# 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

internal n	leveliue del vice	-							
Submis	ssion Identification Number (SID)								
Taxpayer	r's name		Social se	curity n	umber				
SHYA	MM DEVARAJ		193-	3-98-0774					
Spouse's name Spouse's social security number									
Part l	Tax Return Information — Tax Year Ending December 31, 2023	(Enter	vear vo	ou are	autho	orizin	a )		
	whole dollars only on lines 1 through 5.	(Lintoi	your yo	<i>ya</i> a.o	datin	J112111	9./		
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
	Adjusted gross income			.	1	8	3,7	741.	
	Total tax				2	1	0,6	580.	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099				3	1	3,7	706.	
4	Amount you want refunded to you				4		3,0	26.	
	Amount you owe				5				
Part I	Taxpayer Declaration and Signature Authorization (Be sure you ge	t and k	eep a c	сору с	of you	ır ret	urn	)	
to send for any of Agent to payment authoriza payment business taxes to personal	original or amended) I am now authorizing. I consent to allow my intermediate service provider my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reaso 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 accept of my federal taxes owed on this return and/or a payment of estimated tax, and the financial station is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the tit, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellar adays prior to the payment (settlement) date. I also authorize the financial institutions involve 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 amentic Funds Withdrawal Consent.	n for rejective the U.S. count indictions institution required in the part of	etion of the stream of the str	he transury and the tax of the endorization of the further of the further of the transure of the transure of the truther of	smission its despreparantry to the control on. To be elected a cknown as the control on the cont	on, <b>(b)</b> signate ation sthis action strevoked no lateronic power actions on the confection of the con	the court court cater caying the court can be court can be court caying a the court caying a co	reason nancial are for it. This ncel) a than 2 nent of it the	
	yer's PIN: check one box only				1_1		7		
$ \mathbf{x} $	I authorize GLOBAL TAXES LLC to enter or ge	nerate n	ny PIN	8 0		7   4	_	as my	
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.		•		five dig enter a				
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.								
Your si	ignature ▶ Da	ate▶							
Spouse	e's PIN: check one box only						_		
	I authorize to enter or ge	nerate n	nv PIN					as my	
	ERO firm name		.,	Enter	five dig	its, but	_	,	
	signature on the income tax return (original or amended) I am now authorizing.			don't	enter a	ll zeros	3		
	I will enter my PIN as my signature on the income tax return (original or amended if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PI below.								
Spouse	e's signature ▶ Da	ate 🕨							
	Practitioner PIN Method Returns Only—continue	below							
Part II	Certification and Authentication — Practitioner PIN Method Only								
ERO's	<b>EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2	2 4	9 6	0 8	2	7	1	
				t enter a	all zeros				
authorize	that the above numeric entry is my PIN, which is my signature for the electronic individual in the ted to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I aments of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS <i>e-file</i> Provides	m submi	tting this	return	in acc	ordan			
ERO's	signature ▶ Da	ate 🕨							
	ERO Must Retain This Form — See Instructi								
	Don't Submit This Form to the IRS Unless Requeste		o 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 Serv		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			, 2023, end	ling			, 20		See ser	oarate i	nstructio	ons.
Your first name	and m	iddle initial	Last na	me							Your so	cial sec	urity num	nber
SHYAM			DEVA	RAJ							193	98	0774	
	pouse's	s first name and middle initial	Last na										security r	number
-	-										135	43	8136	
Home address	(numbe	er and street). If you have a P.O. box, see	instruction	ons.				A	Apt. no.				ction Car	mpaign
1647 BEI	NTZ '	WAY								- 1			ou, or you	. •
		ice. If you have a foreign address, also co	mplete s	paces bel	OW.	Sta	te	ZIP c	ode		•	0,	ointly, wa	
BATAVIA						II	_	605	10	- 1	•		nd. Check not chanc	•
Foreign countr	y name	ı	F	oreign pr	ovince/state/	count	ty	Foreig	ın postal c	- 1	your tax		_	,0
												Yo	u 🗌 S	Spouse
Filing Status	s [	Single					Head of h	ouseh	old (HOF	 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 (C	QSS)			
	lf y	you checked the MFS box, enter the	name o	of your sp	oouse. If you	u che	ecked the HOF	or Q	SS box,	enter	the chi	ld's nar	ne if the	;
	qu	ıalifying person is a child but not you	ur depen	ident: S	SAPNA RA	AVI								
Digital	Δt ai	ny time during 2023, did you: (a) rec	eive (as	a reward	l award or	navr	ment for prope	rty or	services	). or (	h) sell			
Assets		nange, or otherwise dispose of a dig										∏Ye	s 🗵 N	No
Standard		neone can claim:  You as a de					a dependent	, (-			,			
Deduction	_	Spouse itemizes on a separate retur	•											
		: Were born before January 2, 1	959 _	_ Are bli ⊤	ind Spo	ouse	: U Was bor						blind	
Dependent		see instructions):		(2) Social security (3) Relationship to you							see instrud r other dep			
If more	(1) F	First name Last name		number			to you	-	Offilia t		uit	Orean Io	Other dep	
than four dependents,									<u>[</u>				屵	
see instruction	s							-	[	<del> </del>			-	
and check here [	1 —								l	<del>_</del>				
-	10	Total amount from Form(s) W 2 b	ov 1 (so	o inetruo	tions)				l		10		102,4	112
Income	1a b	Total amount from Form(s) W-2, b Household employee wages not re	,		,						1a 1b	_	102,4	110.
Attach Form(s)	C		•								1c	_		
W-2 here. Also attach Forms	d	Tip income not reported on line 1a (see instructions)									1d	_		
W-2G and	e	Taxable dependent care benefits from Form 2441, line 26								1e	_			
1099-R if tax was withheld.	f	Employer-provided adoption bene				•					1f			
If you did not	g g	Wages from Form 8919, line 6.	into mom	11 01111 0	000, 11110 20	•					1g			
get a Form	9 h	Other earned income (see instruct	ions) .								1h			0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1 <sub>1i</sub>	i.						
	z	Add lines 1a through 1h					· · <u> </u>				1z		102,4	118.
Attach Sch. B			2a		· · i	b T	axable interes	t .			2b	_		300.
if required.	3a	· –	3a				ordinary divide				3b			
	4a	· —	4a				axable amoun				4b	_		
Standard Deduction for—	5a	_	5a			b T	axable amoun	t			5b			
Single or	6a	Social security benefits	6a				axable amoun				6b			
Married filing separately,	С	If you elect to use the lump-sum e	lection r	nethod,	check here									
\$13,850	7	Capital gain or (loss). Attach Sche	dule D if	required	d. If not requ	uired,	, check here				7		-1,5	500.
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	1, line 10	0							8		-17,4	<u> 177.</u>
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	This is yo	our <b>total inc</b>	come	e				9		83,7	741.
\$27,700	10	Adjustments to income from Sche	dule 1, l	ine 26							10			
Head of household,	11	Subtract line 10 from line 9. This is	s your <b>ac</b>	djusted (	gross incor	ne					11		83,7	741.
\$20,800 If you checked	12	Standard deduction or itemized	deducti	i <b>ons</b> (fro	m Schedule	A)					12		13,8	350.
any box under Standard	13	Qualified business income deduct	ion from	Form 89	995 or Form	899	5-A				13			
Deduction,	14										14		13,8	
see instructions.	15	Subtract line 1/1 from line 11. If zer	ro or loce	contor	O Thio io		tavabla incom	•			15	1	60 8	201

