Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

	5				
Submis	ssion Identification Number (SID)				
Taxpaye	pr's name	Social secu	ity num	ber	
SAI	SRIJA VUJJINI	487-41	-787	7	
Spouse's	s name	Spouse's so	cial sec	urity numbe	r
Dort	Tax Return Information — Tax Year Ending December 31, 20.	22 (Enter year year	oro ou	thorizina	1
Part	whole dollars only on lines 1 through 5.	23 (Enter year you	are au	unonzing.	<u>)</u>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
	Adjusted gross income		1 1	109	,357.
	Total tax		2		,326.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,422.
	Amount you want refunded to you		4		,096.
_ 5	Amount you owe		5		
Part I	Taxpayer Declaration and Signature Authorization (Be sure you	get and keep a co	oy of y	your retu	rn)
my knoreturn (of to send for any Agent to payment authorize payment business taxes to personal	penalties of perjury, I declare that I have examined a copy of the income tax return (original copyledge and belief, it is true, correct, and complete. I further declare that the amounts in original or amended) I am now authorizing. I consent to allow my intermediate service providing return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or readelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorized initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution and to finy federal taxes owed on this return and/or a payment of estimated tax, and the financiation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent of the true of the payment (settlement) date. I also authorize the financial institutions involved to receive confidential information necessary to answer inquiries and resolve issues related all identification number (PIN) below is my signature for the income tax return (original or and the force of	Part I above are the ander, transmitter, or elect ason for rejection of the lorize the U.S. Treasury account indicated in the scial institution to debit the toterminate the authorizellation requests must be blowed in the processing ded to the payment. I fu	rounts ronic re transmi and its tax prepe entry zation. The receipt the enther ac	from the in- turn original ssion, (b) the designated paration soot to this accordance To revoke (ived no late lectronic paracknowledge	come tax tor (ERO) ne reason Financial ftware for ount. This (cancel) a er than 2 ayment of e that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only				
X		generate my PIN	. 7	8 7 7	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	E		digits, but er all zeros	as my
	I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.				
Your si	ignature ▶	Date ►			
Spous	e's PIN: check one box only				
Opous		generate my PIN			as my
Ш	ERO firm name		nter five	digits, but	as my
	signature on the income tax return (original or amended) I am now authorizing.	d	on't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amend if you are entering your own PIN and your return is filed using the Practitioner below.				
Spouse	e's signature ►	Date ►			
	Practitioner PIN Method Returns Only—contin				
Part I	Certification and Authentication — Practitioner PIN Method Only	/			
ERO's	EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9 Don't er	6 0	8 2 7 eros	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual zed to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Practice.	I am submitting this re	turn in a	accordance	
ERO's	signature ►	Date ►			
	ERO Must Retain This Form — See Instru				
	Don't Submit This Form to the IRS Unless Reques	sted To Do So			

