Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

ERO must obtain and retain completed Form 8879. ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpay	/er s name	Social security	y numb	er
FNU	J ARZOO UZMA ASIF	851-69-	-3718	3
Spouse	e's name	Spouse's soci	ial secu	rity number
Par	t I Tax Return Information – Tax Year Ending December 31, 2023 (Enter	year you ar	re 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	101,527.
2	Total tax		2	14,596.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	17,333.
4	Amount you want refunded to you		4	2,737.
5	Amount you owe		5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of periury. I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

		TTO		DIN
GLOBAL	TAXES	лтс.	to enter or generate my	PIN

9	3	7	1	8	
	er fiv i't er				as

my

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

X I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's s	ignature D	ate 🖡					 		
	Practitioner PIN Method Returns Only—continue	bel	ow						
Part III	Certification and Authentication – Practitioner PIN Method Only								
ERO's EFII	N/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2	2	 	 0 all zei	 2	7 1	1

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature 🕨		Date 🕨	
	O Must Retain This Form — See nit This Form to the IRS Unless I		
For Denominarily Deduction Act Nation and Va		BEV 02/22/24 BBO	Earm 8870 (Bay, 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 02/22/24 PRO

1040-NR Department of the Treas	ent Alien Internal Reven	nue Service come Tax Returi	n 20 23	OMB No. 15	45-0074	IRS Use Only- or staple in th	nis space.
For the year Jan. 1–Dec. 31, 2023, or other tax year	ar beginning	, 2023,	ending	,	20	See ser instruc	
Your first name and middle initial	Last na					lentifying nu	
						structions)	
FNU	ARZO	O UZMA ASIF			851	-69-3718	
Home address (number and street). If you have a	P.O. box, see ins	tructions.				Apt	. no.
3521 WILSHIRE WAY						51	21
City, town, or post office. If you have a foreign ad	dress, also comp	lete spaces below.		State		ZIP code	
RICHARDSON				TX		75082	
Foreign country name	Foreigr	n province/state/county		Foreign p	oostal co	de	
Filing Single Married 6							
Status	iling separately (N		ng surviving spous	. ,	🗌 Es	state	Trust
Check only	nter the child's na	ame if the qualifying pers	son is a child but n	ot your depe	endent:		
one box							
Digital Assets At any time during 2023, did you							
otherwise dispose of a digital ass	set (or a financial	interest in a digital asset)? (See instructions				X No
Dependents		(2) Dependent's				x if qualifies for	r (see inst.): for other
(see instructions): (1) First name	ast name	identifying number	(3) Relationship to	you Chil	d tax cred	11T I	ndents
]
If more than four dependents, see							<u> </u>
instructions and							<u> </u>
	W/ 0, have 1 (and i						
Income 1a Total amount from Form(s) Effectively b Household employee wage		,			. 1a . 1b		,550.
Effectively b Household employee wage Connected c Tip income not reported on	•				. 10		
With U.S. d Medicaid waiver payments	,	,			. 1d		
Trade or e Taxable dependent care be	nefits from Form	2441, line 26	· · · · · ·		. 1e	•	
Business f Employer-provided adoption	n benefits from F	orm 8839, line 29 .			. 1f		
g Wages from Form 8919, lin					. 1 g		
Form(s) W-2, n Other earned income (see in	,				. 1h	1	
1042-S,iReserved for future useSSA-1042-S,iBeserved for future use			<mark>1</mark> i				
BBB-1042-S			• • • • • • • •		. <u>1</u> j		
and 8288-A k Total income exempt by a t here. Also line 1(e)	reaty from Sched	, , ,	tem L, 1k				
here. Alsoline 1(e)attachzAdd lines 1a through 1h .			· · · · · · ·		. 1z	112	,550.
Form(s) 2a Tax-exempt interest		1	able interest				<u> </u>
1099-R ifLaFactor of competition of the sector is th	. 3a	b Orc	linary dividends .		. 3b		
withheld. 4a IRA distributions	. 4a		able amount				
If you did not 5a Pensions and annuities .			able amount				
get a Form6Reserved for future useW-2, see7Outline (use)				-	_		
instructions. 7 Capital gain or (loss). Attack		, ,	•	_	_		
8 Additional income from Sch9 Add lines 1z, 2b, 3b, 4b, 5b		,.					<u>,023.</u> ,527.
10 Adjustments to income from						1 101	, , , , , , , , , , , , , , , , , , , ,
	•	orm 1040), line 26. These		-			
11 Subtract line 10 from line 9							,527.
12 Itemized deductions (from							
deduction (see instructions)			1 1	/India Tre	aty 12	13	,850.
13a Qualified business income							
b Exemptions for estates and	2 (,					
c Add lines 13a and 13b . 14 Add lines 12 and 13c .							,850.
14 Add lines 12 and 13c15 Subtract line 14 from line 1		enter -0- This is your ta					,850. ,677.
For Disclosure, Privacy Act, and Paperwork Redu						Form 1040 -	

