## Form **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

### IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

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

OMB No. 1545-0074

Submission Identification Number (SID)						
Taxpayer's name	Social secur	ity number				
HARINI BOORA	204-73	-1209				
Spouse's name Spouse's social security nu						
Part I Tax Return Information — Tax Year Ending December 31,	2023 (Enter year you a	are authorizing.)				
Enter whole dollars only on lines 1 through 5.						
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.						
1 Adjusted gross income		<b>1</b> 81,129.				
2 Total tax		2 10,108.				
<b>3</b> Federal income tax withheld from Form(s) W-2 and Form(s) 1099		<b>3</b> 17,575.				
4 Amount you want refunded to you		<b>4</b> 7,467.				
5 Amount you owe	<del> </del>	5				
Part II Taxpayer Declaration and Signature Authorization (Be sure	you get and keep a cop	by of your return)				
my knowledge and belief, it is true, correct, and complete. I further declare that the amounterum (original or amended) I am now authorizing. I consent to allow my intermediate service to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receip for any delay in processing the return or refund, and (c) the date of any refund. If applicable Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instit payment of my federal taxes owed on this return and/or a payment of estimated tax, and the authorization is to remain in full force and effect until I notify the U.S. Treasury Financial payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment business days prior to the payment (settlement) date. I also authorize the financial institutio taxes to receive confidential information necessary to answer inquiries and resolve issues personal identification number (PIN) below is my signature for the income tax return (origina Electronic Funds Withdrawal Consent.	e provider, transmitter, or electre tor reason for rejection of the total authorize the U.S. Treasury a tution account indicated in the total authorize the innancial institution to debit the Agent to terminate the authorist cancellation requests must be no involved in the processing constitution of the processing constitution in the processing constitution in the processing constitution.	ronic return originator (ERO) transmission, (b) the reason and its designated Financia tax preparation software for eentry to this account. This ration. To revoke (cancel) are received no later than 2 of the electronic payment of the racknowledge that the				
Taxpayer's PIN: check one box only						
<u>'_</u> '	do	1 2 0 9 as my as my on't enter all zeros				
I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN <b>and</b> your return is filed using the Practi below.	nmended) I am now authoriz					
Your signature ▶	Date ▶					
Spouse's PIN: check one box only						
I authorize to er to er to er   ERO firm name  signature on the income tax return (original or amended) I am now authoric  I will enter my PIN as my signature on the income tax return (original or a if you are entering your own PIN and your return is filed using the Practic below.	izing. amended) I am now authoriz					
Spouse's signature ▶	Date <b>▶</b>					
Practitioner PIN Method Returns Only—c						
Part III Certification and Authentication — Practitioner PIN Method	d Only					
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected		6 0 8 2 7 1 ter all zeros				
I certify that the above numeric entry is my PIN, which is my signature for the electronic in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confin requirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-	m that I am submitting this ret	urn in accordance with the				
ERO's signature ▶	Date ►					
ERO Must Retain This Form — See I	nstructions					

