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

Past Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)	Submission Identification Number (SID)								
Part Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)	Taxpayer's name	Social security number							
Enter whole dollars only on lines 1 through 5. Note: Form 1040-SS filter use line 4 only. Leave lines 1, 2, 3, and 5 blank. 1	PRASHANT KUMAR	760-56-	-1860	١					
Enter whole dollars only on lines 1 through 5. Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	Spouse's name	Spouse's soci	ial secu	rity number	•				
Enter whole dollars only on lines 1 through 5. Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank. 1	Part I Tax Return Information — Tax Year Ending December 31. 2023 (E	 Enter vear vou a	re aut	horizina.)				
1 1 31, 888. 2 1, 728. 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099					,				
2 2 2, 7,28 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 24, 975 4 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3, 247 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 3 3 24, 975 5 Amount you want refunded to you 4 4 3 3 24, 975 5 Amount you want refunded to you 4 4 3 3 24, 975 5 Amount you want refunded to you 4 4 3 24 4 4 5 6 6 5 Amount you want refunded to you want price to you you you you you you you want price to you you you you you you you you you yo	Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.								
A Amount you want refunded to you B Amount you want refunded to you A Amount you want refunded to you B Amount you B	1 Adjusted gross income		1	131	,888.				
Amount you want refunded to you Amount you well Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjuny, 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 whowledge and belief, it is tine, correct, and complete. I further declare that the amounts for 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 active declare that the amounts for Part I above are mounts from the income tax return (original or amended) I am now authorizing, and to the best of the consent of the transmission, (b) the reason of the provider that is the consent of the transmission of the transmission of the transmission of the transmission of the return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an active of the part of the transmission of the transmission of the return originator (ERO) to send my return to the IRS and to receive the new that the part of the part of the transmission of the transmiss			2	21	,728.				
S Amount you owe S S Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, 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, 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, and to 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 and count indication on the text preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in to termin the text preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the text preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the text preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution in the text preparation software for payment of my federal taxes owed on this return and/or a payment of 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 (Pily) below is my signature for the income tax return (original or amended) I am now authorizing. Check this box only if it pour are entering your own PIN and your return i									
Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Underpensities of perjury, I declate 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, if urther declate that the amounts in Part I above are the amounts from the income tax return foriginal or amended). I am now authorizing, and to the best of my declare that the amounts in Part I above are the amounts from 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 retund, 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 withdrawall direct debit) entry to the financial institution excount indicated in the tax preparation software for payment of my federal taxes owned on this return and/or a payment of settimated tax, and the financial institution is 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 1-888-353-437. Payment cancellation requests be received not 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 raceive confidential information necessary to answer inquiries and resolve issues related to the payment of the electronic payment of taxes to raceive Withdrawal Consent. Taxpayer's PIN: check one box only I authorize ERO firm name ERO				3	<u>,247.</u>				
Under penalties of perjun; 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 bellet, 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. Lonsent to allow my intermediate service provider, transmitter, or electronic return originator (EFO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection, (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 indication as one 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 authorizate to remain the Interview of the U.S. Treasury Financial Agent at 1-888-358-4537. 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. 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 PIN: check one box only 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 be	5 Amount you owe	nd keep a cop	-	our retu	rn)				
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I authorize GLOBAL TAXES LLC to enter or generate my PIN 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 PIN: check one box only ☐ I authorize									
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ERO Must Retain This Form — See Instructions	authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am	submitting this retu	rn in a	ccordance	am now with the				
	ERO's signature ▶ Date	•							
Dan't Submit This Form to the IDS Unless Deguested To De Se	ERO Must Retain This Form — See Instruction Don't Submit This Form to the IRS Unless Requested								