Form 1040-NR (2	2023)							Page 2
Tax and	16	Tax (see instructions). Check if any from For	m(s): 1 🗌 88	14 2 497	2 3 🗌 _		16	14,596.
Credits	17	Amount from Schedule 2 (Form 1040), line	3				17	0.
	18	Add lines 16 and 17					18	14,596.
	19	Child tax credit or credit for other depende	nts from Schedu	ule 8812 (Form 104	40)		19	
	20	Amount from Schedule 3 (Form 1040), line	8				20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less	, enter -0				22	14,596.
	23a	Tax on income not effectively connected with	ith a U.S. trade o	or business from				
		Schedule NEC (Form 1040-NR), line 15 .			23a			
	b	Other taxes, including self-employment tax	k, from Schedule	e 2 (Form 1040),				
		line 21			23b			
	С	Transportation tax (see instructions)			23c			
	d	Add lines 23a through 23c					23d	
	24	Add lines 22 and 23d. This is your total tax	(24	14,596.
Payments	25	Federal income tax withheld from:						
	а	Form(s) W-2			25a 1	7,333.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	17,333.
	е	Form(s) 8805					25e	
	f	Form(s) 8288-A					25f	
	g	Form(s) 1042-S					25g	
	26	2023 estimated tax payments and amount	••				26	
	27	Reserved for future use			27			
	28	Additional child tax credit from Schedule 8			28			
	29	Credit for amount paid with Form 1040-C			29			
	30	Reserved for future use			30		-	
	31	Amount from Schedule 3 (Form 1040), line			31			
	32	Add lines 28, 29, and 31. These are your to					32	1 7 2 2 2
Defined	33 34	Add lines 25d, 25e, 25f, 25g, 26, and 32. The line 33 is more than line 24, subtract line					33 34	17,333.
Refund	35a	Amount of line 34 you want refunded to yo					35a	<u>2,737.</u> 2,737.
Direct deposit?	b	Routing number $\begin{vmatrix} 1 \\ 1 \end{vmatrix} \begin{vmatrix} 1 \\ 1 \end{vmatrix} \begin{vmatrix} 0 \\ 0 \end{vmatrix} \begin{vmatrix} 0 \\ 0 \end{vmatrix}$			Checking		554	2,151.
See instructions.	d	Account number 7 9 6 6 8 0				Cavings		
	e	If you want your refund check mailed to an		e the United State	s not shown or	nage 1		
	C							
	36	enter it here. Amount of line 34 you want applied to you	ır 2024 estimat	ed tax	36			
Amount	37	Subtract line 33 from line 24. This is the an						
You Owe		For details on how to pay, go to www.irs.go	ov/Payments or	see instructions .			37	
	38	Estimated tax penalty (see instructions) .			38			
Third	Do yo	ou want to allow another person to discuss th	nis return with th	e IRS? See instruc	ctions. 🗌 Y	es. Compl	ete below	. 🛛 No
Party	Desig	nee's	Phone		Perso	nal identifi	cation	
Designee	name	·	no.		numb	er (PIN)		
		penalties of perjury, I declare that I have examined they are true, correct, and complete. Declaration of		1 2 0		,		, ,
Sign								you an Identity
Here	Your	signature	Date	Your occupation				I, enter it here
пеге				SENIOR SOFT	WARE ENGINE		inst.)	
	Phone	e no.	Email address					
Paid	Prepa	arer's name Preparer'	s signature		Date	PTIN	Cł	heck if:
	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PR	IYA RAM SAGAF	GUPTA TALLAM	03/04/2024	P02082	2703 C	Self-employed
Preparer	Firm's	s name GLOBAL TAXES LLC				Phone no	o. (<u>67</u> 8)965-9522
Use Only	Firm's	s address 245 ROONEY CT E BR	UNSWICK N	J 08816		Firm's El	N 84-	3171965
Go to www.irs.g	gov/Fo	rm1040NR for instructions and the latest inform	ation.	BAA	REV 02/22/24 PF	20	Form	1040-NR (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
FNU ARZOO UZMA	ASIF	851-69	-3718
Part I Additio	onal Income		

