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.

Submission Identification Number (SID)

Taxpay	ver's name	Social security num	ber
ABH	IINAV REDDY PATHI	020-51-740	4
Spouse	s's name	Spouse's social sec	urity number
Part	t I Tax Return Information — Tax Year Ending December 31, 2023 (Er	iter year you are au	ithorizing.)
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	34,799.
2	Total tax	2	2,291.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	5,420.
4	Amount you want refunded to you	4	3,129.
5	Amount you owe	5	

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

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

Taxpayer's	PIN:	check	one	box	only
------------	------	-------	-----	-----	------

×	I authorize	GLOBAL TAXES LLC	to enter or generate my PIN	Enter first but as my					
	signature or	ERO firm name n the income tax return (original or amended) I am no	w authorizing.	Enter five digits, but don't enter all zeros					
		ny PIN as my signature on the income tax return (orightering your own PIN and your return is filed using t							
Your sig	nature 🕨	Show Teday	Date ►03	3/26/2024					
Spouse	's PIN: chec	k one box only							
	I authorize		to enter or generate my PIN	as my					
		ERO firm name		Enter five digits, but					
	signature or	n the income tax return (original or amended) I am no	w authorizing.	don't enter all zeros					
		ny PIN as my signature on the income tax return (origonation of the income tax return (origonation of the income tax return is filed using the tax of the income tax return is filed using the income tax return income tax return is filed using the income tax return is filed using tax return income tax return incom							
Spouse'	s signature 🕨		Date ►						
Dout III	Contifie	Practitioner PIN Method Returns	-						
Part III	Part III Certification and Authentication — Practitioner PIN Method Only								

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

6 Don't enter all zeros

0 8 2

4 9

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

ERO's signature >		Date 🕨	
	st Retain This Form — See his Form to the IRS Unless		
For Denemicark Deduction Act Nation and your toy			Earm 8879 (Payr 01 2021)

For Paperwork Reduction Act Notice, see your tax return instructions. BAA REV 03/07/24 PRO