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



1040		artment of the Treasury—Internal Revenue Servi		urn G	20 2 :	3	OMB No. 1545	-0074	IRS Use	Only-	-Do not w	rite or sta	aple in this s	space.
For the year Jar	n. 1–Dec	c. 31, 2023, or other tax year beginning		,	, 2023, endir	ng			, 20		See se	parate i	instructio	ons.
Your first name	and m	iddle initial	Last nar	me							Your so	cial sec	urity num	nber
PRASHANT	Г		KUMA	R							760	56	1860	
		s first name and middle initial	Last nar										security	
	•	er and street). If you have a P.O. box, see	instructio	ons.					Apt. no.	- 1			ection Car ou, or you	
		N COURT AVE NE ice. If you have a foreign address, also co	mploto cr	nacos bolow		Stat	to	ZIP c	odo				jointly, w	
	JOST OIII	ice. Il you have a loreigh address, also co	impiete st	paces below.	•			303			to go to	this fur	nd. Checl	king a
Atlanta Foreign country	v name			oreign provi	nce/state/c	GA			n postal c		box bel		not chanç	ge
r oreign country	y mame			oreign provi	1100/31410/01	ount,	у	i orcig	jii postai c	,ouc	your tax	Yo		Spouse
Filing Status	s 🗵	Single					Head of he	ouseh	old (HO	 -				
Check only		Married filing jointly (even if only o	ne had ir	ncome)										
one box.		Married filing separately (MFS)					Qualifying	surviv	ing spo	use (0	QSS)			
	lf y	you checked the MFS box, enter the	name o	of your spou	use. If you	che	cked the HOF	or Q	SS box,	enter	the chi	ld's na	me if the)
	qu	ualifying person is a child but not you	ır depen	dent:										
Digital	At a	ny time during 2023, did you: (a) rec	eive (as	a reward, a	ward, or p	ayn	nent for prope	rty or	services); or (b) sell,			
Assets	exch	nange, or otherwise dispose of a dig	ital asse	t (or a finan	cial intere	st in	ı a digital asse	et)? (Se	ee instru	ction	s.)		es 🛛 I	No
Standard	Som	neone can claim: 🗌 You as a de	pendent	t 🗌 Yo	ur spouse	as a	a dependent							
Deduction		Spouse itemizes on a separate retur	n or you	were a dua	al-status a	lien								
Age/Blindness	s You	: Were born before January 2, 1	959 [Are blind	Spoi	use:	: Was bor	n befo	ore Janua	ary 2,	, 1959		s blind	
Dependent	s (see	instructions):		(2) Soci	ial security		(3) Relationsh	iip (4) Check t	he bo	x if quali	fies for (see instru	ıctions):
If more		irst name Last name			ımber		to you		Child t	ax cre	edit	Credit fo	r other dep	pendents
than four														
dependents, see instruction	c													
and check	· 													
here]													
Income	1a	Total amount from Form(s) W-2, b	•		,						1a		147,1	108.
Attach Form(s)	b	Household employee wages not re	•	` '	W-2						1b			
W-2 here. Also	С	Tip income not reported on line 1a (see instructions)							1c	:				
attach Forms W-2G and	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d					
1099-R if tax	е	Taxable dependent care benefits f									1e			
was withheld.	f	Employer-provided adoption bene	fits from	Form 8839	9, line 29						1f			
If you did not	g	Wages from Form 8919, line 6 .									1g			
get a Form W-2, see	h	Other earned income (see instruct	,					· ·			1h	_		0.
instructions.	i	Nontaxable combat pay election (s	see instr	uctions) .			<u>li</u>						1.45 1	1.00
	<u>z</u>	Add lines 1a through 1h									1z		147,1	
Attach Sch. B if required.	2a	· —	2a		1 4		axable interest				2b			597.
ii required.	3a		3a	-			rdinary divide				3b			14.
Standard	4a	-	4a				axable amoun				4b			
Deduction for—	5a		5a				axable amoun				5b			
Single or Married filing	6a	,	6a				axable amoun	t		٠ ـ	6b			
separately,	c	If you elect to use the lump-sum e		•	,		,						2 /	200
\$13,850 Married filing	7	Capital gain or (loss). Attach Sche		•	•					. L	7	_		000.
jointly or Qualifying	8	Additional income from Schedule	-								8		-12,8	
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7		•							9		131,8	<u> </u>
\$27,700 Head of	10	Adjustments to income from Sche									10		101 (
household, \$20,800	11	Subtract line 10 from line 9. This is	•	-							11		131,8	
If you checked	12	Standard deduction or itemized		,		,					12		13,8	850.
any box under Standard	13	Qualified business income deduct									13		12 (
Deduction, see instructions.	14	Add lines 12 and 13					 avable incom				14		118 (350.