E1040-NR 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			ing, 2023, ending, 20, 20					See separate instructions.
Your first name	and i	niddle initial	Last na	ame	Your iden	tifying number		
					(see instru	ictions)		
SAI SRIJA	A		VUJJ	INI			487-4	1-7877
Home address	(num	per and street). If you have a P.O. box	, see ins	tructions.				Apt. no.
609 ST PA	UL	AVE, UNIT 612						
City, town, or p	ost o	fice. If you have a foreign address, al	so comp	lete spaces below.		State	ZI	P code
LOS ANGEI	ES					CA	9	0017
Foreign country	nam nam	e	Foreign	n province/state/county		Foreign po	ostal code	
Filing		Single	arately (N	∕IFS) □ Qualifvii	ng surviving spouse (C	088)	☐ Estat	e 🗌 Trust
Status		ou checked the QSS box, enter the			· · · ·	,		
Check only		,			,			
one box.								
Digital Assets		ny time during 2023, did you: (a) rece rwise dispose of a digital asset (or a f						change, or Yes No
Dependents						(4) Chec	ck the box if	qualifies for (see inst.):
(see instructions)	1	(A) E: .		(2) Dependent's	(0) 5 1 11 11 1	Child	tax credit	Credit for other
		(1) First name Last name		identifying number	(3) Relationship to you	1		dependents
If more than four								
dependents, see								
instructions and check here							<u> </u>	
	10	Total amount from Form(s) W-2, box	, 1 (200 i	notructions)			10	122,332.
Income	1a b	Household employee wages not rep	•	,			1a 1b	122,332.
Effectively Connected	C	Tip income not reported on line 1a (` '			1c	
With U.S.	d	Medicaid waiver payments not repo		,			1d	
Trade or	e	Taxable dependent care benefits fro		` ' ` ` `	,		1e	
Business	f	Employer-provided adoption benefit		•			1f	
Dusiness	g	Wages from Form 8919, line 6		·			1g	
Attach	h	Other earned income (see instructio					1h	
Form(s) W-2, 1042-S,	i	Reserved for future use			1i			
SSA-1042-S,	j	Reserved for future use					1j	
RRB-1042-S, and 8288-A	k	Total income exempt by a treaty from	n Sched	ule OI (Form 1040-NR), i	tem L,			
here. Also		line 1(e)			1k			
attach	z	Add lines 1a through 1h					1z	122,332.
Form(s) 1099-R if	2a	Tax-exempt interest 2a	_		cable interest		2b	
tax was	3a	Qualified dividends 3a	3	2. b Ord	dinary dividends		3b	2.
withheld.	4a	IRA distributions 4a			cable amount		4b	
If you did not get a Form	5a	Pensions and annuities 5a			cable amount		5b	
W-2, see	6	Reserved for future use					6	
instructions.	7	Capital gain or (loss). Attach Schedu	•		·			-9.
	8	Additional income from Schedule 1						<u>-12,968.</u>
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and		•				109,357.
	10	Adjustments to income from Schedincome	,	,.	,		10	
	11	Subtract line 10 from line 9. This is y						109,357.
	12	Itemized deductions (from Schedu						•
		deduction (see instructions)						13,850.
	13a	Qualified business income deductio						
	b	Exemptions for estates and trusts o	nly (see i	instructions)	13b			
	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 ta	xable income		15	95 , 507.

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	814 2 49	972 ;	3 🗌		16	16,326.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	16,326.
	19	Child tax credit or credit for other	er depende	ents from Sched	lule 8812 (Form	1040)			19	
	20	Amount from Schedule 3 (Form	1040), line	8					20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18. If z	ero or less	s, enter -0					22	16,326.
	23a	Tax on income not effectively co	nnected w	rith a U.S. trade	or business from	ı				
		Schedule NEC (Form 1040-NR),	line 15 .			23a				
	b	Other taxes, including self-empl	oyment ta	x, from Schedu	le 2 (Form 1040)	,				
		line 21				23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is yo	ur total ta :	x		.,			24	16,326.
Payments	25	Federal income tax withheld from	m:							
	а	Form(s) W-2				25a	2.	2,422.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c							25d	22,422.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar				1			26	
	27	Reserved for future use				27			_	
	28	Additional child tax credit from S		,	•	28			_	
	29	Credit for amount paid with Forr				29 30				
	30	Reserved for future use								
	31	Amount from Schedule 3 (Form								
	32	Add lines 28, 29, and 31. These	32							
	33	Add lines 25d, 25e, 25f, 25g, 26							33	22,422.
Refund	34	If line 33 is more than line 24, su				•	=		34	6,096.
D	35a	Amount of line 34 you want refu							35a	6,096.
Direct deposit? See instructions.	b	Routing number 3 2 2 2			c Type:	K Checl	king ∐ ∶ ∶	Savings		
	d	Account number 8 8 8 5			1 11 10.	Щ.	<u>. </u>			
	е	If you want your refund check m								
	26	enter it here.		0004 a atima		36			-	
A manuat	36 37	Amount of line 34 you want app Subtract line 33 from line 24. Th				30				
Amount You Owe	31	For details on how to pay, go to		-					37	
rou Owe	38	Estimated tax penalty (see instru	_	-		38			37	
Third		u want to allow another person to				_		es. Compl	ete he	low. 🗵 No
Party	Desig	·	diocaco t	Phone				nal identifi		
Designee	name			no	,			er (PIN)	Cation	
		penalties of perjury, I declare that I ha			ccompanying sche	edules and			e best c	of my knowledge and
_		they are true, correct, and complete. I								
Sign	Your	signature		Date	Your occupation	on		If the	RS s	ent you an Identity
Here				· ·						PIN, enter it here
					SOFTWARE	ENGIN	IEER	(see	inst.)	
	Phone		Dronger	Email address				DTIN		
Paid		rer's name		's signature	a. a	Date		PTIN		Check if:
Preparer		SYAM PRIYA RAM SAGAR GUPTA SYAM PRIYA RAM SAGAR GUPTA 04/08/2024							2703	Self-employed
Use Only		s name GLOBAL TAXES						Phone n		78) 965-9522
	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm's E									4-3171965

