### 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

Subm	ission Identification Number (SID)		-		
Taxpaye	er's name	Social securit	y numb	er	
HEM	ANTH SAI ALAPARTHI	383-97-	-389	7	
Spouse	's name	Spouse's soc	ial secu	ırity numb	er
Part	Tax Return Information — Tax Year Ending December 31, 2023 (Enti-	 er year you a	re au	thorizing	g.)
	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		9,174.
2	Total tax		2		9,679.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		3,122.
4	Amount you want refunded to you		4		3,443.
5 Dowt	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and penalties of perjury, I declare that I have examined a copy of the income tax return (original or amende				
to send for any Agent to payme authori payme busines taxes to person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, trans d my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for revidelay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account in the financial axes owed on this return and/or a payment of estimated tax, and the financial institution is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation resist days prior to the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the lal identification number (PIR) below is my signature for the income tax return (original or amended) I	ejection of the tr U.S. Treasury andicated in the tation to debit the atte the authorizanguests must be the processing of payment. I furt	ansmised and its of an and its of an	ssion, (b) designate paration s to this acc o revoke ved no la ectronic p knowledge	the reason d Financial oftware for count. This (cancel) a ater than 2 payment of ge that the
	onic Funds Withdrawal Consent.				٦
	ayer's PIN: check one box only  I authorize GLOBAL TAXES LLC to enter or generate	7	3 8	3 9 7	
×	I authorize GLOBAL TAXES LLC to enter or generate FRO firm name	ř Ent		digits, but	
	signature on the income tax return (original or amended) I am now authorizing.	doi	n't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN med below.				
Your s	signature ▶ Date ▶				
Spous	se's PIN: check one box only				_
	I authorize to enter or generate	e mv PIN			as my
	ERO firm name	Ent		digits, but	
	signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I am if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN met below.				
Spous	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below	W			
Part	III Certification and Authentication — Practitioner PIN Method Only				
FRO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 4 9	6 0	8 2	7 1
	z i ivi ini zinci your dix digit zi iv lollowed by your ive digit don delected i ivi	Don't ent		-   -	·   -
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual income ized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subsements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of	mitting this retu	ırn in a	accordanc	
ERO's	s signature ▶ Date ▶				
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested To	Do So			

# E1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return



OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning			, 2023, ending					, 20	See separate instruc			structions.
Your first name	and mi	ddle initial	Last name					Your social security number				
HEMANTH	SAI		ALAPARTHI							383	97	3897
If joint return, s	pouse's	s first name and middle initial	Last na							Spouse's social security numb		
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.			Α	pt. no.		Presidential Election Campaig		
109 KLAN	BER(	G LN								Check here if you, or your		
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	spaces below.	Sta	te	ZIP co	ode				ointly, want \$3
ELLISVII	LΕ			MO 6			630	21	- 1	to go to this fund. Checking a box below will not change		
Foreign country	name			Foreign province/state/o	count	ty	Foreig	n postal c	ode	your tax	k or refun	
											You	Spouse
Filing Status	$\mathbf{x}$	Single				☐ Head of ho	ouseho	old (HOH	<del>1</del> )			
Check only		Married filing jointly (even if only or										
one box.		Married filing separately (MFS)				☐ Qualifying	surviv	ing spol	use (C	QSS)		
	If y	ou checked the MFS box, enter the	name o	of your spouse. If you	ı che	ecked the HOH	or QS	SS box,	enter	the ch	ild's nam	ne if the
	qu	alifying person is a child but not you	r deper	ndent:								
Digital	At ar	ny time during 2023, did you: (a) rece	eive (as	a reward, award, or	navr	ment for prope	rtv or s	services	): or (	b) sell.		
Assets		ange, or otherwise dispose of a digi									☐ Yes	s 🛛 No
Standard	Som	eone can claim: You as a dep	penden	t	e as	a dependent						
Deduction		Spouse itemizes on a separate returr		•		•						
A (DU. d									- 0	1050		L. P I
		Were born before January 2, 19	959 <u> </u>	Ţ	ouse		14		_			blind
Dependents	(see instructions):			(2) Social security number	,	(3) Relationsh to you	ip (4	Child t				ee instructions): other dependents
If more	(1) F	(1) First name Last name		Hamber		to you				uit	Credit for	
than four dependents,								[	<del>_</del>			
see instructions	s —							[	<del></del>			
and check here								l	_			
-	1a	Total amount from Form(s) W-2, bo	ov 1 (co	oo instructions)				l		1a	.	89,872.
Income	b		,	•						1b		07,072.
Attach Form(s)	C	Household employee wages not reported on Form(s) W-2										
W-2 here. Also attach Forms	d	·	•	*						1d		
W-2G and	e	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)									,	
1099-R if tax was withheld.	f											
If you did not	g g	Wages from Form 8919, line 6										
get a Form	h									1g 1h		0.
W-2, see instructions.	i											
	z	Add lines to through th								1z		89,872.
Attach Sch. B	2a	ŭ l	2a		b T	axable interest	t.			2b		17.
if required.	3a	Qualified dividends	За		<b>b</b> 0	rdinary divider	nds .			3b	,	
	4a	IRA distributions	<del>l</del> a			axable amount				4b	,	
Standard Deduction for—	5a	Pensions and annuities	5a		b T	axable amount	t			5b	)	
Single or	6a	Social security benefits	3a		b Ta	axable amount	t			6b	,	
Married filing separately,	С	If you elect to use the lump-sum el	ection	method, check here	(see	instructions)						
\$13,850	7	Capital gain or (loss). Attach Sched	dule D i	f required. If not requ	ired.	, check here				7		-509.
Married filing jointly or	8	Additional income from Schedule 1	l, line 1	0						8		-10,206.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total inc	ome	e				9		79,174.
\$27,700	10	Adjustments to income from Sched	dule 1,	line 26						10	)	
Head of household,	<u>11</u>	Subtract line 10 from line 9. This is	your <b>a</b>	djusted gross incon	ne					11		79,174.
\$20,800 If you checked <sub>r</sub>	12	Standard deduction or itemized	deduct	ions (from Schedule	A)					12	!	13,850.
any box under Standard	13	Qualified business income deducti	on from	n Form 8995 or Form	899	5-A				13	3	
Deduction,	14	Add lines 12 and 13								14	<u> </u>	13,850.
see instructions.	15	Subtract line 14 from line 11. If zero or less, enter -0 This is your <b>taxable income</b>									;	65,324.

