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				
Submi	ission Identification Number (SID)				
Taxpaye	er's name	Social secu	rity numl	per	
SRI	HARSHA TADIPARTHI	047-5	7-515	5	
Spouse'	s name	Spouse's so	ocial secu	urity number	r
Part	Tax Return Information — Tax Year Ending December 31, 2023	(Enter year you	are all	thorizina	1
	whole dollars only on lines 1 through 5.	(Litter year you	are au	uionzing.	· <i>)</i>
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1 1	60	,370.
2	Total tax		2		,543.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		,516.
4	Amount you want refunded to you		4	I	, 973.
5	Amount you owe		5		
Part	II Taxpayer Declaration and Signature Authorization (Be sure you get	and keep a co	py of y	our retu	rn)
my know return (to send for any Agent t paymer authoriz paymer busines taxes to persona	penalties of perjury, I declare that I have examined a copy of the income tax return (original or an owledge and belief, it is true, correct, and complete. I further declare that the amounts in Par (original or amended) I am now authorizing. I consent to allow my intermediate service provider, if my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial ization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to tent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellations days prior to the payment (settlement) date. I also authorize the financial institutions involved or receive confidential information necessary to answer inquiries and resolve issues related tall identification number (PIN) below is my signature for the income tax return (original or amendation).	t I above are the ar transmitter, or elect for rejection of the e the U.S. Treasury unt indicated in the reminate the authorion requests must I d in the processing of the payment. I fu	nounts for transmister and its contact and its	rom the inc turn original ssion, (b) the designated paration soft to this accor- fo revoke (ved no late ectronic paratically	come tax tor (ERO) ne reason Financial ftware for bunt. This cancel) a er than 2 ayment of e that the
	nic Funds Withdrawal Consent. yer's PIN: check one box only	Г			
X		orata my PINI	7 5 1	1 5 5	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 amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.				
Your s	ignature ▶ Da	te ▶			
Spous	se's PIN: check one box only				
_] I authorize to enter or ger	nerate my PIN			as my
	ERO firm name	Ē		digits, but	,
	signature on the income tax return (original or amended) I am now authorizing.	C	on't ente	er all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PIN below.				
Spous	e's signature ▶ Da	te ▶			
	Practitioner PIN Method Returns Only—continue	below			
Part l	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 nter all ze	8 2 7 eros	1
authoriz	that the above numeric entry is my PIN, which is my signature for the electronic individual incided to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I are ments of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS e-file Provid	n submitting this re	turn in a	accordance	
ERO's	signature ► Da	te ▶			
	ERO Must Retain This Form — See Instruction				
	Don't Submit This Form to the IRS Unless Requeste				

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	ı. 1–D	ec. 31, 2023, or other tax year beginn	ing	, 2023,	ending	,	20	See separate instructions.	
Your first name	rst name and middle initial Last name Yo				entifying number				
				((see instructions)		
SRI HARSHA TADIPARTHI				047-	57-5155				
Home address (number and street). If you have a P.O. box, see instructions.						Apt. no.			
3801 W SP	RIN	G CREEK PKWAY						1824	
City, town, or po	ost of	fice. If you have a foreign address, als	so comp	lete spaces below.		State		ZIP code	
PLANO						TX		75023	
Foreign country	nam	e	Foreigr	n province/state/county		Foreign	postal cod	de	
Filing	$ \times$	Single	aratelv (N	MFS) Qualifvir	ng surviving spouse	(QSS)	☐ Est	ate 🗌 Trust	
Status		you checked the QSS box, enter the o		· · · · · · · · · · · · · · · · · · ·	0 0 1	` '			
Check only		•		, , , , ,		, ,			
one box.						. ,	<i>(</i> ,), , , , ,		
Digital Assets		ny time during 2023, did you: (a) recei rwise dispose of a digital asset (or a f					r (b) sell, 6 		
Donondonto					,. (6666			if qualifies for (see inst.):	
Dependents (see instructions):	1			(2) Dependent's		1	ld tax credi	Cradit for other	
(See mondonons).		(1) First name Last name		identifying number	(3) Relationship to yo	ou Cili	——	dependents	
If more than four									
dependents, see									
instructions and							Ц	<u> </u>	
check here							Ц_		
Income	1a	Total amount from Form(s) W-2, box	`	,				67,000.	
Effectively	b	Household employee wages not rep		` '					
Connected	C	Tip income not reported on line 1a (,					
With U.S.	d	Medicaid waiver payments not repo		, , ,	•				
Trade or	e	Taxable dependent care benefits fro							
Business	f	Employer-provided adoption benefit Wages from Form 8919, line 6					. 1f		
Attach	g h	Other earned income (see instruction					. 1g		
Form(s) W-2,	i	Reserved for future use	•						
1042-S, SSA-1042-S,	i	Reserved for future use					. 1j		
RRB-1042-S,	, k	Total income exempt by a treaty from			1 1		,		
and 8288-A here. Also		line 1(e)		,	1k				
attach	z	Add lines 1a through 1h					. 1z	67,000.	
Form(s)	2a	Tax-exempt interest 2a	1	1	able interest		. 2b	,	
1099-R if tax was	За	Qualified dividends 3a	1	b Ord	linary dividends .		. 3b		
withheld.	4a	IRA distributions 4a	1		able amount		. 4b		
If you did not	5a	Pensions and annuities 5a	1	b Tax	able amount		. 5b		
get a Form W-2, see	6	Reserved for future use					. 6		
instructions.	7	Capital gain or (loss). Attach Schedule D (Form 1040) if required. If not required, check here							
	8	Additional income from Schedule 1	(Form 10	040), line 10			. 8	-6,630.	
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8	3. This is	your total effectively c	onnected income		. 9	60,370.	
	Adjustments to income from Schedule 1 (Form 1040), line 26. These are your total adjustments to income								
	11	Subtract line 10 from line 9. This is y	our adj u	ısted gross income			. 11	60,370.	
	12	Itemized deductions (from Schedu							
		deduction (see instructions)			1 1	ndia Tre	aty 12	13,850.	
	13a	Qualified business income deduction	n from F	orm 8995 or Form 8995-	A . 13a				
	b	Exemptions for estates and trusts of	nly (see i	nstructions)	13b			l .	
	С	Add lines 13a and 13b							
	14							13,850.	
,	15	Subtract line 14 from line 11. If zero	or less,	enter -0 This is your ta :	xable income .		. 15	46,520.	