2 2 2 7

1

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		turn	202	3	OMB No. 1545	-0074	IRS Use Only	∕−Do not w	/rite or sta	aple in this space.
For the year Jan	. 1-Dec	c. 31, 2023, or other tax year beginning			, 2023, enc	ding			, 20	See se	parate	instructions.
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	curity number
ABHINAV	RED	DY	PAT	ΉI						020	51	7404
		s first name and middle initial	Last r									I security number
Home address	(numbe	er and street). If you have a P.O. box, see	instruc	ctions.				A	pt. no.	Preside	ntial Ele	ection Campaigr
<u>416 TRIN</u>												/ou, or your
City, town, or p	ost offi	ice. If you have a foreign address, also co	mplete	spaces be	elow.	Sta	ate	ZIP c	ode			jointly, want \$3 nd. Checking a
DENTON						TΣ		762	07	box bel	ow will	not change
Foreign country	/ name			Foreign p	rovince/state/	count	ty	Foreig	n postal code	your tax		_
												ou 🔄 Spouse
Filing Status	; 🗵	Single					Head of he	ouseh	old (HOH)			
Check only		Married filing jointly (even if only or	ne hac	d income)						(0.0.0)		
one box.		Married filing separately (MFS)							ving spouse	. ,		
		you checked the MFS box, enter the alifying person is a child but not you									lid's na	ime if the
	- qu	anying person is a child but not you										
Digital		ny time during 2023, did you: (a) rece						•	,	. ,	_	
Assets		hange, or otherwise dispose of a digi						t)? (Se	e instructio	ns.)	∐ Y	es 🛛 No
Standard		neone can claim: 🗌 You as a de	•		•		a dependent					
Deduction		Spouse itemizes on a separate retur	n or yo	ou were a	dual-status	alien	1					
Age/Blindness	S You	: 🗌 Were born before January 2, 1	959	Are b	lind Spo	ouse	: 🗌 Was bor	n befo	ore January 2	2, 1959		s blind
Dependents	s (see	instructions):		(2)	Social security	,	(3) Relationsh	ip (4) Check the b	ox if qual	fies for	(see instructions):
lf more	(1) F	irst name Last name			number		to you		Child tax c	redit	Credit fo	or other dependents
than four												
dependents, see instructions	s ——											
and check	. —											
here 🗆												
Income	1a	Total amount from Form(s) W-2, b	•		,						-	43,000.
Attach Form(s)	b	Household employee wages not re	•		.,					. 1b	_	
W-2 here. Also attach Forms	C L	Tip income not reported on line 1a						. 10	-			
W-2G and	d	Medicaid waiver payments not rep Taxable dependent care benefits f						• •		. 1d . 1e	_	
1099-R if tax was withheld.	e f	Employer-provided adoption bene			-			• •		. 1f	-	
lf vou did not		Wages from Form 8919, line 6 .						• •		. 1g	_	
get a Form	9 h	Other earned income (see instructi								. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	,				1i			-		
	z	Add lines 1a through 1h			· 					. 1z	:	43,000.
Attach Sch. B	2a		2a			bТ	axable interest	t.		. 2b)	
if required.	3a	Qualified dividends	3a			b C	Ordinary divider	nds .		. 3b		
	4a	IRA distributions	4a			bΤ	axable amoun	t		. 4b)	
Standard Deduction for—	5a	Pensions and annuities	5a			bΤ	axable amoun	t		. 5b)	
 Single or 	6a	Social security benefits	6a			bΤ	axable amoun	t		. 6b		
Married filing separately,	С	If you elect to use the lump-sum e							[
\$13,850 Married filing	7	Capital gain or (loss). Attach Schee							[7	-	-84.
jointly or Qualifying	8	Additional income from Schedule								. 8		-8,117.
surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,						• •		. 9	-	34,799.
\$27,700 • Head of	10	Adjustments to income from Sche							· · ·	. 10		
household, \$20,800	11	Subtract line 10 from line 9. This is	-					• •		. 11		34,799.
If you checked	12	Standard deduction or itemized					 	• •		. 12		13,850.
any box under Standard	13 14	Qualified business income deducti Add lines 12 and 13			Deep of Form	1 999	ы-А	• •		. <u>13</u> . 14		13,850.
Deduction, see instructions.	14 15	Subtract line 14 from line 11. If zer	 o or le	 ss enter	 -0- Thie ie v	 /011r 1	taxable incom	 e				20,949.
	15			, enter	J 1115 15 y			. 5		. 10		20,949.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2023)

Form 1040 (2023	3)								Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2 4972	3 🗌		16	2,291.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17						18	2,291.
	19	Child tax credit or credit for	other dependent	ts from Sched	ule 8812			19	
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	2,291.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	2,291.
Payments	25	Federal income tax withheld							· · · · · · · · · · · · · · · · · · ·
	а	Form(s) W-2				25a 5	,420.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	5,420.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return .			26	
qualifying child,	27	Earned income credit (EIC)				27			
attach Sch. EIC.	28	Additional child tax credit from			-	28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .				30			
	31	Amount from Schedule 3. lir				31			
	32	Add lines 27, 28, 29, and 31	. These are vour	total other pa	avments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T		-	-			33	5,420.
Refund	34	If line 33 is more than line 24						34	3,129.
noruna	35a	Amount of line 34 you want	refunded to you	J. If Form 8888	is attached, che	ck here	. 🗆	35a	3,129.
Direct deposit?	b	Routing number 0 8 1					Savings		
See instructions.	d	Account number 2 9 1		4 8 6 0			J		
	36	Amount of line 34 you want				36			
Amount	37	Subtract line 33 from line 24							
You Owe	01	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another							
Designee		structions	•				omplete b	elow.	🗙 No
Ū	De	signee's		Phone			onal identif	ication	
	na			no.			ber (PIN)		<u> </u>
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here		· · · ·			,			• •	, ,
	YO	• · · · · · · · · · · · · · · · · · · ·							nt you an Identity IN, enter it here
Joint return?				SOFTWARE ENGINEER (Se				.,	
See instructions.	Sp	ouse's signature. If a joint return, I	both must sign.	Date	Spouse's occupat	ion			nt your spouse an
Keep a copy for your records.									ection PIN, enter it here
your records.							(see i	nst.)	
		one no. (630) 217-966		Email address	ABHINAVREDD	Y039@GMAIL.CO			<u></u>
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYA		SYAM PRIY.	A RAM SAG	GAR GUPTA	03/24/2024	P02082		Self-employed
Use Only	Fir	m's name GLOBAL TA					Phon	eno. (678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm'	s EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	est information.		BAA	REV 03/07/24 PRO			Form 1040 (2023)

