Form **8879-PE**

E-file Authorization for Form 1065

(For return of partnership income or administrative adjustment request)

ERO must obtain and retain completed Form 8879-PE. Go to www.irs.gov/Form8879PE for the latest information.

2023

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

For calendar year 2023, or tax year beginning Oct 16, 2023, and ending Dec 31, 2023

name of partnership	Employer identification number
SHIVA SAI INVESTMENTS LLC	93-3826502
Part I Form 1065 Information (Whole dollars only)	
1 Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1
2 Gross profit (Form 1065, line 3)	
3 Ordinary business income (loss) (Form 1065, line 23)	
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)	
Part II Declaration and Signature Authorization of Partner or Member or	Partnership Representative
I declare under penalties of perjury that:	· ·
1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partnership.	a partner or member of the named
b. If the Form 1065 is being transmitted as part of an administrative adjustment request (PR) of the named partnership.	(AAR), I am the partnership representative
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as a schedules, and statements, and to the best of my knowledge and belief, it/they is/are	
3. I am fully authorized to sign the return or AAR on behalf of the partnership.	·
4. The amounts shown in Part I above are the amounts shown on the electronic copy or	f the partnership's Form 1065.
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate s	·
return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receive and (b) the reason for any delay in processing the return or AAR.	
6. I have selected a personal identification number (PIN) as my signature for the partner	ship's electronic return of partnership
income or AAR.	ormp o orden orme retains or pair an orealing
Partner or Member or PR PIN: check one box only I authorize to enter my	PIN as my signature
ERO firm name	Don't enter all zeros
on the partnership's 2023 electronically filed return of partnership income or AA	R.
As a Partner or Member or PR of the partnership, I will enter my PIN as my sign electronically filed return of partnership income or AAR.	ature on the partnership's 2023
Partner or Member or PR signature:	
Title: LLC MEMBER	Date:
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2 2 2 4 9 6 6 1 9 8 9 Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2023 electron AAR for the partnership indicated above. I confirm that I am submitting this return or AAR is 3112, IRS e-file Application and Participation, and Pub. 4163, Modernized e-File (MeF) Information Business Returns.	in accordance with the requirements of Pub.
ERO's signature:	Date:

ERO Must Retain This Form — See Instructions

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

_	106	35		U.S. R	eturn of Pa	rtnership In	com	е		01	MB No. 1545-0123
Form			For cal	endar year 2023, or tax ye	ar beginning Oct. 1	.б , 2023, e nd	ling De	ec 31 .	20 23		
	tment of that Revenue	ne Treasury			v/Form1065 for inst					`	2023
		ness activity		Name of partnership						D En	mployer identification number
	/ESTMI	1		SHIVA SAI INVE	י פיישקיאייפ ז.ז.כ						-3826502
		uct or service	Туре	Number, street, and room		x, see instructions.					ate business started
PRO	DUCT		or	42375 ALDER FO	REST TER					10/	16/2023
C Bus	siness cod	de number	Print	City or town, state or prov	rince, country, and ZIP o	or foreign postal code					otal assets
										(Se	ee instructions)
519	200			STERLING		VZ		166		\$	1,400.
		plicable bo				(3) Name chang					Amended return
		-			2) Accrual	(3) U Other (speci	ify):				
				Attach one for each person	on who was a partne	r at any time during	the tax	year:			4
				1-3 are attached							🗀
				Aggregated activities for business income a							
Caul	1	Gross rece			b Less returns and a					1c	= IIIIOIIIIalioII.
	1		•	old (attach Form 1125						2	
	1	-		btract line 2 from line	•					3	
шe	1			e (loss) from other par						4	
Income	1	•		loss) (attach Schedule	•	•		•		5	
므	1			rom Form 4797, Part I						6	
	1	_		oss) (attach statement	·	· ·				7	
	8			oss). Combine lines 3						8	
	9			ges (other than to par						9	
(SL	10	Guarante	ed pay	ments to partners .						10	
atio	11	Repairs a	ınd ma	intenance						11	
<u>=</u>	12	Bad debt	s							12	
ductions (see instructions for limitations)	13	Rent								13	
ition;	14			ses						14	
struc				tructions)						15	
ë E	1	•	•	required, attach Form	•						
(Se	1	-		on reported on Form 1						16c	
ű		-	-	ot deduct oil and gas						17	
ij	18		•	s, etc						18	
	19			fit programs commercial buildings					•	19	
De	20 21								•	20	
	22			ns. Add the amounts :					•	22	
-	23			ess income (loss). Su		·				23	
	24			der the look-back met						24	
	25			der the look back met	•	-			-	25	
en	26			ed underpayment (see		`		,		26	
Ę	27									27	
Pa)	28			lue. Add lines 24 thro						28	
Tax and Payment	29			nt election amount from						29	
a	30									30	
ă	31	Amount	owed.	If the sum of line 29 a	and line 30 is small	er than line 28, er	nter am	ount owed .		31	
_	32			If the sum of line 29 a				•		32	0.
		Under pen	alties of	perjury, I declare that I have e, correct, and complete. De	e examined this return, i	ncluding accompanyin	ng schedu mited liah	ules and statemer	nts, and	d to the b	cest of my knowledge
Sig	n	which prep	parer has	any knowledge.	, , , , , , , , , , , , , , , , , , ,	. , ,		, , , , , , ,	_		
Her											S discuss this return eparer shown below?
		Signature	of north	per or limited liability compa	ny member		to				ons. Yes No
		Print/Type		ner or limited liability compar	Preparer's signature	Dat		Date		. \Box	PTIN
Paid	t	1		VAN KUMAR DUDIPALLI		יייגמימות מגאווע		Date	Ched self-	ck i employe	".
	parer	Firm's nam		GLOBAL TAXES L	VENKATA SAI PAVAN L.C	VOMMAK DODITATET					P02470833 88-2145487
Use	Only	Firm's nam		245 ROONEY CT		лт 08816					578)965-9522
		, 3 auu								(U	,,0,,00

