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	nission Identification Number (SID)				
Taxpay	ver's name	Social securit	ty numbe	r	
SAI	PRANEET KOLLIBOINA	477-99	-4221		
Spouse	o's name	Spouse's soc	ial securi	ity number	
Par	Tax Return Information — Tax Year Ending December 31, 2023 (Enter	∣ ∵year you a	re auth	orizing.)	
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	131,5	508.
2	Total tax		2	21,6	538.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	27,9	<u> 359.</u>
4	Amount you want refunded to you		4	6,3	321.
5	Amount you owe		5		
Part	Taxpayer Declaration and Signature Authorization (Be sure you get and k	кеер а сор	y of yo	ur return)
return to sen for any Agent payme author payme busine taxes persor	conveledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmorth of my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for reject y delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Uto initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the financial institution account indicated in the financial institution accounts in the financial in full force and effect until I notify the U.S. Treasury Financial Agent to terminate ent, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requires days prior to the payment (settlement) date. I also authorize the financial institutions involved in the to receive confidential information necessary to answer inquiries and resolve issues related to the position of the position o	itter, or electro ection of the tr S. Treasury a cated in the tr in to debit the the authoriza- uests must be processing of ayment. I furt	onic returnation returns and its de ax preparentry to ation. To be received the electrical returns and	rn originator ion, (b) the resignated Fir ration softwarthis account revoke (cared no later tetronic paymowledge the	r (ERO) reason nancial vare for nt. This ncel) a than 2 nent of nat the
	ayer's PIN: check one box only				
	I authorize GLOBAL TAXES LLC to enter or generate	mv PIN	4 2	2 1 a	as my
	ERO firm name signature on the income tax return (original or amended) I am now authorizing.	ž En	ter five di n't enter	gits, but	,
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Your	signature ▶ Date ▶				
Spou	se's PIN: check one box only				
Spou		my DINI			20 m)/
L	I authorize to enter or generate to enter or generate	-	ter five di		as my
	signature on the income tax return (original or amended) I am now authorizing.		n't enter		
	I will enter my PIN as my signature on the income tax return (original or amended) I am n if you are entering your own PIN and your return is filed using the Practitioner PIN meth below.				
Spou	se's signature ▶ Date ▶				
	Practitioner PIN Method Returns Only—continue below				
Part	Certification and Authentication — Practitioner PIN Method Only				
ERO'	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 2 2	2 4 9 Don't ent		8 2 7 os	1
author	fy that the above numeric entry is my PIN, which is my signature for the electronic individual income ta rized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am subm ements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Ir	itting this retu	ırn in ac	cordance w	
EDO'	o cionaturo N				
ERO.	s signature ► Date ► ERO Must Retain This Form — See Instructions				
	ENU IVIUSI NEIAIII TIIIS FOITII — See IIISITUCTIONS				