Form 1040 (202	3)							Page 2
Tax and	16	Tax (see instructions). Check if any from Fo	rm(s): 1 881	4 2 4972	3 🗌		16	21,728.
Credits	17						17	
	18	Add lines 16 and 17					18	21,728.
	19	Child tax credit or credit for other depende	ents from Sched	lule 8812			19	
	20	Amount from Schedule 3, line 8					20	
	21	Add lines 19 and 20					21	
	22	Subtract line 21 from line 18. If zero or less	s, enter -0				22	21,728.
	23	Other taxes, including self-employment ta	x, from Schedul	e 2, line 21			23	0.
	24	Add lines 22 and 23. This is your total tax	•	-			24	21,728.
Payments	25	Federal income tax withheld from:						
,	а	Form(s) W-2			25a 24	,975.		
	b	Form(s) 1099			25b			
	С	Other forms (see instructions)			25c			
	d	Add lines 25a through 25c					25d	24,975.
If you have a	26	2023 estimated tax payments and amount	applied from 20	022 return			26	
qualifying child,	27	Earned income credit (EIC)		No .	27			
attach Sch. EIC.	28	Additional child tax credit from Schedule 88	12		28			
	29	American opportunity credit from Form 88	63, line 8		29			
	30	Reserved for future use			30		1	
	31	Amount from Schedule 3, line 15			31			
	32	Add lines 27, 28, 29, and 31. These are yo	ur total other p	ayments and refu	indable credits		32	
	33	Add lines 25d, 26, and 32. These are your					33	24,975.
Refund	34	If line 33 is more than line 24, subtract line	24 from line 33	. This is the amour	nt you overpaid		34	3,247.
	35a	Amount of line 34 you want refunded to y	ou. If Form 888	B is attached, ched	ck here	. 🗆	35a	3,247.
Direct deposit?	b	Routing number 0 6 1 0 0 0			_	Savings		
See instructions.	d	Account number 3 3 4 0 6 1	3 9 1 8	9 2 -		•		
	36	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 ai	nount you owe					
You Owe		For details on how to pay, go to www.irs.g					37	
	38	Estimated tax penalty (see instructions)			38			
Third Party Designee		you want to allow another person to d tructions		rn with the IRS?		omplete b	elow.	⋉ No
Ū		signee's	Phone			onal identif	ication	
	na		no.			er (PIN)		
Sign Here		der penalties of perjury, I declare that I have examinef, they are true, correct, and complete. Declaration		, , ,		,		, ,
. 10.0	Yo	ur signature	Date	Your occupation				nt you an Identity
l-i-t0				DATA SCIENTIST			nst.)	IN, enter it here
Joint return? See instructions.	Sn	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupati		,		nt your spouse an
Keep a copy for your records.						I	ity Prot	ection PIN, enter it here
	Ph	one no. (404)509-2197	Email address	PRASHANTKUMAR	101193@GMAIL.CO)M		
Doid	Pre	parer's name Preparer's sign	nature		Date	PTIN		Check if:
Paid	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIY	A RAM SAGAR	GUPTA TALLAM	03/10/2024	P02082	2703	Self-employed
Preparer Use Only	Fir	n's name GLOBAL TAXES LLC				Phon	e no. (678)965-9522
————	Fir	m's address 245 ROONEY CT E BE	RUNSWICK N	J 08816		Firm'	s EIN	84-3171965
Go to www irs o	ov/Forr	1040 for instructions and the latest information		DAA	DEV 03/04/34 DDO			Form 1040 (2023)

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

PRASHANT KUMAR

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
760-56	-1860

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	ich Schedule E .	5	-12,831.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
а	Net operating loss	8a (
b	Gambling	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (
е	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
ı	Income from the rental of personal property if you engaged in the rental			
	for profit but were not in the business of renting such property	81		
m	Olympic and Paralympic medals and USOC prize money (see			
	instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
0	Section 951A(a) inclusion (see instructions)	80		
р	Section 461(I) excess business loss adjustment	8p		
q	Taxable distributions from an ABLE account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
Z	Other income. List type and amount:			
		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8		10	-12,831.