SCHEDULE	1
(Form 1040)	

9 10

Additional Income and Adjustments to Income

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

Go to unum ire gov/Form1040 for instructions and the latest information

OMB No. 1545-0074 0 2

Attachment

Department of the Treasury

nternal Re	evenue Service			Seq	uence No. 01
lame(s	s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soci	al sec	urity number
ABHIN	NAV REDDY	PATHI	020-51-	-740	4
Part	Additio	onal Income			
1 -	Taxable refur	nds, credits, or offsets of state and local income taxes		1	
2a /	Alimony rece	ived		a	
b	Date of origin	al divorce or separation agreement (see instructions):			
		ome or (loss). Attach Schedule C		3	
4 (Other gains o	or (losses). Attach Form 4797		4	
5	Rental real es	state, royalties, partnerships, S corporations, trusts, etc. Attach Schedule	E. 4	5	-8,117
6	Farm income	or (loss). Attach Schedule F	[6	
7 (Unemployme	ent compensation	🗋	7	
8 (Other income):			
al	Net operating	gloss)		
		of debt			
		ed income exclusion from Form 2555)		
		Form 8853			
		Form 8889			
-		anent Fund dividends			
		/			
		vards			
		ngaged in for profit income			
	•	s			
		the rental of personal property if you engaged in the rental			
f	for profit but	were not in the business of renting such property 8			

		8m		
n	Section 951(a) inclusion (see instructions)	8n		
ο	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
)	Combine lines 1 through 7 and 9. This is your additional income. Enter			
	1040, 1040-SR, or 1040-NR, line 8			10

m Olympic and Paralympic medals and USOC prize money (see

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

-8,117.

Par	t II Adjustments to Income		
11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8I from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m	_	
d	Reforestation amortization and expenses 24d		
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	_	
f	Contributions to section 501(c)(18)(D) pension plans	-	
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	_	
i	Attorney fees and court costs you paid in connection with an award		
	from the IRS for information you provided that helped the IRS detect		
	tax law violations	-	
j	Housing deduction from Form 2555	-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
	1041)	-	
Z	Other adjustments. List type and amount:		
05	Tatal athen adjustments. Add lines 04a through 04a	05	
25 06	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	06	
		26	
	BAA REV 03/07/24 PRO	Schedule	1 (Form 1040) 2023

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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.

2023 Attachment Sequence No. 12

Internal Revenue Service Name(s) shown on return

Department of the Treasury

ABHINAV REDDY PATHI

Your social security number

020-51-7404

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes X No
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)

See instructions for how to figure the amounts to enter on the lines below.		(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss f		(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to (sales price) (or other basis whole dollars.				Form(s) 8949, P line 2, column	art I,	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	2,739.	2,824.		1.	-84.
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			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	6	()		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-84.

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 lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, colum	s 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					
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 Schee	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	-	-	-	14	()
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•	.,		15	

Part	III Summary	
16	Combine lines 7 and 15 and enter the result	16 -84.
	• 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 line 22.	
	• 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?	
	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. 	
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:	
	The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500)	21 (84.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.	
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?	
	☐ 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.	
	BAA REV 03/07/24 PRO	Schedule D (Form 1040) 2023

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.