Don't Submit This Form to the IRS Unless Requested To Do So

E1040-NR Department of the Treasury-Internal Revenue Service U.S. Nonresident Alien Income Tax Return 2023 OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jar	n. 1–D	ec. 31, 2023, or other tax year beginnir	ng	, 202	3, ending		, 2	20	instructions.		
Your first name	and r	middle initial							our identifying number see instructions)		
SAIPRANEE	СT		KOLL	IBOINA				477-9	99-4221		
Home address	(numl	per and street). If you have a P.O. box,	see ins	tructions.			'		Apt. no.		
5464 S MI	IMA	BLVD							413		
City, town, or p	ost of	fice. If you have a foreign address, also	comp	lete spaces below.			State	Z	ZIP code		
DURHAM							NC	2	27703		
Foreign country	nam	e	Foreigr	n province/state/count	у		Foreign p	ostal cod	e		
Filing Status		Single	• .	•	, ,	ving spouse (,	Esta	ate 🗌 Trust		
Check only one box.											
Digital Assets		ny time during 2023, did you: (a) receiverwise dispose of a digital asset (or a fir						(b) sell, e			
Dependents							(4) Che	ck the box i	if qualifies for (see inst.):		
(see instructions):		(1) First name Last name		(2) Dependent's identifying number	(3) Re	lationship to yo	Child	tax credit	Credit for other dependents		
		(.) Last name			(3) 110		-		Gopondenta		
If more than four									+		
dependents, see instructions and								Ä			
check here											
Income	1a	Total amount from Form(s) W-2, box	1 (see i	nstructions)	·			1a	158,615.		
Effectively	b	Household employee wages not repo	rted or	Form(s) W-2				1b			
Connected	С	Tip income not reported on line 1a (se	e instr	uctions)				1c			
With U.S.	d	Medicaid waiver payments not report	1d								
Trade or	е	Taxable dependent care benefits from	n Form	2441, line 26				1e			
Business	f Employer-provided adoption benefits from Form 8839, line 29										
Attach	g	Wages from Form 8919, line 6						1g			
Form(s) W-2,	h	Other earned income (see instructions	1h								
1042-S, SSA-1042-S,	i :	Reserved for future use	4:								
RRB-1042-S,	J Ie	Reserved for future use	1j								
and 8288-A	k	line 1(e)	from Schedule OI (Form 1040-NR), item L,								
here. Also attach	z	Add lines 1a through 1h						1z	158,615.		
Form(s)	2a	Tax-exempt interest 2a		1	axable int	erest		2b	213.		
1099-R if tax was	За	Qualified dividends 3a		b 0	ordinary di	vidends		3b	16.		
withheld.	4a	IRA distributions 4a		b T	axable an	nount					
If you did not	5a	Pensions and annuities 5a		2,793. b T	axable an	nount	ROLLOVI	ER 5b	0.		
get a Form W-2, see	6	Reserved for future use						6			
instructions.	7	Capital gain or (loss). Attach Schedule	•		•				-3,000.		
	8	Additional income from Schedule 1 (F							-16,204.		
	9	Add lines 1z, 2b, 3b, 4b, 5b, 7, and 8.	This is	your total effectively	connect	ed income .		9	139,640.		
	10	Adjustments to income from Schedul income	•		-	-			8,132.		
	11	Subtract line 10 from line 9. This is yo	ur adju	ısted gross income				11	131,508.		
	12	Itemized deductions (from Schedule deduction (see instructions)							13,850.		
	13a	Qualified business income deduction				13a					
	b	Exemptions for estates and trusts onl	y (see i	nstructions)		13b					
	С	Add lines 13a and 13b						13c			
	14								13,850.		
	15	Subtract line 14 from line 11. If zero o	r less,	enter -0 This is your	taxable ir	icome		15	117,658.		