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

Par	II Adjustments to Income				
11	Educator expenses			11	
12	Certain business expenses of reservists, performing artists, and fee				
	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)	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:	04-			
0E		24z		0.5	
25 26	Total other adjustments. Add lines 24a through 24z			25	
26	Add lines 11 through 23 and 25. These are your adjustments to income Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					de 4 (Ferma 4040) 0000
	BAA	REV 03/	04/24 PRO	ocnedu	ile 1 (Form 1040) 2023

SCHEDULE D (Form 1040)

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.

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Go to www.irs.gov/ScheduleD for instructions and the latest information. Internal Revenue Service Name(s) shown on return PRASHANT KUMAR

Your social security number 760-56-1860 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, combine the result (sales price) (or other basis) whole dollars. line 2. column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 3,578.) Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 -3,578. Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

15

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -3,578.• 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 3,000.) • (\$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 X 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.

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

PRA	SHANT KUMAR						760-5	6-1860)		
Par	Note: If you are in the business of renting personal proper	rty, use		C . See	instru	ctions. If you	are an indiv	vidual, rep	oort farm		
	rental income or loss from Form 4835 on page 2, line 40.										
	Did you make any payments in 2023 that would require you								es 🗵 No		
В	If "Yes," did you or will you file required Form(s) 1099? .							. ∐ Y	es 🗌 No		
1a	Physical address of each property (street, city, state, ZII	P code)								
A	MAJESTIC JANKI, DANAPUR PATNA BIHAR IN	8015	03							_	
В	·										
С											
1b	Type of Property 2 For each rental real estate property	erty liste	ed		Fa	ir Rental	Person	al Use	0.07		
	(from list below) above, report the number of fair	rental a	and	Days			Da	ys	QJV		
Α	personal use days. Check the Q			Α		365		0			
В	if you meet the requirements to a qualified joint venture. See instru			В							
С		301101101		С							
	of Property:										
	Single Family Residence 3 Vacation/Short-Term Ren	ntal	5 Land			Self-Rental					
2	Multi-Family Residence 4 Commercial		6 Roya	ılties	8	Other (desc	ribe)				
						Propert	ies:				
Incor	ne:			Α		В			С		
3	Rents received	3		6	13.						
4	Royalties received	4									
Expe	nses:										
5	Advertising	5									
6	Auto and travel (see instructions)	6									
7	Cleaning and maintenance	7		1,6	42.						
8	Commissions	8									
9	Insurance	9									
10	Legal and other professional fees	10		1 0	2.5						
11	Management fees	11		1,2	35.						
12	Mortgage interest paid to banks, etc. (see instructions)	12									
13 14	Other interest	13		1 0	46.					_	
15	Repairs	15			31.						
16	Taxes	16		۷, ۱	J					_	
17	Utilities	17		2.2	46.						
18	Depreciation expense or depletion	18		4,3						_	
19	Other (list)	19		, -						_	
20	Total expenses. Add lines 5 through 19	20		13,4	44.					_	
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	-	-12,8	31.						
22	Deductible rental real estate loss after limitation, if any,										
	on Form 8582 (see instructions)	22	(12,83		()	(
23a	Total of all amounts reported on line 3 for all rental prope				23a		613.				
b	Total of all amounts reported on line 4 for all royalty prop				23b						
C	Total of all amounts reported on line 12 for all properties				23c		1 2 4 4				
d	Total of all amounts reported on line 18 for all properties				23d		1,344.				
e	Total of all amounts reported on line 20 for all properties				23e	1.	3,444.				
24 25	Income. Add positive amounts shown on line 21. Do not		-			tal lagges have	. 24	(12 021		
25 26	Losses. Add royalty losses from line 21 and rental real estat							(12,831.	,	
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 a						26		-12,831		