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

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



<b>£1040</b>		artment of the Treasury-Internal Revenue Servi		urn	202	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	ple in this	s space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		ı	, 2023, end	ling			, 20		See se	parate i	nstruct	tions.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity nu	ımber
HARINI			BOOR	А							204	73	1209	9
	pouse's	s first name and middle initial	Last na											y number
Llama addresa	/m	or and atreath If you have a D.O. have acco	inaturatio						lmt ma			<u>                                     </u>		
		er and street). If you have a P.O. box, see	Instruction	ons.					Apt. no.	- 1	Check h			ampaign
377 ATHENS WAY City, town, or post office. If you have a foreign address, also complete s					spaces below. State ZIF			ZIP code						want \$3
NASHVILI		,,,	,			TN		372			to go to			•
Foreign country			F	Foreign pro	ovince/state/				n postal c	ode	box bel			nge
g	,			gp			,		,		you. tu	Yo	_	Spouse
Filing Status	s ×	Single					Head of he	ouseh	old (HO	H)				
Check only		Married filing jointly (even if only o	ne had i	ncome)			_							
one box.		Married filing separately (MFS)					☐ Qualifying	surviv	ing spo	use (0	QSS)			
		you checked the MFS box, enter the			ouse. If you	u che	ecked the HOF	or Q	SS box,	enter	the chi	ild's na	ne if th	1e
	qu	ualifying person is a child but not you	ır depen	dent:										
Digital		ny time during 2023, did you: (a) rec												
Assets	exch	nange, or otherwise dispose of a dig	ital asse					et)? (Se	ee instru	ction	s.)	Y€	s X	No
Standard	Som	neone can claim: 🗌 You as a de	pendent	t 🗆 `	Your spous	e as	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a	dual-status	alien								
Age/Blindness	s You	: Were born before January 2, 1	959	Are bli	nd <b>Spc</b>	ouse	: Was bor	n befo	ore Janua	ary 2	, 1959	☐ Is	blind	
Dependents	s (see	instructions):		<b>(2)</b> S	ocial security	,	(3) Relationsh	<sub>iip</sub> (4	) Check t	he bo	x if quali	fies for (	see instr	ructions):
If more	(1) F	(1) First name Last name		number to you		to you	Child tax of		ax cre	edit	Credit fo	r other de	ependents	
than four														
dependents, see instruction	e ——													
and check	. —													
here L														
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		101,	306.
Attach Form(s)	b	Household employee wages not re	•								1b			
W-2 here. Also	С	Tip income not reported on line 1a	•		•						1c			
attach Forms W-2G and	d	Medicaid waiver payments not rep				nstru	ctions)				1d			
1099-R if tax	е	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 88	339, line 29						1f			
If you did not get a Form	g	Wages from Form 8919, line 6 .									1g			
W-2, see	h	Other earned income (see instruct	,					· ·			1h			0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions)			<u>1i</u>						101	206
	<u>z</u>	Add lines 1a through 1h			· · · ·						1z		101,	306.
Attach Sch. B if required.	2a	· —	2a				axable interest				2b			
equireu.	3a		3a				rdinary divide				3b			
Standard	4a		4a				axable amoun				4b			
Deduction for—	5a	<del>-</del>	5a				axable amoun				5b			
Single or Married filing	6a	,	6a		-11-1		axable amoun	τ		٠	6b			
separately, \$13,850	C	If you elect to use the lump-sum e		-		•	,							
Married filing	7	Capital gain or (loss). Attach Sche		•	•					. L	7			177
jointly or Qualifying	8	Additional income from Schedule									8			177.
surviving spouse, \$27,700	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•							9		8⊥,	129.
Head of	10	Adjustments to income from Sche									10			100
household, \$20,800	11	Subtract line 10 from line 9. This is	-	-							11			129.
If you checked	12	Standard deduction or itemized				-					12		<u> 13,</u>	850.
any box under Standard	13	Qualified business income deduct									13		1 2	0 = 0
Deduction, see instructions.	14	Add lines 12 and 13									14			850. 279

Form 1040 (2023	3)								Page Z
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	з 🗌		16	10,108.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	10,108.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne 8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	B. If zero or less,	enter -0				22	10,108.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is	your <b>total tax</b>					24	10,108.
<b>Payments</b>	25	Federal income tax withheld	I from:						
	а	Form(s) W-2				<b>25a</b> 17	7,575		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	17,575.
If you have a	26	2023 estimated tax paymen	ts and amount a	pplied from 20	)22 return			26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			No .	27			
allacii Scii. Elc.	28	Additional child tax credit from	m Schedule 8812			28			
	29	American opportunity credit	from Form 8863	3, line 8 .     .		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3, lir							
	32	Add lines 27, 28, 29, and 31	32						
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	17,575.
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amoun	t you <b>overpaid</b>		34	7,467.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here	. 🗆	35a	7,467.
Direct deposit?	b	Routing number 1 2 2							
See instructions.	d	Account number 7 6 2	9 7 5 8	6 7					
	36	Amount of line 34 you want	applied to your	2024 estimate	ed tax	36			
Amount You Owe	37	Subtract line 33 from line 24 For details on how to pay, g						37	
	38	Estimated tax penalty (see in	_	-		38			
Third Party		you want to allow another							
Designee		,	•			_	omplete	below.	<b>⋈</b> No
J		esignee's		Phone			onal iden	tification	
		me		no.			ber (PIN)		
Sign		nder penalties of perjury, I declare t lief, they are true, correct, and com							, ,
Here			.protot 2 colaration	· · · · ·	 I				nt you an Identity
	YC	our signature		Date	Your occupation				PIN, enter it here
Joint return?					RISK MANAG		e inst.)	,	
See instructions.		ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.						<b>I</b>	ntity Prot e inst.)	ection PIN, enter it here	
	Ph	one no. (623)272-441	1	Email address	HARINIBOOR	A@GMAIL.CO	M		
Paid	Pr	eparer's name	Preparer's signat	ure		Date	PTIN		Check if:
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	02/18/2024	P0208	3 <u>27</u> 03	Self-employed
Preparer	Fir	Firm's name GLOBAL TAXES LLC							(678)965-9522
Use Only	Fir	m's address 245 ROONE	n's EIN	84-3171965					

## SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2023

Attachment
Seguence No. 01

Department of the Treasury Internal Revenue Service

HARINI BOORA

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.