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

SAI SRIJA VUJJINI

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 487-41-7877

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	ach Schedule E .	5	-12,968.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a ()	
b	Gambling	8b		
C	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()	
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q	_	
r	Scholarship and fellowship grants not reported on Form W-2	8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s ()	
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t	_	
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-12 , 968.

Page **2** Schedule 1 (Form 1040) 2023

Par	Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee	e-basis	government		
	officials. Attach Form 2106			12	
13	Health savings account deduction. Attach Form 8889			13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	
15	Deductible part of self-employment tax. Attach Schedule SE			15	
16	Self-employed SEP, SIMPLE, and qualified plans			16	
17	Self-employed health insurance deduction			17	
18	Penalty on early withdrawal of savings			18	
19a	Alimony paid			19a	
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	
21	Student loan interest deduction			21	
22	Reserved for future use			22	
23	Archer MSA deduction			23	
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a			
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b			
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c			
d	Reforestation amortization and expenses	24d		_	
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e		_	
f	Contributions to section 501(c)(18)(D) pension plans	24f		-	
g	Contributions by certain chaplains to section 403(b) plans	24g		-	
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h		-	
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect tax law violations	04:			
		24i		-	
j	Housing deduction from Form 2555	24j		-	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form	041-			
_	1041)	24k			
Z	Other adjustments. List type and amount:	24z			
25				25	
25 26	Total other adjustments. Add lines 24a through 24z			25	_
20	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 1 (Form 1040) 2023
	BAA	KEV 03/0	07/24 PRO	JUNEUU	ie i (Fulli 1040) 2023

SCHEDULE NEC (Form 1040-NR)

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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

Name shown on Form 1040-NR Your identifying number SAI SRIJA VUJJINI 487-41-7877 Enter **amount of income** under the appropriate rate of tax. See instructions.

	Nature of Income		(-) 100/	/L) 450/	(-) 000/	(d) Other	(specify)
	Nature of income		(a) 10%	(b) 15%	(c) 30%	%	%
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	1a					
b	Dividends paid by foreign corporations	1b					
С	Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2	Interest:						
а	Mortgage	2a					
b	Paid by foreign corporations	2b					
С	Other	2c					
3	Industrial royalties (patents, trademarks, etc.)	3					
4	Motion picture or TV copyright royalties	4					
5	Other royalties (copyrights, recording, publishing, etc.)	5					
6	Real property income and natural resources royalties	6					
7	Pensions and annuities	7					
8	Social security benefits	8					
9	Capital gain from line 18 below	9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а							
b	Winnings Losses	10c					
11	Gambling - Residents of countries other than Canada.						
	Note: Enter winnings only. Losses aren't allowed	11					
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)	13					
14	Multiply line 13 by rate of tax at top of each column	14					
15	Tax on income not effectively connected with a U.S. trade or business. Add colum					NR, line 23a 15	
	Capital Gains and Losses F	rom	Sales or Excha	nges of Proper	ty	1	
losses f	hy the capital gains and rom property sales or ges that are from sources the United States and not the capital gains and comproperty sales or ges that are from sources the United States and not the capital gains and gesting the capital gains and		(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	(g) GAIN If (d) is more than (e), subtract (e) from (d).
	ely connected with a U.S. s. Do not include a gain						
or loss	on disposing of a U.S. real						
gains a	y interest; report these and losses on Schedule D						
(Form 1	,						
exchan	property sales or ges that are effectively						
connec	ted with a U.S. business 17 Add columns (f) and (g) of line 16					()	
	18 Capital gain. Combine columns (f) and (g) of line 17	'. Ente	er the net gain here	e and on line 9 abo	ove. If a loss, ente	r -0 18	