Form 1040-NR (2023)									Page 2
Tax and	16	Tax (see instructions). Check if ar	ny from For	rm(s): 1	814 2 🗌 4	1972	3 🗌		16	21,638.
Credits	17	Amount from Schedule 2 (Form	1040), line	3					17	0.
	18	Add lines 16 and 17							18	21,638.
	19	Child tax credit or credit for other		19						
	20	Amount from Schedule 3 (Form 1040), line 8								
	21	Add lines 19 and 20								
	22	Subtract line 21 from line 18. If z	22	21,638.						
	23a	Tax on income not effectively co								
		Schedule NEC (Form 1040-NR),	line 15 .			23a				
	b	Other taxes, including self-empl	oyment ta	x, from Schedu	e 2 (Form 1040)),				
		line 21				23b				
	С	Transportation tax (see instruction	ons)			23c				
	d	Add lines 23a through 23c							23d	
	24	Add lines 22 and 23d. This is yo	ur total ta :	x					24	21,638.
Payments	25	Federal income tax withheld from	m:							
	а	Form(s) W-2				25a	2	7 , 959.		
	b	Form(s) 1099				25b				
	С	Other forms (see instructions)				25c				
	d	Add lines 25a through 25c							25d	27,959.
	е	Form(s) 8805							25e	
	f	Form(s) 8288-A							25f	
	g	Form(s) 1042-S							25g	
	26	2023 estimated tax payments ar				1			26	
	27	Reserved for future use				27				
	28	Additional child tax credit from S		,	•	28			-	
	29	Credit for amount paid with Forr				29				
	30	Reserved for future use				30				
	31	Amount from Schedule 3 (Form	,.			31			32	
	32	• •								07.050
	33								33	27,959.
Refund	34	If line 33 is more than line 24, su				-	=		34	6,321.
D	35a	Amount of line 34 you want refu							35a	6,321.
Direct deposit? See instructions.	b	Routing number 2 6 7 (c Type:	⊠ Checl	king ∐ ∶ ∶	Savings		
coo mondonono.	d	Account number 6 7 5 3					ᆜ			
	е	If you want your refund check m								
	00	enter it here.		0004			1		-	
A	36	Amount of line 34 you want app				36				
Amount	37	Subtract line 33 from line 24. Th For details on how to pay, go to		-		9			37	
You Owe	38	Estimated tax penalty (see instru	_	-		38			31	
Third		u want to allow another person to						es. Compl	ete he	low. 🗵 No
Party	Desig	·	discuss t	Phone		ii dolloi io		nal identifi		
Designee	name				;			er (PIN)	CallOII	
		penalties of perjury, I declare that I ha			ccompanying sch	edules and		· ,	e best c	of my knowledge and
_		they are true, correct, and complete. I								
Sign	Your	signature		Date	Your occupati	on		If the	RS s	ent you an Identity
Here				<u>'</u> .				I		PIN, enter it here
				SR. AI/ML ENGINEER				(see	inst.)	
	Phone		Duc-s : '	Email address		F - 1		DTIN		
Paid		rer's name		's signature	a. a	Date		PTIN		Check if:
Preparer		I PRIYA RAM SAGAR GUPTA		PRIYA RAM	SAGAR GUPT	'A 03/2	21/2024	P02082		Self-employed
Use Only		s name GLOBAL TAXES								78) 965-9522
	Firm's	address 245 ROONEY (RUNSWICK N	J 08816			Firm's El	N		

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

SAIPRANEET KOLLIBOINA

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.

Your social security number 477-99-4221

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. Att	ach Schedule E .	5	-16,204.
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 . Ente	r here and on Form		4.6.06.
	1040, 1040-SR, or 1040-NR, line 8		10	-16,204.

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

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government	ment	
	officials. Attach Form 2106		
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		
16	Self-employed SEP, SIMPLE, and qualified plans		
17	Self-employed health insurance deduction		
18	Penalty on early withdrawal of savings		
19a	Alimony paid		
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		Į.
20	IRA deduction	20	
21	Student loan interest deduction		
22	Reserved for future use		
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade		
_		132.	
f	Contributions to section 501(c)(18)(D) pension plans		
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)		
į	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		
	<u> </u>		
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:		
0E	Total other adjustments. Add lines 24s through 24z	05	0 122
25 26	Total other adjustments. Add lines 24a through 24z		8,132.
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here an Form 1040, 1040-SR, or 1040-NR, line 10	u on	0 120
	1 01111 1040, 1040-011, 01 1040-1111, IIIIE 10	26	8,132.

SCHEDULE NEC (Form 1040-NR)

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

Attachment

Your identifying number

Department of the Treasury Internal Revenue Service

Name shown on Form 1040-NR

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

OMB No. 1545-0074

SAIPRANEET KOLLIBOINA 477-99-4221 Enter **amount of income** under the appropriate rate of tax. See instructions. (d) Other (specify) Nature of Income (a) 10% **(b)** 15% (c) 30% % % Dividends and dividend equivalents: Dividends paid by U.S. corporations 1a 1b Dividend equivalent payments received with respect to section 871(m) transactions 1c 2 Interest: 2a 2b 2c C 3 4 5 Real property income and natural resources royalties . . . 6 7 8 9 10 Gambling-Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-. Winnings ______ 10c Losses Gambling-Residents of countries other than Canada. 11 Other (specify): 12 12 13 Add lines 1a through 12 in columns (a) through (d) 13 14 14

Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 23a

Capital Gains and Losses From Sales or Exchanges of Property

Enter only the capital gains and losses from property sales or exchanges that are from source 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. reproperty interest; report these gains and losses on Schedule D (Form 1040).