Tax and 16	Form 1040-NR (2023)							Page 2
18	Tax and	16	Tax (see instructions). Check if any from Form(s): 1 8814 2	4972	3			16	5,543.
19 Child tax orealt for oreith for other dependents from Schedule 8812 (Form 1040) 19 20 20 21 22 22 25 24 22 22 25 24 22 25 24 22 25 24 22 25 25	Credits	17	Amount from Schedule 2 (Form 1040), line 3					17	0.
20		18	Add lines 16 and 17					18	5,543.
21		19	Child tax credit or credit for other dependents from Schedule 8812 (For	rm 1040)				19	
23		20	Amount from Schedule 3 (Form 1040), line 8					20	
23a		21	Add lines 19 and 20					21	
Schedule NEC (Form 1040-NF), line 15		22	Subtract line 21 from line 18. If zero or less, enter -0					22	5,543.
b		23a	•	I .	3a				
Initial Color		h			ou				
C Transportation tax (see instructions) 23c 24d 3 34d 3 34d 3 3 3 3 3 3 3 3 3		b	· · ·		3h				
Add lines 23a through 23c		c						-	
Payments			,					23d	
Payments									5.543
a Form(s) W-2	Payments		•						3,313.
b Form(s) 1099 c Other forms (see instructions) d Add lines 25a through 25c	i dyinchts			. 2	5a		9.516		
C Chiter forms (see instructions) 25c 25d 9, 516							<i>></i> , 0±0.	-	
d Add lines 25a through 25c								-	
Promise Reserved for future use Reserv			,					25d	9,516.
Form(s) 8288-A 25f		e	· · · · · · · · · · · · · · · · · · ·						,
Second S		f	• •						
26 2023 estimated tax payments and amount applied from 2022 return		a							
27 Reserved for future use		_	• •						
28				1					
29 Credit for amount paid with Form 1040-C 29 30 Reserved for future use 30 30 31 Amount from Schedule 3 (Form 1040), line 15 31 32 Add lines 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments 33 9, 516 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 3, 973 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 37, 973 35a 37, 9								-	
30 Reserved for future use 30 31 Amount from Schedule 3 (Form 1040), line 15 31 31 32 Add lines 28, 29, and 31. These are your total other payments and refundable credits 32 33 Add lines 25d, 25e, 25f, 25g, 26, and 32. These are your total payments 33 9, 516.			` '						
31		30	•	_	30				
32		31			31			-	
Refund 34		32			credit	s		32	
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here 35a 3, 973.		33						33	9,516.
Sign	Refund	34						34	
See instructions. d Account number 5 9 0 9 2 3 3 3 7 e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here. 36 Amount of line 34 you want applied to your 2024 estimated tax . 36 Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions		35a	Amount of line 34 you want refunded to you. If Form 8888 is attached,	l, check h	nere .			35a	3,973.
e If you want your refund check mailed to an address outside the United States not shown on page 1, enter it here. 36 Amount of line 34 you want applied to your 2024 estimated tax . 36 Amount You Owe 37 Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions	Direct deposit?	b							
enter it here. 36 Amount of line 34 you want applied to your 2024 estimated tax	See instructions.	d	Account number 5 9 0 9 2 3 3 3 7						
Amount You Owe Solution 1 Subtract line 34 you want applied to your 2024 estimated tax		е	If you want your refund check mailed to an address outside the United	d States i	not show	wn on	page 1,		
Amount You Owe 37 Subtract line 34 you want applied to your 2024 estimated tax			enter it here.				-		
You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions 38		36	Amount of line 34 you want applied to your 2024 estimated tax .	. 3	36				
Third Party Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your occupation Phone no. Phone no. Preparer's name Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM Preparer Use Only Phone no. (678) 965−9522 Phone no. (678) 965−9522	Amount	37	Subtract line 33 from line 24. This is the amount you owe .						
Third Party Designee Designee's Phone Personal identification number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation Phone no. Email address Preparer's name Preparer's signature Date Preparer's signature Date Preparer's signature Date Preparer's signature Preparer's signature Date Preparer's signature Date Prin Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM Phone no. (678) 965–9522	You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructi	ions				37	
Party Designee Designee's name Soft which preparer has any knowledge and statements, and to the best of my knowledge an		38	Estimated tax penalty (see instructions)	. 3	38				
Designee name no. number (PIN) Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature	Third	Do yo	ou want to allow another person to discuss this return with the IRS? See	instruction	ons.	□ Ye	es. Compl	ete be	low. 🗵 No
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Your signature Date Your occupation From no. Email address Preparer's name Preparer's signature Preparer's signature Preparer's signature Date PTIN Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM Phone no. (678) 965–9522		•						cation	
Sign Here Your signature Date Your occupation If the IRS sent you an Identity Protection PIN, enter it here (see inst.) Phone no. Email address Paid Preparer's name Preparer's signature Date PTIN Check if: SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM O2/17/2024 P02082703 Self-employed Ise Only		Under	penalties of perjury, I declare that I have examined this return and accompanying s		and stat	ement	s, and to th		
Here Protection PIN, enter it here (see inst.)	Sian				on an inic	malio			, ,
Phone no. Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM Firm's name GLOBAL TAXES LLC SOFTWARE DEVELOPER SOFTWARE DEV	_	Your	signature Date Your occup	pation					
Phone no. Email address Paid Preparer's name Preparer's signature Date PTIN Check if:	nere		SOFTWAR	RE DEV	ÆLOP	ER	l .		i ii v, Ciitoi it liele
Paid Preparer's name	ł	Phone					(2.20	,	
Preparer Use Only Syam PRIYA RAM SAGAR GUPTA TALLAM Syam PRIYA RAM SAGAR GUPTA TALLAM O2/17/2024 P02082703 Self-employed	Daid			D	ate		PTIN		Check if:
Use Only Firm's name GLOBAL TAXES LLC Phone no. (678) 965-9522		•		LLAM	2/17/2	2024	P02082	2703	
Use Only	-				, = - , =				
	Use Only	2 ()nlv							