Department of the Treasury Internal Revenue Service Name(s) shown on return

Social security number or taxpayer identification number

020-51-7404

ABHINAV REDDY PATHI

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 not reported to you on Form 1099-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	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(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).
ROBINHOOD SECURITIES LL	c 01/01/23	12/31/23	2,739.	2,824.	W	1.	-84.
2 Totals. Add the amounts in colur negative amounts). Enter each the Schedule D, line 1b (if Box A above is checked). or line 3 (if Box	2,739.	2,824.		1.	-84.		

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.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

SCHEDULE	Ε
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

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

Department of the Treasury

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

202	3
Attachment Seguence No.	13

Internal	Revenue Service		Go to www.i	rs.gov/ScheduleE for	r instru	uctions a	nd the la	itest in	formation.		Sequence	ce No. 13
Name(s)) shown on return							Your social security number				
ABHI	NAV REDDY						020-51-7404					
Part	I Income	or Lo	ss From Rent	al Real Estate an	d Ro	yalties						
	Note: If yo	ou are in	the business of re	enting personal proper	ty, use	Schedu	e C. See	instru	ctions. If you a	are an indi	ividual, repo	ort farm
				35 on page 2, line 40.								57
				at would require you								
B I	f "Yes," did you	l or will	you file required	l Form(s) 1099? .							. 🗌 Ye	s 🗌 No
1a	Physical add	ress of	each property (s	treet, city, state, ZIF	P code	e)						
Α	FLAT NO-50	1. ST	REET NUM 16	APSTATE HOUSING	G BOA	RD HIM	AYATNA	GAR,	HYDERABA	D, TELA	ANGANA I	N 500029
B										_,		
C												
1b	Type of Prope	arty 2	Por each rent	tal real estate prope	orty lie	tod		Ea	ir Rental	Porso	aal Lleo	
10	(from list below			t the number of fair				10	Days	Personal Use Days		QJV
Α	3			days. Check the Q		x only A			365	0		
B				ne requirements to f					505			
C			qualified joint	t venture. See instru	lctions	5.	C					
	of Property:						U					
	Single Family R	Pooldon		on/Short-Term Ren	tal	5 Lan	d	7	Self-Rental			
	•				lai					riba)		
2	Multi-Family Re	sidenc	e 4 Comm	lercial		6 Roy	antes	0	Other (desc	nbe)		
									Propert	es:		
ncom	ne:						Α		В			С
3	Rents received	d			3		4	21.				
4	Royalties rece	eived .			4							
Exper												
5					5							
6	0		nstructions) .		6							
7					7		1.1	81.				
8	-	Cleaning and maintenance					-/-					
9					8							
10					10							
11	Legal and other professional fees						0	74.				
12				(see instructions)	11		9	/4.				
12					13							
							0 1	1 Г				
14					14			15.				
15					15		2,9	65.				
16	laxes				16		1 0	0.0				
17					17		1,0	03.				
18	-	expense	e or depletion .		18							
19	Other (list)				19							
20	•		lines 5 through		20		8,5	38.				
21				d/or 4 (royalties). If								
				nd out if you must								
	file Form 6198				21		-8,1	17.				
22				er limitation, if any,								
		-	structions)		22	(8,11	7.)	()	(
23a	Total of all am	ounts r	eported on line 3	3 for all rental prope	erties			23a		421.		
b	Total of all am	ounts r	eported on line	4 for all royalty prop	erties			23b				
С	Total of all am	iounts r	eported on line ⁻	12 for all properties				23c				
d			•	18 for all properties				23d				
е				20 for all properties				23e	6	3,538.		
24				n on line 21. Do no t		de any lo	osses			. 24		
25				and rental real estat				nter to	tal losses her		(8,117.
26				income or (loss)								,

yalty income or (loss). Combine lines 24 and 25. Enter the result lota here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .

For Paperwork Reduction Act Notice, see the separate instructions.

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-8,117.