15

Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040). Form 4797, or both.

d ces ot	16	(a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired mm/dd/yyyy	(c) Date sold mm/dd/yyyy	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e).	
.S. n real								
D								
s		Add columns (f) and (g) of line 16 . Capital gain. Combine columns (f) ar	od (a) of line 17. Ente				er -0 18	

15

SCHEDULE OI (Form 1040-NR)

Other Information

Attach to Form 1040-NR.

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

Answer all questions.

OMB No. 1545-0074

2023
Attachment

Sequence No. 7C Name shown on Form 1040-NR Your identifying number SAIPRANEET KOLLIBOINA 477-99-4221 Of what country or countries were you a citizen or national during the tax year? _INDIA Α In what country did you claim residence for tax purposes during the tax year? United States В С Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Were you ever: ⊠ No Yes 1. A U.S. citizen? X No If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you. Ε If you had a visa on the last day of the tax year, enter your visa type. If you didn't have a visa, enter your U.S. immigration status on the last day of the tax year. F1 X No F Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes If you answered "Yes," indicate the date and nature of the change: List all dates you entered and left the United States during 2023. See instructions. G Note: If you're a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, Date entered United States Date entered United States Date departed United States **Date departed United States** mm/dd/yy mm/dd/yy mm/dd/yy mm/dd/yy Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during: н 2021 ______, 2022 ______, and 2023 ______365 ____. Did you file a U.S. income tax return for any prior year? X Yes □ No ı If "Yes," give the latest year and form number you filed: 1040NR X No ☐ Yes J If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a No Yes Κ Yes ⊠ No If "Yes," did you use an alternative method to determine the source of this compensation? ☐ No Income Exempt From Tax-If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, L complete (1) through (3) below. See Pub. 901 for more information on tax treaties. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions. (a) Country (b) Tax treaty article (c) Number of months (d) Amount of exempt claimed in prior tax years income in current tax vear (e) Total. Enter this amount on Form 1040-NR, line 1k. Do not enter it anywhere else on line 1 . . . 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? No Yes X No If "Yes," attach a copy of the Competent Authority determination letter to your return. Check the applicable box if: 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected

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 Your social security number SAIPRANEET KOLLIBOINA

477-99-4221 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. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

		-		•		,
lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(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 Box A checked	5,877.	5,776.		63.	164.
2	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					
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	
6	Short-term capital loss carryover. Enter the amount, if ar Worksheet in the instructions	T T	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis		7	164.		

Part II Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the s below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	from Part II,	(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 Box D checked	922.	4,181.			-3,259.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F 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	ions, estates, and	trusts from Sched	dule(s) K-1	12	
13	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions	Carryover	14	()		
15	Net long-term capital gain or (loss). Combine lines 8a on the back	•	` '		15	-3,259.

Schedule D (Form 1040) 2023 Page 2

Part III **Summary** 16 Combine lines 7 and 15 and enter the result 16 -3,095.• 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 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. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 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 ☐ 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.

8949

Department of the Treasury

Internal Revenue Service

Part I

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 Attachment

Sequence No. 12A

Name(s) shown on return SAIPRANEET KOLLIBOINA Social security number or taxpayer identification number

477-99-4221

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.

instructions). For long-term transactions, see page 2.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see

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 not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) See the separate instructions. Date sold or Proceeds See the **Note** below Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) (see instructions) in the separate combine the result (g) Code(s) from Amount of adjustment instructions. with column (a). instructions FIDELITY BROKERAGE SERVICES LLC 01/01/23 12/31/23 5,870. 5,769. W 63. 164. 7. 7. 01/01/23 12/31/23 0. Apex Clearing 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your

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.

5,877.

164.

Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

above is checked), or line 3 (if Box C above is checked) .

5,776.