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

SRI HARSHA TADIPARTHI

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. 01
Your soc	ial security number
047-57	-5155

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	ach Schedule E .	5	-6,630.
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		
- 1	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 (<u>)</u>	
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	-6,630.

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-basis government	nent	
	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		
15	Deductible part of self-employment tax. Attach Schedule SE		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction	. 17	
18	Penalty on early withdrawal of savings		
19a	Alimony paid		a
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	. 23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
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 24g		
_	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)		
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		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)		
Z	Other adjustments. List type and amount:		
	24z		
25	Total other adjustments. Add lines 24a through 24z		
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and		
	Form 1040, 1040-SR, or 1040-NR, line 10	. 26	

SCHEDULE NEC (Form 1040-NR)

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

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

connected with a U.S. business

on Schedule D (Form 1040).

Form 4797, or both.

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

Your identifying number

SRI HARSHA TADIPARTHI 047-57-5155 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings _____ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a 15 Capital Gains and Losses From Sales or Exchanges of Property Enter only the capital gains and 16 (a) Kind of property and description (f) LOSS (g) GAIN (b) Date acquired (c) Date sold (d) Sales price (e) Cost or losses from property sales or (if necessary, attach statement of If (e) is more than (d), If (d) is more than (e), mm/dd/yyyy mm/dd/yyyy other basis exchanges that are from sources descriptive details not shown below) subtract (d) from (e). subtract (e) from (d). within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040). Report property sales or exchanges that are effectively

17 Add columns (f) and (g) of line 16

18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above. If a loss, enter -0-

18

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

Go to www.irs.gov/Form1040NR for instructions and the latest information. Department of the Treasury Internal Revenue Service Answer all questions.