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	10,680.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	10,680.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lin	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	10,680.
	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	10,680.
<b>Payments</b>	25	Federal income tax withheld	I from:						
_	а	Form(s) W-2				<b>25a</b> 13	3,706.		
	b	Form(s) 1099				25b			
	С	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c						25d	13,706.
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)				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, lin	ne 15			31			
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	ayments and refu	ndable credits		32	
	33	Add lines 25d, 26, and 32. T	hese are your <b>to</b>	tal payments				33	13,706.
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	3,026.
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here		35a	3,026.
Direct deposit?	b	Routing number 0 7 1		<del></del>	<b>c</b> Type: 🔀	Checking	Savings		
See instructions.	d	Account number 9 9 5	9 7 7 2	2 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	nstructions) .			38			
Third Party	Do	you want to allow another				See			
Designee		,	•			_	omplete	below.	<b>⋉</b> No
		esignee's		Phone		onal ident	ification		
		me		no.			ber (PIN)		
Sign		ider penalties of perjury, I declare t lief, they are true, correct, and com							, ,
Here		our signature	,	Date	Your occupation				ent you an Identity
	10	our signature		Date	rour occupation				PIN, enter it here
Joint return?					ENGINEERIN	G MANAGER		inst.)	
See instructions.		ouse's signature. If a joint return,	<b>both</b> must sign.	Date	Spouse's occupation	on			nt your spouse an
Keep a copy for your records.					I	ntity Prote inst.)	ection PIN, enter it here		
	Ph	one no. (224)334-622	7	Email address	SHYAMAMUDH	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	02/26/2024	P0208	<u>27</u> 03	Self-employed
Preparer	Fir							ne no. (	(678)965-9522
Use Only	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816 Firm							n's EIN	84-3171965

# 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

SHYAM DEVARAJ

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 soci	ial security number
102_00	_0774

Par	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	-17,477.
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 (	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	0.		
	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	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Ente		9	
10	1040, 1040-SR, or 1040-NR, line 8		10	-17,477.