Form 8949 (2023) Attachment Sequence No. **12A** Page **2**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side SAIPRANEET KOLLIBOINA

Social security number or taxpayer identification number 477-99-4221

Before you check Box D, E, or F 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 II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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	(D)	Long-term transactions reported on Form	(s) 1099-B	showing basis wa	s reported to the IRS	(see Note above)
	(E)	Long-term transactions reported on Form	(s) 1099-B s	showing basis wa	sn't reported to the II	RS

(F) Long-term transactions not reported to you on Form 1099-B

(i) zong tomi transaotione not reported to you on i o			1000 B					
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.		
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (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).	
FIDELITY BROKERAGE SERVICES LLC	01/01/22	12/31/23	494.	481.			13.	
BAKKT	01/01/22	12/31/23	428.	3,700.			-3,272.	
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box I)	I here and inc is checked), lir	lude on your ne 9 (if Box E	922.	4.181.			-3.259.	

Note: If you checked Box D 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)

Department of the Treasury

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.

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

Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return

Your social security number

SAI	PRANEET KOLLIBOINA							47	7-99-42	21		
Par	Note: If you are in the business of renting p	ersonal property	d Roy	yalties Schedule	C. See	instru	ctions. If you	are an	individual,	repor	t farm	
	rental income or loss from Form 4835 on pa	age 2, line 40.										
	Did you make any payments in 2023 that would											
В	If "Yes," did you or will you file required Form(Yes	∐ No	
1a	Physical address of each property (street, or	ity, state, ZIP	code	e)								
Α	2-19-106/3, EAST KALYANPUR UP	PAL HYDERA	ABAI	, TELA	NGAN <i>i</i>	A IN	500039					
В												
С												
1b	Type of Property (from list below) 2 For each rental real above, report the number of the first state of the state of the first state of the firs	ımber of fair re	ental	and		Fa	ir Rental Days	Pei	rsonal Us Days	е	QJV	
Α	personal use days.				Α		365		0			
В		f you meet the requirements to file qualified joint venture. See instruc			В							
С	qualified joint ventul	C. 000 III3II ac	7110113	··	С							
1	of Property: Single Family Residence 3 Vacation/Sho Multi-Family Residence 4 Commercial	ort-Term Renta	al	5 Land 6 Roya			Self-Rental	(م طانع				
	Width-Farminy nesidence 4 Commercial			о поуа	illes	0	Other (desc	ilibe) .				
							Propert	ies:				
Inco		г			Α		В					
3	Rents received	<u> </u>	3		7	95.						
4_	Royalties received		4									
_	nses:		_									
5	Advertising		5									
6	Auto and travel (see instructions)		6		2 E	C 1						
7	Cleaning and maintenance		7		2,5	64.						
8	Commissions		8 9									
9	Insurance	-	10									
10 11	Legal and other professional fees		11		2 0	2 /						
12	Mortgage interest paid to banks, etc. (see in		12		2,034.							
13	Other interest	· +	13									
14	Repairs	-	14		3,3	31						
15	Supplies		15		3,9							
16	Taxes		16		3/3	01.						
17	Utilities	-	17		1,5	62.						
18	Depreciation expense or depletion		18		3,5							
19	Other (list)		19		<u> </u>							
20	Total expenses. Add lines 5 through 19 .		20		16,9	99.						
21	Subtract line 20 from line 3 (rents) and/or 4 (result is a (loss), see instructions to find out file Form 6198	if you must	01		-16,2	0.4						
22	Deductible rental real estate loss after limita	- ↓	21		10,2	· ·						
22	on Form 8582 (see instructions)		22	(-:	16,20		()()	
23a	Total of all amounts reported on line 3 for all					23a		79	5.			
b	Total of all amounts reported on line 4 for all					23b						
C C	Total of all amounts reported on line 12 for a Total of all amounts reported on line 18 for a					23c		3,54	1			
d	· · · · · · · · · · · · · · · · · · ·					23d 23e		5,34 5,99				
e 24	Total of all amounts reported on line 20 for a Income. Add positive amounts shown on lin			 de anvilos		23e	Τ (9. 24			
2 4 25	Losses. Add royalty losses from line 21 and re			•		 nter to	tal loseae hai		24 25 (1 4	5,204.)	
26	Total rental real estate and royalty incom								(Τ (J, 404.)	
20	here. If Parts II, III, and IV, and line 40 on p Schedule 1 (Form 1040), line 5. Otherwise, ir	age 2 do not	appl	y to you,	also er	nter th	nis amount o	on	26	_1	16,204.	