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023

Attachment
Sequence No. 7C

Department of the Treasury Internal Revenue Service

Name sl	hown on Form 1040-NR				Your identifying	number					
SAI	SRIJA VUJJINI				487-41-7	877					
Α	Of what country or countries w	vere you a citizen or nation	al during the tax y	ear? INDIA							
В	In what country did you claim	residence for tax purpose	s during the tax ye	ear? United States							
С	Have you ever applied to be a	green card holder (lawful p	ermanent residen	t) of the United States? .		☐ Yes	⊠ No				
D	Were you ever:										
							⊠ No				
2.	A green card holder (lawful per	,				Yes	⊠ No				
_	If you answer "Yes" to (1) or (2										
Е	If you had a visa on the last of immigration status on the last of	day of the tax year. $_{\underline{F1}}$				_	_				
F	Have you ever changed your v If you answered "Yes," indicate	isa type (nonimmigrant sta e the date and nature of the	tus) or U.S. immig e change:	ration status?		☐ Yes	⊠ No				
G	List all dates you entered and left the United States during 2023. See instructions.										
	Note: If you're a resident of C				_						
	check the box for Canada or				☐ Mexico						
	Date entered United States	Date departed United Stat	es	Date entered United State		arted Unite	d States				
	mm/dd/yy	mm/dd/yy		mm/dd/yy	r	mm/dd/yy					
			 								
			 +								
н	Give number of days (including	vacation nonworkdays and	L	ware present in the United	Statos durina:						
••	2021				_						
I	Did you file a U.S. income tax					⊠ Yes	☐ No				
	If "Yes," give the latest year ar					_	_				
J	Are you filing a return for a trus					Yes	⊠ No				
	If "Yes," did the trust have a U.S. person, or receive a contr										
14		·				☐ Yes	□No				
K	Did you receive total compens					☐ Yes ☐ Yes	⊠ No □ No				
L	If "Yes," did you use an alternational Income Exempt From Tax—If			•			_				
	complete (1) through (3) below	. See Pub. 901 for more in	formation on tax tr	reaties.							
1.	Enter the name of the country, amount of exempt income in the				claimed the tre	eaty benefi	t, and the				
	(a) Cou	ntry	(b) Tax treaty arti	icle (c) Number of montle claimed in prior tax ye		nount of exe	•				
	(a) Total Entarthia amazint a	o Form 1040 ND 15-5 41- D	lo not ontor it are:	whore elec on line 1							
0	(e) Total. Enter this amount of Were you subject to tax in a fo		-			Yes	□No				
	Are you claiming treaty benefit					□ Yes	⊔ No ⊠ No				
٥.	If "Yes," attach a copy of the C		-			1 C S	∠ NU				
М	Check the applicable box if:	Joinpotont Authority determ	imation letter to y	oar roturn.							
	This is the first year you are may with a U.S. trade or business u										
2.	You have made an election in	, ,									
	States as effectively connected										

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**

Internal Revenue Service Name(s) shown on return Your social security number 487-41-7877 SAI SRIJA VUJJINI Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (g) line 2. column (a) 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 -9. 42. 51. Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -9. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -9. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . . . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 9.) 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.

8949

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 SAI SRIJA VUJJINI Social security number or taxpayer identification number

487-41-7877

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)

☐ (C) Short-term transactions	not reported	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 co	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)
	(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
Robinh	ood Securities LLC	01/01/23	12/31/23	42.	51.			-9.
negat Sche	s. Add the amounts in columns ive amounts). Enter each tota dule D, line 1b (if Box A above b is challed) at line 2 (if Box A)	al here and inc e is checked), lir	lude on your ne 2 (if Box B	42	51			_ a

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 SAI SRIJA VUJJINI 487-41-7877 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 . 1a Physical address of each property (street, city, state, ZIP code) 17-1-388/36, SRI SAI NILAY POORNODAYA COLONY SAIDABAD, HYDERABAD IN 500059 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 . 3 600. 4 4 Royalties received . **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 7 Cleaning and maintenance . . . 7 1,456. 8 Commissions 8 9 9 Insurance . . . 10 10 Legal and other professional fees 11 Management fees 11 1,000. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 14 3,861. 14 Repairs 3,278. 15 Supplies 15 16 16 Taxes 17 Utilities 17 3,973. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 13,568. 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 -12,968. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) -12,968.) 600. 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 13,568. 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 12,968. 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

26

-12**,**968.