Form 1040 (202)	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	9,679.	
Credits	17	Amount from Schedule 2, line 3						17		
	18	Add lines 16 and 17						18	9,679.	
	19	Child tax credit or credit for other	dependent	s from Sched	ule 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 ze	ero or less, e	enter -0				22	9,679.	
	23	Other taxes, including self-employ	yment tax, f	from Schedule	e 2, line 21			23	0.	
	24	Add lines 22 and 23. This is your	total tax					24	9,679.	
Payments	25	Federal income tax withheld from	:							
•	а	Form(s) W-2				<b>25a</b> 1	3,122			
	b	Form(s) 1099				25b				
	С	Other forms (see instructions) .				25c				
	d	Add lines 25a through 25c						25d	13,122.	
If you have a	26	2023 estimated tax payments and	d amount ap	oplied from 20	22 return			26		
qualifying child,	27	Earned income credit (EIC)			No .	27				
attach Sch. EIC.	28	Additional child tax credit from Schedule 8812								
	29	American opportunity credit from								
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15								
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits								
	33	Add lines 25d, 26, and 32. These	are your to	tal payments				33	13,122.	
Refund	34	If line 33 is more than line 24, sub	tract line 24	from line 33.	This is the amour	t you <b>overpaid</b>		34	3,443.	
	35a	Amount of line 34 you want refun	ded to you	. If Form 8888	is attached, chec	k here	🗆	35a	3,443.	
Direct deposit?	b	Routing number 0 2 1 2			,, <u> </u>	Checking	Savings	s		
See instructions.	d	Account number 3 8 1 0								
	36	Amount of line 34 you want applied	ed to your 2	2024 estimate	ed tax	36				
Amount	37	Subtract line 33 from line 24. This	is the <b>amo</b>	unt you owe.						
You Owe		For details on how to pay, go to www.irs.gov/Payments or see instructions						37		
	38	Estimated tax penalty (see instruc	ctions) .			38				
<b>Third Party</b>		you want to allow another pers				_				
Designee		structions					•	e below.	⊠ No	
		esignee's me		Phone no.			sonal ider nber (PIN)	ntification		
Sign	Ur	der penalties of perjury, I declare that I ha	ave examined	I this return and	accompanying sched	dules and stateme	nts, and to	the best	of my knowledge and	
Here	be	lief, they are true, correct, and complete.	Declaration o	of preparer (other	r than taxpayer) is ba	sed on all informa	ion of wh	ich prepar	er has any knowledge.	
Here	Yo	our signature		Date Your occupation				If the IRS sent you an Identity		
							1	otection P e inst.)	PIN, enter it here	
Joint return? See instructions.				<b>D</b> .	IT					
Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> m	nust sign.	Date	Spouse's occupation	on			nt your spouse an ection PIN, enter it here	
your records.								e inst.)	•	
	Ph	one no. (201)268-8953		Email address	HEMANTHSAI9	39@GMAIL.C	OM			
Deid	Pr		arer's signati	ure	-	Date	PTIN		Check if:	
Paid	SYA	M PRIYA RAM SAGAR GUPTA TALLAM SYAI	M PRIYA	RAM SAGAR	GUPTA TALLAM	03/08/2024	P020	82703	Self-employed	
Preparer	Fir	Firm's name GLOBAL TAXES LLC						hone no. (678)965-9522		
Use Only	Fir	m's address 245 ROONEY Co	r e bru	NSWICK N	J 08816		Fir	m's EIN	84-3171965	
<u> </u>	/_	40406 1 1 11 11 11 11 6							- 1010	