OMB No. 1545-0074 Attachment Sequence No. **7C**

Name shown on Form 1040-NR Your identifying number

SR	HARSHA TADIPARTHI			047-57-51	55			
Α	Of what country or countries were you a citizen or national during the tax year? _INDIA							
В	In what country did you claim residence for tax purposes	n what country did you claim residence for tax purposes during the tax year? United States						
С	Have you ever applied to be a green card holder (lawful p	ermanent resident) o	of the United States? .		☐ Yes	⊠ No		
D	Were you ever:							
1	. A U.S. citizen?				☐ Yes	⊠ No		
2	. A green card holder (lawful permanent resident) of the Un	ited States?			☐ Yes	⊠ No		
	If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4,	for expatriation rules	s that apply to you.					
Ε	If you had a visa on the last day of the tax year, enter y immigration status on the last day of the tax year. $F1$,, ,	u didn't have a visa, en	•				
F	Have you ever changed your visa type (nonimmigrant state of the lifty you answered "Yes," indicate the date and nature of the	tus) or U.S. immigrat	tion status?		☐ Yes	⊠ No		
G	List all dates you entered and left the United States during							
	Note: If you're a resident of Canada or Mexico AND con			ent intervals.				
	check the box for Canada or Mexico and skip to item H			☐ Mexico				
	Date entered United States Date departed United States mm/dd/yy	es [Date entered United States mm/dd/yy		ted United m/dd/yy	d States		
Н	Give number of days (including vacation, nonworkdays, and 2021, 2022							
I	Did you file a U.S. income tax return for any prior year? . If "Yes," give the latest year and form number you filed:				⊠ Yes	□No		
J	Are you filing a return for a trust?	r the grantor trust ru		or loan to a	☐ Yes	⊠ No □ No		
K	Did you receive total compensation of \$250,000 or more of				☐ Yes	⊠ No		
1	If "Yes," did you use an alternative method to determine t	-			☐ Yes	□ No		
L	Income Exempt From Tax—If you are claiming exemptic complete (1) through (3) below. See Pub. 901 for more inf	on from income tax	c under a U.S. income					
1	Enter the name of the country, the applicable tax treaty arti amount of exempt income in the columns below. Attach Fo	cle, the number of m	nonths in prior years you	claimed the trea	aty benefi	t, and the		
	(a) Country	(b) Tax treaty article		s (d) Amo	ount of exe	emnt		
	(a) country	(b) ran troaty artists	claimed in prior tax yes					
	(1) = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =		1					
_	(e) Total. Enter this amount on Form 1040-NR, line 1k. D	•						
	Were you subject to tax in a foreign country on any of the		` '		☐ Yes	∐ No ⊠ No		
3	Are you claiming treaty benefits pursuant to a Competent	-			∐ Yes	⊠ No		
N.A	If "Yes," attach a copy of the Competent Authority determ	iiriation letter to you	ir return.					
M	Check the applicable box if: This is the first year you are making an election to treat in-	come from roal area	perty located in the Unite	nd States as off	activoly a	annoctod		
	with a U.S. trade or business under section 871(d). See in	structions				. 🗆		
2	You have made an election in a previous year that has States as effectively connected with a U.S. trade or busin							

SCHEDULE E (Form 1040)

22

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,

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 047-57-5155 SRI HARSHA TADIPARTHI 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) 408 EDEN-A, LODHA CASA PARADISO, SANATH NAGAR TELANGANA IN 500018 Α B 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 7 Self-Rental 5 Land 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 Rents received . 3 450. 4 4 Royalties received **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 750. 7 Cleaning and maintenance . . . 7 8 Commissions 8 9 9 Insurance . . . 10 Legal and other professional fees 10 11 Management fees 11 1,260. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 1,685. 14 14 Repairs 15 Supplies 15 1,400. 16 16 Taxes 17 Utilities 17 1,985. 18 18 Depreciation expense or depletion Other (list) 19 19 20 20 Total expenses. Add lines 5 through 19 7,080. 21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If

b	Total of all amounts reported on line 4 for all royalty properties	23b			
С	Total of all amounts reported on line 12 for all properties	23c			
d	Total of all amounts reported on line 18 for all properties	23d			
е	Total of all amounts reported on line 20 for all properties	23e	7,0	80.	
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. En	nter to	tal losses here	25	(6,630.
26	Total rental real estate and royalty income or (loss). Combine lines 24 and	25. E	nter the result		
	here. If Parts II. III. and IV. and line 40 on page 2 do not apply to you, also er	nter th	nis amount on		

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

21

22

result is a (loss), see instructions to find out if you must file Form 6198

Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)

Total of all amounts reported on line 3 for all rental properties

-6,630.

450.

26

-6,630.

-6,630.