Par	t 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	-11,023.
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		
I	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			
		8m	_	
n	Section 951(a) inclusion (see instructions)	<u>8n</u>	_	
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	0- (
	1040, line 1a or 1d	8s (4	
t	Pension or annuity from a nonqualifed deferred compensation plan or	8t		
	a nongovernmental section 457 plan	8u	-	
u -	Wages earned while incarcerated	ou	-	
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 additional income . Enter		-	
10	1040, 1040-SR, or 1040-NR, line 8		10	-11,023.
For Pa	perwork Reduction Act Notice, see your tax return instructions.		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-basis gover	nment		
	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)			
b	Deductible expenses related to income reported on line 8I 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			
ĥ	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		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here a	and on		
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/22/24 PRC)	Schedule 1 (Fo	orm 1040) 202:

SCHEDULE NEC (Form 1040-NR)

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0074

23

Attach to Form 1040-NR.

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

Name shown on Form 1040-NR

losses from property sales or

Report property sales or exchanges that are effectively connected with a U.S. business

on Schedule D (Form 1040),

Form 4797, or both.

(Form 1040).

exchanges that are from sources

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

Sequence No. 7B Your identifying number

2

Attachment

851-69-3718

FNU ARZOO UZMA ASIF

	amount of income under the appropriate rate of tax. See instructions.					(d) Other	(specify)
	Nature of Income		(a) 10%	(b) 15%	(c) 30%	%	(opeeniy) %
1	Dividends and dividend equivalents:						
а	Dividends paid by U.S. corporations	. 1a					
b	Dividends paid by foreign corporations	. 1b					
с	Dividend equivalent payments received with respect to section 871(m) transaction	ns 1c					
2	Interest:						
а	Mortgage	. 2a					
b	Paid by foreign corporations						
с	Other						
3	Industrial royalties (patents, trademarks, etc.)	. 3					
4	Motion picture or TV copyright royalties	. 4					
5	Other royalties (copyrights, recording, publishing, etc.)	. 5					
6	Real property income and natural resources royalties	. 6					
7	Pensions and annuities	. 7					
8	Social security benefits	. 8					
9	Capital gain from line 18 below	. 9					
10	Gambling—Residents of Canada only. Enter net income in column (c). If zero or less, enter -0						
а	Winnings						
b	Losses	. 10 c					
11	Gambling—Residents of countries other than Canada. Note: Enter winnings only. Losses aren't allowed	. 11					
12	Other (specify):						
		12					
13	Add lines 1a through 12 in columns (a) through (d)						
14	Multiply line 13 by rate of tax at top of each column	. 14					
15	Tax on income not effectively connected with a U.S. trade or business. Add co	lumns (a)	through (d) of line 14	4. Enter the total here	e and on Form 1040	-NR, line 23a 15	
	Capital Gains and Losse	s From	Sales or Excha	inges of Proper	ty		
	nly the capital gains and 16 (a) Kind of property and description (b) Date	acquired	(c) Date sold	(d) Sales price	(e) Cost or	(f) LOSS	(g) GAIN

mm/dd/yyyy

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-

For Paperwork Reduction Act Notice, see the	e Instructions for Form	1040-NR

(if necessary, attach statement of

descriptive details not shown below)

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

mm/dd/yyyy

18

If (d) is more than (e),

subtract (e) from (d).

If (e) is more than (d),

subtract (d) from (e).

. .

