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

The state of the s				
Submission Identification Number (SID)				
Taxpayer's name	Social sec	urity numb	er	
PHANI RAM GUPTHA KANIKICHARLA	805-	78-8105		
Spouse's name			rity number	
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter year you	u are aut	horizing.)	
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	100.	485.
2 Total tax				365.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099				065.
4 Amount you want refunded to you				700.
5 Amount you owe		. 5		
Part II Taxpayer Declaration and Signature Authorization (Be sur	re you get and keep a c	opy of y	our returi	n)
my knowledge and belief, it is true, correct, and complete. I further declare that the amreturn (original or amended) I am now authorizing. I consent to allow my intermediate serv to send my return to the IRS and to receive from the IRS (a) an acknowledgement of rece for any delay in processing the return or refund, and (c) the date of any refund. If applicab Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial inspayment of my federal taxes owed on this return and/or a payment of estimated tax, and tauthorization is to remain in full force and effect until I notify the U.S. Treasury Financia payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payme business days prior to the payment (settlement) date. I also authorize the financial institut taxes to receive confidential information necessary to answer inquiries and resolve issupersonal identification number (PIN) below is my signature for the income tax return (original Electronic Funds Withdrawal Consent.	ice provider, transmitter, or ele- cipt or reason for rejection of the cle, I authorize the U.S. Treasure stitution account indicated in the financial institution to debit al. Agent to terminate the authorized cancellation requests must tions involved in the processing uses related to the payment.	ctronic retuent transmissing and its defended and its def	urn originato sion, (b) the lesignated F aration softwo this accou o revoke (ca red no later ectronic pay knowledge 1	or (ERO) reason inancial ware for int. This ancel) a than 2 ment of that the
Taxpayer's PIN: check one box only				
	enter or generate my PIN	8 8 1	0 5	as my
ERO firm name		Enter five of don't enter	digits, but	as my
signature on the income tax return (original or amended) I am now authout I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN and your return is filed using the Pracebelow.	r amended) I am now author			
Your signature ▶	Date ▶			
Spouse's PIN: check one box only				
	enter or generate my PIN			as my
ERO firm name	enter or generate my r in	Enter five of		as my
signature on the income tax return (original or amended) I am now author	orizing.	don't enter	all zeros	
I will enter my PIN as my signature on the income tax return (original or if you are entering your own PIN and your return is filed using the Pracebelow.				
Spouse's signature ►	Date ►			
Practitioner PIN Method Returns Only—				
Part III Certification and Authentication — Practitioner PIN Method	od Only			
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected		6 0 enter all zei	8 2 7	1
	2011 (
I certify that the above numeric entry is my PIN, which is my signature for the electronic authorized to file for tax year indicated above for the taxpayer(s) indicated above. I conrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS	firm that I am submitting this	return in a	ccordance v	
ERO's signature ▶	Date ►			
ERO Must Retain This Form — See				
Don't Submit This Form to the IRS Unless I				