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

Department of the Treasury

Passive Activity Loss Limitations

See separate instructions.

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

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

OMB No. 1545-1008 Attachment Sequence No. 858

Internal Revenue Service Name(s) shown on return Identifying number SAI SRIJA VUJJINI 487-41-7877 2023 Passive Activity Loss Caution: Complete Parts IV and V before completing Part I.

	Il Real Estate Activities With Active Participation (For the definition of active participation, see Special ance for Rental Real Estate Activities in the instructions.)		
1a	Activities with net income (enter the amount from Part IV, column (a)) 1a 0 .		
b	Activities with net loss (enter the amount from Part IV, column (b)) 1b (12,968.)		
С	Prior years' unallowed losses (enter the amount from Part IV, column (c)) 1c (
d	Combine lines 1a, 1b, and 1c	1d	-12,968.
All Ot	her Passive Activities		
2a	Activities with net income (enter the amount from Part V, column (a)) 2a		
b	Activities with net loss (enter the amount from Part V, column (b)) 2b (
С	Prior years' unallowed losses (enter the amount from Part V, column (c)) 2c (
d	Combine lines 2a, 2b, and 2c	2d	
3	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		
	normally used	3	-12,968.
	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	l. Instead, go to line 10.				
Par	t II Special Allowance for Rental Real Estate Activities With Active	Par	ticipation		
	Note: Enter all numbers in Part II as positive amounts. See instructions for	r an e	example.		
4	Enter the smaller of the loss on line 1d or the loss on line 3			4	12,968.
5	Enter \$150,000. If married filing separately, see instructions	5	150,000.		
6	Enter modified adjusted gross income, but not less than zero. See instructions	6	122,325.		
	Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0-on line 9. Otherwise, go to line 7.				
7	Subtract line 6 from line 5	7	27 , 675.		
8	Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing sepa	rately	, see instructions	8	13,838.
9	Enter the smaller of line 4 or line 8. If line 3 includes any CRD, see instructions .			9	12,968.
Par	t III Total Losses Allowed				
10	Add the income, if any, on lines 1a and 2a and enter the total			10	0.
11	Total losses allowed from all passive activities for 2023. Add lines 9 and 10. S	ee in:	structions to find		
	out how to report the losses on your tax return			11	12,968.
Par	Complete This Part Refore Part I Lines 1a 1b and 1c See inst	ructi	one		

Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

Name of activity	Currer	nt year	Prior years	Overall gain or loss			
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss		
17-1-388/36, SRI SAI NILAY	0.	12,968.			12,968.		
Total. Enter on Part I, lines 1a, 1b, and 1c	0.	12,968.					

Form 8582 (2023) Page **2**

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Part V	Complete This Part Before	e P	art I, Lines 2	a, 2b,	and 2c. S	ee instru	ctions.			
			Currer	nt year		Prior y	ears	Overa	ıll ga	ain or loss
	Name of activity	(a	Net income (line 2a)	(b) (li	Net loss ne 2b)	(c) Unal loss (lin		(d) Gain		(e) Loss
Total. Enter	on Part I, lines 2a, 2b, and 2c									
Part VI	Use This Part if an Amou	nt Is	s Shown on F	Part II,	, Line 9. S	ee instrud	ctions.			
	Name of activity	ar to	Form or schedule and line number to be reported on (see instructions)		ine number reported on (a) Loss (b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
17-1-388	3/36, SRI SAI NILAY		E Ln 22		12,968.	1.0000	0000	12,96	8.	0.
Total					12,968.	1.0	0	12,96	8	0.
Part VII	Allocation of Unallowed I	os	ses. See instr			1				
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	((b) Ratio) Unallowed loss
Total								1.00		
Part VIII	Allowed Losses. See instr	ucti	ions.							
	Name of activity		Form or sche and line nun to be reporte (see instruct	nber ed on	(a) l	_oss	(b) Unallowed loss		((c) Allowed loss
Total										