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:				
<b>0</b> -		24z		0-	
<b>25</b>	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			26	
	BAA	REV 02/	16/24 PRO	Schedu	ile 1 (Form 1040) 2023

#### **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. Co to usual iro gov/SchoduloD for instructions and the latest information OMB No. 1545-0074

Attachment

Intern	al Revenue Service Go to www.iis.gov/ScheduleD to	or instructions and	the latest illionnal	.1011.	`	sequence No. 12
	(s) shown on return YAM DEVARAJ					ecurity number
-	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona	•	•			
	Tt I Short-Term Capital Gains and Losses—Ge				e ins	tructions)
See lines This whol	nts s from Part I, ın (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)				
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 <b>Box A</b> checked	23,056.	26,187.	1	L57.	-2,974.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (le	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and to	rusts from	5	
6	Short-term capital loss carryover. Enter the amount, if an		our <b>Capital Loss</b>	Carryover	6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise	through 6 in colu	mn (h). If you hav	e any long-	7	-2,974.
Pai					(see	
lines This	See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.  (d)  Proceeds (sales price)  (e)  Adjustments to gain or loss if Form(s) 8949, Proceeds (or other basis)  In 2, column					(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	
12	Net long-term gain or (loss) from partnerships, S corporat				12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	=	our <b>Capital Loss</b>	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** -2,974. 16 Combine lines 7 and 15 and enter the result 16 • 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 amount, if any, from line 7 of that worksheet . . . . . . . . . . . . . . . . . . 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. 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 21 1,500.) • (\$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**

#### **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

2023

Attachment
Sequence No. 12A

Department of the Treasury Internal Revenue Service

Name(s) shown on return

SHYAM DEVARAJ

Social security number or taxpayer identification number 193-98-0774

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.

**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.

	<ul><li>(A) Short-term transactions</li><li>(B) Short-term transactions</li><li>(C) Short-term transactions</li></ul>	reported on	Form(s) 1099	9-B showing bas	•		•	<del>)</del> )
1	(a)  Description of property	(b) Date acquired	(c) Date sold or disposed of	<b>(d)</b> Proceeds	(e) Cost or other basis See the <b>Note</b> 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.)	(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).
APEX	CLERING	01/01/23	12/31/23	23,004.	26,139.	W	157.	-2,978.
APEX	CLERING	01/01/23	12/31/23	52.	48.			4.
neç Scl	tals. Add the amounts in column gative amounts). Enter each tota hedule D, line 1b (if Box A above	al here and inc e is checked), <b>lir</b>	lude on your ne 2 (if Box B	23.056	26.187		157	-2.974

**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.

OMB No. 1545-0074

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

Your social security number

SHY	AM DEVARAJ						193-98	3-0774	
Par									
	Note: If you are in the business of renting personal proper	ty, use	Schedule	<b>C</b> . See	instru	ctions. If you ar	e an indiv	ridual, rep	ort farm
	rental income or loss from <b>Form 4835</b> on page 2, line 40.	4 - CI -		0000	) !				- <b>V</b> N -
	Did you make any payments in 2023 that would require you								
В	f "Yes," did you or will you file required Form(s) 1099? .							. <u> </u>	s No
1a	Physical address of each property (street, city, state, ZIF	ode	e)						
Α	MAHALAKSHMI LAYOUT BANGALORE BANGALOR	E ]	IN 5600	196					
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate proper above, report the number of fair r		Fa	ir Rental Days	Person Day		QJV		
Α	personal use days. Check the QJ			Α		365		0	П
В	if you meet the requirements to fi			В					
С	qualified joint venture. See instru	Ctions	5.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land		7	Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (descri	be)		
	<u> </u>		1						
l a. a				A		Propertie B	es:		С
Incon 3		3		A	00.	В			<u> </u>
4	Rents received	4			00.				
Expe	Royalties received	4							
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1 7	25.				
8	Commissions	8		Δ,/	۷۶.				
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		1 0	00.				
12	Mortgage interest paid to banks, etc. (see instructions)	12		Ι, υ	00.				
13	Other interest	13							
14	Repairs	14		4 0	75.				
15	Supplies	15			01.				
16	Taxes	16		2,0	01.				
17	Utilities	17		4.3	30.				
18	Depreciation expense or depletion	18			46.				
19	Other (list)	19		, -					
20	Total expenses. Add lines 5 through 19	20		18,0	77.				
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	-	-17,4	77.				
22	Deductible rental real estate loss after limitation, if any,								
	on Form 8582 (see instructions)	22	(	17,47	77.)	(	)(	(	)
23a	Total of all amounts reported on line 3 for all rental proper	rties			23a		600.		
b	Total of all amounts reported on line 4 for all royalty prope	erties			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	4	,346.		
е	Total of all amounts reported on line 20 for all properties				23e	18	,077.		
24	Income. Add positive amounts shown on line 21. Do not	inclu	de any los	sses			24		
25	Losses. Add royalty losses from line 21 and rental real estate	e losse	es from lin	e 22. E	nter to	tal losses here	25 (	(	17,477.)
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do not						ו   ו		
	Schedule 1 (Form 10/0) line 5. Otherwise include this an	nount	in the tot	al on li	no /11	on nage 2	06		_17 /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 SHYAM DEVARAJ Sch E MAHALAKSHMI LAYOUT 193-98-0774 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 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 4,346. 124,710. 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 4,346. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.