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



£1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545-	0074	IRS Use Only	—Do not v	vrite or staple in this space.		
For the year Jar	See se	See separate instructions.											
Your first name	and mi	iddle initial	Last na	ame						Your so	ocial security number		
PHANI RA	AM GU	JPTHA	KAN	IKICHA	ARLA					805	78 8105		
If joint return, s	pouse's	s first name and middle initial	Last na	ame						Spouse	's social security numbe		
Home address	(numbe	er and street). If you have a P.O. box, see	instruct	ions.				A	pt. no.	Preside	ential Election Campaig		
_141 BEDI	FORD	ST									here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete:	spaces be	low.	Sta	te	ZIP c	ode		spouse if filing jointly, want \$3 to go to this fund. Checking a		
BURLING	CON					MA	A	018	03		low will not change		
Foreign country	y name			Foreign p	rovince/state/o	count	ty	Foreig	n postal code	your ta	x or refund.		
Filing Status	, X	Single					Head of ho	useh	old (HOH)				
_	, <u> </u>	Married filing jointly (even if only or	ne had	income)					(- ,				
Check only one box.		Married filing separately (MFS)		,			☐ Qualifying	surviv	ing spouse	(QSS)			
one box.	If y	ou checked the MFS box, enter the	name	of your s	pouse. If you	ı che					ild's name if the		
		alifying person is a child but not you			,				•				
	A	- 1: 1: 0000 - 1:-1 (-)					1 . 6			(l-) II			
Digital Assets		ny time during 2023, did you: (a) reco lange, or otherwise dispose of a digi						-			☐ Yes		
Standard	Som	eone can claim: You as a de	pender	nt 🗌	Your spouse	e as	a dependent	, .					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a	dual-status a	alien	<u> </u>						
Age/Blindness	s You:	☐ Were born before January 2, 1	959	Are b	lind Spo	use	: Was born	n befo	ore January 2	2, 1959	☐ Is blind		
Dependent	s (see	instructions):		(2)	Social security		(3) Relationshi	p (4) Check the b	ox if qual	ifies for (see instructions)		
If more	(1) Fi	(1) First name Last name			number to you				Child tax c	redit	Credit for other dependents		
than four													
dependents, see instruction	s ——												
and check	, —												
here L]												
Income	1a	Total amount from Form(s) W-2, b								. <u>1</u> a	111,864.		
Attach Form(s)	b	Household employee wages not re								. 1k)		
W-2 here. Also	С	Tip income not reported on line 1a	•		•					. 10			
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ictions)			. 10			
1099-R if tax	е	Taxable dependent care benefits f								. 16			
was withheld.	f	Employer-provided adoption bene	tits troi	m Form 8	8839, line 29	•				. 11	_		
If you did not get a Form	g	Wages from Form 8919, line 6 .				•				. 10			
W-2, see	h :	Other earned income (see instruction	,							. 1h	0.		
instructions.	i _	Nontaxable combat pay election (s	see insi	ructions)			<u>1i</u>				111,864.		
AH		Add lines 1a through 1h			· · · ·	h T	avable interest			. 12	<u> </u>		
Attach Sch. B if required.	2a	· -	2a				axable interest Ordinary divider			. 2t			
	3a 4a		3a 4a				axable amount			. 3b			
Standard	4 а 5а		4 а 5а				axable amount			. 41.			
Deduction for— Single or	6a		6a				axable amount			. 6k			
Married filing	C	If you elect to use the lump-sum e		method					 				
separately, \$13,850	7	Capital gain or (loss). Attach Sche							[7	-162.		
 Married filing jointly or 	8	Additional income from Schedule					•			_ <u> </u>	1		
Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								. 9			
surviving spouse, \$27,700	10	Adjustments to income from Sche								. 10			
 Head of household, 	11	Subtract line 10 from line 9. This is								. 11			
\$20,800	12	Standard deduction or itemized	-							. 12			
 If you checked any box under 	13	Qualified business income deducti					5-A			. 13			
Standard Deduction,	14	A 1.1.11 40 1.40								. 14			
see instructions.	15	Subtract line 14 from line 11. If zer	o or les	ss, enter	-0 This is ye	our t	taxable incom	e .					

Form 1040 (202)	3)								Page Z	
Tax and	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	з 🗌		16	14,365.	
Credits	17	Amount from Schedule 2, line 3	3					17		
	18	Add lines 16 and 17						18	14,365.	
	19	Child tax credit or credit for oth	her 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	f zero or less, e	enter -0				22	14,365.	
	23	Other taxes, including self-emp	ployment tax,	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is yo	ur total tax					24	14,365.	
Payments	25	Federal income tax withheld from	om:							
•	а	Form(s) W-2				25a 18	3,065.			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c .						25d	18,065.	
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) .			No .	27				
attach Sch. EIC.	28	Additional child tax credit from S	Schedule 8812			28				
	29	American opportunity credit from	om Form 8863	, line 8		29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line								
	32	Add lines 27, 28, 29, and 31. T	32							
	33	Add lines 25d, 26, and 32. The	se are your to	tal payments				33	18,065.	
Refund	34	If line 33 is more than line 24, s	34	3,700.						
	35a	Amount of line 34 you want ref	35a	3,700.						
Direct deposit?	b	Routing number 1 0 3 0				Checking	Savings			
See instructions.	d	Account number 3 0 5 0								
	36	Amount of line 34 you want ap	plied to your	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24. T								
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions						37		
	38	Estimated tax penalty (see inst				38				
Third Party		you want to allow another p						l l.	₩.	
Designee		structions		Phone			•		⊠ No	
		signee's me		no.		onal ident ber (PIN)	incation			
Sign		der penalties of perjury, I declare that								
Here	be	lief, they are true, correct, and comple	ete. Declaration o	of preparer (otne	r tnan taxpayer) is ba			, ,		
	Yo	ur signature	Date	Your occupation			nt you an Identity IN. enter it here			
Joint return?					SOFTWARE E	NCINEED	1	e inst.)	in, enter it here	
See instructions.	Sp	ouse's signature. If a joint return, bot	t h must sign.	Date	Spouse's occupati		If th	e IRS sei	nt your spouse an	
Keep a copy for	Op	5 de 5 de 19 de	armaer eigin	Juio	opease e escapa	···	Ider	ntity Prote	ection PIN, enter it here	
your records.							(see	inst.)		
	Ph	one no. (980) 635-9182		Email address	PHANIKANIK	I@GMAIL.CO	MC			
Paid		'	reparer's signat			Date 03/07/2024	PTIN		Check if:	
Preparer	SYAM	1 PRIYA RAM SAGAR GUPTA TALLAM S	YAM PRIYA	RAM SAGAR	GUPTA TALLAM	P0208	2082703 Self-employed			
Use Only	Fir	m's name GLOBAL TAXE					Pho	Phone no. (678) 965-9522		
	Fir	m's address 245 ROONEY	CT E BRU	NSWICK N	J 08816		Firm	n's EIN	84-3171965	
o	′-	4040 () 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							- 4040	

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

PHANI RAM GUPTHA KANIKICHARLA

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 soci	ial security number
205_72	_0105

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	-11,217.
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	
10	Combine lines 1 through 7 and 9. This is your additional income . Ente	r here and on Form		11 015
	1040, 1040-SR, or 1040-NR, line 8		10	-11,217.