other basis

17 (

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

OMB No. 1545-0074 2023

	ent of the Treasury Revenue Service	Go to www.irs.gov/Form1040N Ans	IR for instructions and swer all questions.	the latest information		Attachment Sequence N	lo. 7C	
Name sł	hown on Form 1040-NR				Your identify	ing number		
FNU	ARZOO UZMA ASIF				851-69-			
Α	Of what country or country	ries were you a citizen or nation	al during the tax year	? INDIA				
в	In what country did you o	claim residence for tax purpose	es during the tax year?	'United States				
С		be a green card holder (lawful p						
D	Were you ever:							
1.	A U.S. citizen?					Ves	🛛 No	
2.	A green card holder (lawf	n card holder (lawful permanent resident) of the United States?						
		or (2), see Pub. 519, chapter 4						
Е		last day of the tax year, enter	your visa type. If you	didn't have a visa, en	ter your U.S	i.		
	immigration status on the	last day of the tax year. F1				-		
F	Have you ever changed y	our visa type (nonimmigrant sta	atus) or U.S. immigrati	on status?		Yes	🗙 No	
	If you answered "Yes," in	dicate the date and nature of th	e change:					
G	List all dates you entered	and left the United States durin	ng 2023. See instructio	ons.				
		of Canada or Mexico AND co			_			
	check the box for Canad	da or Mexico and skip to item I	<u>н.</u>	· · 🗌 Canada)		
	Date entered United Stat		tes Da	ate entered United State	s Date de	eparted Unite	d States	
	mm/dd/yy	mm/dd/yy		mm/dd/yy		mm/dd/yy		
н		uding vacation, nonworkdays, an						
	Did you file a LLS income	, 2022 e tax return for any prior year? .	, and 20	305	· · ·	Yes	🛛 No	
I	If "Ves " give the latest ve	e tax return for any phor year?						
J	Are you filing a return for	a trust?				 Yes	🔀 No	
U		/e a U.S. or foreign owner under						
		contribution from a U.S. persor					🗌 No	
к		pensation of \$250,000 or more					X No	
··	•	Iternative method to determine						
L		ax-If you are claiming exempt						
		pelow. See Pub. 901 for more in			··· · · · · · · · · · · · · · · · · ·	5	, , .	
1.	Enter the name of the cou	ntry, the applicable tax treaty ar	ticle, the number of mo	onths in prior years you	claimed the	treaty benef	it, and the	
	amount of exempt income	in the columns below. Attach F	orm 8833 if required. S	See instructions.		-		
	(a)) Country	(b) Tax treaty article	(c) Number of month	ns (d) /	Amount of ex	empt	
				claimed in prior tax ye	ars incom	e in current t	ax year	
	· · · · · · · · · ·							
-		unt on Form 1040-NR, line 1k. [-	— ••		
		n a foreign country on any of the					∐ No	
3.		enefits pursuant to a Competen	•			∐ Yes	🗙 No	
		the Competent Authority deter	mination letter to your	return.				
M	Check the applicable box		noomo from roal pros	why logated in the Linite	od Stataa ca	offootivolus	oppostod	
1.		are making an election to treat in less under section 871(d). See i						

2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions

BAA

For Paperwork Reduction Act Notice, see the Instructions for Form 1040-NR.

REV 02/22/24 PRO Schedule OI (Form 1040-NR) 2023

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury Internal Revenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

2023
Attachment Sequence No. 13

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

	ARZOO UZMA ASIF						0-168	9-3718	
Part	Income or Loss From Rental Real Estate a Note: If you are in the business of renting personal properties			C See	instru	ctions If you	are an indi	vidual ren	ort farm
	rental income or loss from Form 4835 on page 2, line 40	l.	ouncounc	0.000	, in Stilu			nauai, rep	ortiann
Α	Did you make any payments in 2023 that would require you	u to file	Form(s) 1	099? 5	See ins	structions .		. 🗌 Ye	s 🛛 No
B	f "Yes," did you or will you file required Form(s) 1099?							. 🗌 Ye	es 🗌 No
1a	Physical address of each property (street, city, state, Z								
Α	101, MEENA CHAMBERS NAVSARI GUJARAT IN		,						
B			115						
1b	Type of Property 2 For each rental real estate prop	ertv lis	ted		Fa	ir Rental	Persor	nal Use	A 11/
	(from list below) above, report the number of fai	r rental	and			Days		iys	QJV
Α	3 personal use days. Check the C			Α		365		0	
В	if you meet the requirements to qualified joint venture. See instr			В					
С	quained joint venture. See insti	uctions	5.	С					
Туре	of Property:								
1	Single Family Residence 3 Vacation/Short-Term Re	ntal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	alties	8	Other (desc	ribe)		
						Propert			
Incom	ne:			Α		B			С
3	Rents received	3			84.				-
4	Royalties received	4		-					
Exper									
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7		1,3	84.				
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11		8	69.				
12	Mortgage interest paid to banks, etc. (see instructions)	12							
13	Other interest	13							
14	Repairs	14		1,5	84.				
15	Supplies	15		1,8	36.				
16	Taxes	16							
17		17			54.			 	
18	Depreciation expense or depletion	18		3,5	80.				
19	Other (list) Total expenses. Add lines 5 through 19	. 19		11 0	0				
20				11,6	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 Form 6198	21	.	-11,0	23				
22	Deductible rental real estate loss after limitation, if any,			±±,0	<u> </u>				
22	on Form 8582 (see instructions)	22	(_	11,02	2	()	(
23a	Total of all amounts reported on line 3 for all rental prop		N	±±,02	23a	(584.		
b	Total of all amounts reported on line 4 for all royalty pro				23b				
c	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		3,580.		
e	Total of all amounts reported on line 20 for all properties				23e		,607.		
24	Income. Add positive amounts shown on line 21. Do no						. 24		
25	Losses. Add royalty losses from line 21 and rental real esta		-		nter to	tal losses he		(11,023.
26	Total rental real estate and royalty income or (loss).								
	here. If Parts II, III, and IV, and line 40 on page 2 do n	ot app	ly to you,	also e	nter tl	nis amount o			
	Schedule 1 (Form 1040), line 5. Otherwise, include this a	amount	t in the to	tal on li	ne 41	on page 2	· 26		-11,023