	Sequence No. <b>01</b>
Your soc	ial security number
204-73	-1209

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	-20,177.
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 <b>additional income</b> . Ente	r here and on Form		
	1040, 1040-SR, or 1040-NR, line 8		10	-20,177.

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

Par	t II 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	· <u> </u>			
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	24i		_	
j	Housing deduction from Form 2555	24j		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k		-	
Z	Other adjustments. List type and amount:				
05		24z		0.5	
25 06	Total other adjustments. Add lines 24a through 24z			25	
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			06	
				26	1 4 (5 4040) 2222
	BAA	REV 02/	11/24 PRO	Scnedu	ile 1 (Form 1040) 2023

#### **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

HARI	NI BOORA						204-7	3-1209	
Part	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			<b>C</b> . See	instru	ctions. If you are	an indiv	vidual, rep	ort farm
	Did you make any payments in 2023 that would require you								
В	If "Yes," did you or will you file required Form(s) 1099?								
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	8-3-892, SATYA SADAN AMEERPET, HYDERABAD	TEI	LANGANA	IN!	5000	73			
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate prope above, report the number of fair	rental				ir Rental Days	Person Da	QJV	
Α	g personal use days. Check the Q			Α		365		0	
В	if you meet the requirements to f qualified joint venture. See instru			В					
С			J.	С					
	of Property:				_				
	Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (describ	oe)		
						Properties	s:		
Incon	ne:			Α		В			С
3	Rents received	3		6	30.				
4	Royalties received	4							
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,8	90.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10			0.1				
11	Management fees	11		1,4	21.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13		4 г	0.2				
14	Repairs	14 15		4,5 5,0					
15 16	Supplies	16		5,0	30.				
17	Utilities	17		5,2	60				
18	Depreciation expense or depletion	18		2,6					
19		19		2,0					
20	Other (list)  Total expenses. Add lines 5 through 19	20		20,8	07.				
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		-20,1	77.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22	(	20,17	7.)	(	)	(	)
23a	Total of all amounts reported on line 3 for all rental prope	rties			23a	•	630.		
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	2,	614.		
е	Total of all amounts reported on line 20 for all properties				23e	20,	807.		
24	Income. Add positive amounts shown on line 21. Do not		-				24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. Eı	nter to	tal losses here	25	(	20,177.)
26	Total rental real estate and royalty income or (loss).								
	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						26		-20,177.

## Form **4562**

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

2023 Attachment Sequence No. 179

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number HARINI BOORA Sch E 8-3-892, SATYA SADAN 204-73-1209 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1,160,000. 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2,890,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . . . . . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . . . . . . . . . . . . . 5 (c) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . 9 10 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 . . . . . . . . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 . . . . . . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L 01/23 75,000. 2,614. S/L 27.5 yrs. MM property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year ММ S/L c 30-year 30 yrs. ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 2,614. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

