates		Currer	nt year		Prior y	ears/	Overa	ıll ga	ain or loss
N	lame of activity	(a) Net income (line 2a)		<b>(b)</b> (li	Net loss ne 2b)	(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss
									_	
	Part I, lines 2a, 2b, and 2c	4 1-	Chausa an F	) II	Lina O O		-ti			
Part VI U	Jse This Part if an Amoun			art II,	Line 9. 5	ee instru	ctions.			
N	lame of activity	an to I	m or schedule d line number be reported on the instructions)	(a	) Loss	(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).
BOPPANA'S	SAI RAM RESIDE		E Ln 22		11,036.	1.000	00000	11,03	6.	0.
Total <u>.</u>					11,036.	1.0	00	11,03	6.	0.
Part VII A	Illocation of Unallowed L	oss			S.		_			
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	(b) Ratio		(c) Unallowed loss	
Total								1.00		
Part VIII A	Allowed Losses. See instru	ıcti								
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	(a) Loss (b) U		Inallowed loss		(c) Allowed loss
Total										