## 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

HEMANTH SAI ALAPARTHI

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

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

Go to www.irs.gov/Form1040 for instructions and the latest information.

	Sequence No. <b>01</b>
Your soc	ial security number
383-97	_3897

Par	t I Additional Income			
1	Taxable refunds, credits, or offsets of state and local income taxes		1	
	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions):			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att		5	-10,206.
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)	8g		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form			
	1040, line 1a or 1d	8s (		
t	Pension or annuity from a nonqualifed deferred compensation plan or			
	a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:			
_		8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter			
-	1040. 1040-SR. or 1040-NR. line 8		10	-10,206.

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

Par	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	Total ather adjustments Add lines 04s through 04s	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 <b>adjustments to income</b> Form 1040, 1040-SR, or 1040-NR, line 10	. ⊏nter	nere and on	26	
					le 4 (Farme 4040) 0000
	BAA	REV 03/	04/24 PRO	ocnedu	le 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.

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

OMB No. 1545-0074

2023

Attachment Sequence No. **12** 

Internal Revenue Service Name(s) shown on return Your social security number 383-97-3897 HEMANTH SAI ALAPARTHI 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 . . . . . . . . . . . . . . . . . 308. 817. -509. Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . . 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 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 -509. 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 -509.• 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 509.) 21 • (\$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

Social security number or taxpayer identification number

383-97-3897

HEMANTH SAI ALAPARTHI

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.

Part I 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.

X (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions												
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss) Subtract column (e)						
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).					
Apex Clearing	12/31/23	01/01/23	308.	317.			-9.					
WEBULL FINANCIAL LLC	12/31/23	01/01/23	0.	500.			-500.					
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), <b>lir</b>	lude on your ne 2 (if Box B	308.	817.			-509.					

**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)

Internal Revenue Service

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

Name(s) shown on return Your social security number

Attachment Sequence No. 13

OMB No. 1545-0074

HEMA	ANTH SAI ALAPARTHI						383-9	7-3897	1
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.	rty, use <b>S</b>		C. See	instru	ctions. If you a	re an indiv	/idual, rep	oort farm
	Did you make any payments in 2023 that would require you								
В	If "Yes," did you or will you file required Form(s) 1099? .							. \( \subseteq \text{Ye}	es 🗌 No
1a	Physical address of each property (street, city, state, ZII	P code)							
Α	IN								
В									
С									
1b	Type of Property (from list below)  2 For each rental real estate properation above, report the number of fair	rental a	and <b>Days</b>				Person Da	QJV	
Α	personal use days. Check the Quif you meet the requirements to		only	Α		365		0	
В	qualified joint venture. See instru			В					
С				С					
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial		5 Land 6 Roya	lties		Self-Rental Other (descr	ribe)		
						Properti	es:		
Incor	ne:			Α		В			С
3	Rents received	3		5	50.				
4	Royalties received	4							
-	nses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6		1 0	0.5				
7	Cleaning and maintenance	7		1,225.					
8	Commissions	8							
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							
13	Other interest	13			70				
14	Repairs	14			79.				
15	Supplies	15 16		۷,4	56.				
16 17	Taxes	17		3,196.					
18	Depreciation expense or depletion	18		3,1	90.				
19	Other (list)	10							
20	Total expenses. Add lines 5 through 19	20		10,7	56				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If	20		10,7	50.				
21	result is a (loss), see instructions to find out if you must file <b>Form 6198</b>	21	_	10,2	06.				
22	Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)	22 (	1	10,20	06.)	(	)	(	)
23a	Total of all amounts reported on line 3 for all rental prope	erties			23a		550.		
b	Total of all amounts reported on line 4 for all royalty prop	perties			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	10	,756.		
24	Income. Add positive amounts shown on line 21. Do not		-				. 24		
25	Losses. Add royalty losses from line 21 and rental real estat	te losses	from line	e 22. Eı	nter to	tal losses her	e <b>25</b>	(	10,206.)
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						n   26		-10,206.