Form 8582	
Department of the Treasury Internal Revenue Service	Go t
Name(s) shown on return	

Name(s) shown on return

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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 20 3 Attachment Sequence No. **858**

Identifying number 851-69-3718

Par	t 2023 Passive Activity Loss Caution: Complete Parts IV ar		eting Part I.				
	I Real Estate Activities With Active Pa ance for Rental Real Estate Activities	articipation (For th	e definition of act	ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter th Combine lines 1a, 1b, and 1c	unt from Part IV, co ne amount from Pa	olumn (b)) art IV, column (c))	1b (1c (0. 11,023.)) 	1d	-11,023.
All Ot	her Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter th Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (2c ()	2d	
3	Combine lines 1d and 2d and subtra zero or more, stop here and include prior year unallowed losses entered of normally used	this form with you on line 1c or 2c. F	ur return; all losse Report the losses	es are allowed, inc	luding any	3	-11,023.
		loss, go to Part II. loss (and line 1d is	zero or more) ski	in Part II and go to	line 10		
	on: If your filing status is married filing . Instead, go to line 10.		-			year,	do not complete
Par	t Special Allowance for Rer	ntal Real Estate	Activities With	Active Participa	ation		
	Note: Enter all numbers in Par			tions for an examp	ole.		
4	Enter the smaller of the loss on line 1					4	11,023.
5	Enter \$150,000. If married filing separ	-			.50,000.		
6	Enter modified adjusted gross income				12,550.		
_	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	to line 5, skip line	s 7 and 8 and ent				
7	Subtract line 6 from line 5			7	37,450.	-	
8	Multiply line 7 by 50% (0.50). Do not en				1	8	18,725.
9	Enter the smaller of line 4 or line 8. If Total Losses Allowed	line 3 includes any	CRD, see instruc	ctions		9	11,023.
Pari			4-4-1			10	
10	Add the income, if any, on lines 1a an				T	10	0.
11	Total losses allowed from all passiv out how to report the losses on your to					11	11,023.
Par				ee instructions.			11,025.
	•	Curren		Prior years	Over	rall ga	in or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	I	(e) Loss
101	,MEENA CHAMBERS	0.	11,023.				11,023.
	Enter on Part I, lines 1a, 1b, and 1c	0.	11,023.				
For Pa	perwork Reduction Act Notice, see instru	uctions.		REV 02/22	2/24 PRO		Form 8582 (2023)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

	Name of activity		Current year			Prior y	ears	Overall gain or loss			
	Name of activity	(a) Net	(a) Net income (line 2a)		(b) Net loss (line 2b)		owed e 2c)	ed (d) Gain		(e) Loss	
			, 2a)	(11)		1033 (111	6 20)		-		
									_		
Total Enter	on Part I, lines 2a, 2b, and 2	Pc									
Part VI	Use This Part if an An		wn on F	Part II,	Line 9. S	ee instruc	tions.				
			schedule	,							
	Name of activity	and line to be rep	number ported on ructions)	(a)	Loss	(b) Ratio		(c) Special allowance		(d) Subtract column (c) from column (a).	
101,MEE1	NA CHAMBERS	E Lr	n 22	:	11,023.	1.0000	0000	11,02	3.	0.	
Total					11,023.	1.0	n	11,02	2	0.	
Part VII	Allocation of Unallow	ed Losses.	See instr			110	0	11,02	5.		
			m or sche								
	Name of activity	an to t	d line nun pe reporte e instruct	nber ed on	(a) L	LOSS		(b) Ratio	(c) Unallowed loss		
Total								1.00			
Part VIII	Allowed Losses. See i	nstructions.									
	Name of activity	an to t	m or sche d line nun be reporte e instruct	nber ed on	(a) L	LOSS	(b) Unallowed loss		(0	(c) Allowed loss	
Total											

REV 02/22/24 PRO

Form **8582** (2023)