## Form **8582**

**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

2023

Attachment
Sequence No. 858

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

Identifying number

HAR.	INI BOORA				204	-73-	1209				
Pai	t I 2023 Passive Activity Los	S									
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.								
	al Real Estate Activities With Active P ance for Rental Real Estate Activities			ive participation, s	ee <b>Special</b>						
1a	Activities with net income (enter the a	mount from Part IV	/, column (a)) .	1a	0.						
b	Activities with net loss (enter the amo										
С	Prior years' unallowed losses (enter the	ne amount from Pa									
d											
All Ot	her Passive Activities										
2a	Activities with net income (enter the a	mount from Part V	, column (a)) .	2a							
b	Activities with net loss (enter the amo				)						
С	Prior years' unallowed losses (enter the				)						
d	Combine lines 2a, 2b, and 2c					2d					
3	Combine lines 1d and 2d and subtra				this line is						
	zero or more, stop here and include										
	prior year unallowed losses entered										
	normally used				[	3	-20,177.				
	If line 3 is a loss and: • Line 1d is a										
		loss (and line 1d is	·								
	on: If your filing status is married filing	separately and yo	ou lived with your	spouse at any tim	e during the	year,	do not complete				
	. Instead, go to line 10.		A	<u> </u>							
Par	Special Allowance for Rei			•							
	Note: Enter all numbers in Par Enter the smaller of the loss on line 1	•		tions for an examp	oie.	4	00 177				
4						4	20,177.				
6		-		5 Enter \$150,000. If married filing separately, see instructions							
U	<b>Note:</b> If line 6 is greater than or equal										
		to line E akin line			01,306.						
	on line 9. Otherwise, do to line /	to line 5, skip line			01,306.						
7	on line 9. Otherwise, go to line 7.	to line 5, skip line		er -0-							
7 8	Subtract line 6 from line 5		s 7 and 8 and ent	er -0-	48,694.	8	24 347				
8	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). <b>Do not</b> e		s 7 and 8 and ent ,000. If married filir	er -0 7 ng separately, see	48,694.	8	24,347.				
8 9	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). <b>Do not</b> e Enter the <b>smaller</b> of line 4 or line 8. If		s 7 and 8 and ent ,000. If married filir	er -0 7 ng separately, see	48,694.	8 9	24,347. 20,177.				
8	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). <b>Do not</b> e Enter the <b>smaller</b> of line 4 or line 8. If till Total Losses Allowed		s 7 and 8 and ent ,000. If married filir r CRD, see instruc	er -0	48,694.		20,177.				
8 9 Par	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8. If Total Losses Allowed  Add the income, if any, on lines 1a and	nter more than \$25, line 3 includes any	s 7 and 8 and ent , , , , , , , , , , , , , , , , , , ,	er -0-  7  ng separately, see stions	48,694. nstructions	9					
8 9 Par 10 11	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8. If till Total Losses Allowed  Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses.	nter more than \$25, line 3 includes any ad 2a and enter the re activities for 20 ax return	s 7 and 8 and ent	er -0-  ng separately, see stions	48,694. nstructions	9	20,177.				
8 9 Par 10 11	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8. If till Total Losses Allowed  Add the income, if any, on lines 1a an Total losses allowed from all passiv	nter more than \$25, line 3 includes any ad 2a and enter the re activities for 20 ax return	s 7 and 8 and ent	er -0-  ng separately, see stions	48,694. nstructions	10	20,177.				
8 9 Par 10 11	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8. If till Total Losses Allowed  Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses allowed This Part Before	nter more than \$25, line 3 includes any ad 2a and enter the re activities for 20 ax return	s 7 and 8 and ent	er -0-  ng separately, see stions	48,694. nstructions ons to find	10	20,177.				
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8 9 Par 10 11	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not e Enter the smaller of line 4 or line 8. If till Total Losses Allowed  Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses on your total losses on your total losses allowed from all passiv out how to report the losses on your total losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses on your total losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all passiv out how to report the losses allowed from all pa	nter more than \$25, line 3 includes any od 2a and enter the re activities for 20, ax return e Part I, Lines 1a Curren (a) Net income (line 1a)	s 7 and 8 and ent	er -0-  ng separately, see etions	48,694. nstructions ons to find	9 10 11 rall gai	20,177.  0.  20,177.  in or loss  (e) Loss				

20,177.

0.

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

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Part V Complete This Part Befor	e P	art I, Lines 2	a, 2b,	<b>and 2c.</b> S	ee instru	ctions.			•	
Name of activity		Currer	nt year		Prior years		Overall g		gain or loss	
Name of activity		(a) Net income (line 2a)		(b) Net loss (line 2b)		lowed le 2c)	(d) Gain		(e) Loss	
Total. Enter on Part I, lines 2a, 2b, and 2c										
Part VI Use This Part if an Amour	nt Is	Shown on F	Part II.	<b>Line 9.</b> S	ee instrud	ctions.				
Name of activity	For ar to	rm or schedule ad line number be reported on se instructions)		) Loss	<b>(b)</b> Ra		(c) Special allowance		(d) Subtract column (c) from column (a).	
8-3-892,SATYA SADAN		E Ln 22		20,177.	1.0000	0000	20,17	7.	0.	
				·						
Total				20,177.	1.0	0	20,17	7.	0.	
Allocation of Unallowed L	OS			S.						
Name of activity	Form or sche and line nun to be reporte (see instruct		mber ted on (a) l		Loss		(b) Ratio		(c) Unallowed loss	
						+				
Total							1.00			
Part VIII Allowed Losses. See instru				1		1	-			
Name of activity	Fo ai to		edule nber ed on ions)	(a) l	Loss (b)		(b) Unallowed loss		c) Allowed loss	
		1								
Total										