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-ba	asis 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)	ła		
b	Deductible expenses related to income reported on line 8l from the			
	rental of personal property engaged in for profit	łb		
С	Nontaxable amount of the value of Olympic and Paralympic medals			
	and USOC prize money reported on line 8m			
d	Reforestation amortization and expenses	ld		
е	Repayment of supplemental unemployment benefits under the Trade			
	Act of 1974			
f	Contributions to section 501(c)(18)(D) pension plans			
g	Contributions by certain chaplains to section 403(b) plans 24	lg		
h	Attorney fees and court costs for actions involving certain unlawful			
	discrimination claims (see instructions)	łh		
i	Attorney fees and court costs you paid in connection with an award			
	from the IRS for information you provided that helped the IRS detect			
	tax law violations			
j	Housing deduction from Form 2555	4j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form			
	1041)	łk		
Z	Other adjustments. List type and amount:			
0 -			05	
25 26	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . E	nter here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u> </u>	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**

Internal Revenue Service Name(s) shown on return Your social security number 805-78-8105 PHANI RAM GUPTHA KANIKICHARLA 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 **Box A** checked 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 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 230. 68. -162.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

-162.

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -162.• 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 162.) 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 ☐ 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.

Form 8949 (2023) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side PHANI RAM GUPTHA KANIKICHARLA

Social security number or taxpayer identification number 805-78-8105

Before you check Box D, E, or F 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 II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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 (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS ☐ (F) Long-term transactions not reported to you on Form 1099-B 										
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e)				
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			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	01/01/22	12/31/23	68.	230.			-162.			
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	l here and incl is checked), lir	lude on your ne 9 (if Box E	68.	230.			-162.			

Note: If you checked Box D 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.

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

Attachment Sequence No.

2023
Attachment Sequence No. 13

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Your social security number

PHAN	II RAM GUPTHA	KAN	IKICHARLA							805-7	78-8105)
Part			From Rental Rea	al Estate an	d Ro	valties						
	Note: If you are	e in th	e business of renting r	personal proper	ty, use	Schedule	C. See	instru	ctions. If you a	are an ind	ividual, rep	oort farm
			s from Form 4835 on p									
			nts in 2023 that woul									
B I	f "Yes," did you or v	vill yc	ou file required Form	(s) 1099? .							. UY	es 🗌 No
1a	Physical address	of ea	ch property (street,	city, state, ZIF	ode	e)						
A	MTYAPIIR HYDE	RAR	AD TELANGANA I	N 500049								
B												
1b	Type of Property	2	For each rental real	l estate prope	rtv lis	ted		Fa	ir Rental	Person	nal Use	
	(from list below)	_	above, report the n						Days		ays	QJV
A	3		personal use days.				Α		365		0	
В			if you meet the requ				В					
С			qualified joint ventu	ire. See instru	ictions	3.	С					
Type	of Property:											
	Single Family Resid	ence	3 Vacation/Sh	ort-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Reside		4 Commercial			6 Roya	alties	8	Other (desc	ribe)		
						,						
							•		Properti	es:		
Incom							Α		В			С
3					3		0	00.				
4					4							
Exper					_							
5	-				5 6							
6			tructions)		7		1 2	67.				
7					8		1,3	07.				
8 9	COMMISSIONS .				9							
10					10							
11			sional fees		11		1 1	00.				
12	-		to banks, etc. (see ir		12		⊥,⊥	.00.				
13			· · · · · · · ·		13							
14					14		2 0	54.				
15					15			28.				
16					16		2,5	20.				
17					17		3 8	68.				
18			or depletion		18		J, 0					
19	Other (list)				19							
20	` '	dd lin	es 5 through 19 .		20		11,8	17				
21	•		ne 3 (rents) and/or 4					<u> </u>				
21			structions to find out									
	, , ,			•	21		-11, 2	17.				
22	Deductible rental r	eal e	state loss after limit	ation if any								
			ructions)		22	(11,21	L7.)	(,)()
23a	•		orted on line 3 for a					23a	1	600.		
b			orted on line 4 for a					23b				
C			orted on line 12 for					23c				
d			orted on line 18 for					23d				
е			orted on line 20 for					23e	11	,817.		
24			mounts shown on li							. 24		
25	•		es from line 21 and re			-		nter to	tal losses her		(11,217.)

Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2.

-11,217.

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