Page 2

Sch	edule B Other Information									
1	What type of entity is filing this return? Check the	ne applica	able box:					Yes	No	
а			nestic limited	partnershi	р					
С	c ☐ Domestic limited liability company d ☐ Domestic limited liability partnership									
е										
2	At the end of the tax year:									
а	a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax- exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit,									
	loss, or capital of the partnership? For rules of									
	B-1, Information on Partners Owning 50% or M			•					×	
b	Did any individual or estate own, directly or inc		=							
-	the partnership? For rules of constructive owner									
	on Partners Owning 50% or More of the Partner	•							×	
3	At the end of the tax year, did the partnership:									
а	Own directly 20% or more, or own, directly or									
	stock entitled to vote of any foreign or domestic				uctive o	wnership, see in	structions.			
	If "Yes," complete (i) through (iv) below		_						×	
	(i) Name of Corporation		(ii) Employer I Number			ii) Country of ncorporation	(iv) Perd Owned in Vo			
				· ,,						
b	Own directly an interest of 20% or more, or own									
	or capital in any foreign or domestic partnersh interest of a trust? For rules of constructive owner.									
			ii) Employer		· ·	, , ,		 1aximun	n	
	(i) Name of Entity	li	dentification umber (if any)	(iii) Type Entity		(iv) Country of Organization	Percenta Profit, Lo	ge Own	ned in	
		INC	uniber (ii ariy)				Front, Lo	55, UI C	арпаі	
4	Does the partnership satisfy all four of the follow	wing cond	ditions?	•			•	Yes	No	
а	The partnership's total receipts for the tax year	were less	than \$250,0	00.						
b	The partnership's total assets at the end of the	-								
С	Schedules K-1 are filed with the return and furnis	shed to th	ne partners or	or before	the due	date (including e	extensions)			
	for the partnership return.		I - I - NA O							
d	The partnership is not filing and is not required							×		
	If "Yes," the partnership is not required to com or item L on Schedule K-1.	piete Scr	iedules L, IVI-	i, and ivi-2	z; item i	on page 1 of F	orm 1065;			
5	Is this partnership a publicly traded partnership,	as define	ed in section	469(k)(2)?					×	
6	During the tax year, did the partnership have ar									
•	so as to reduce the principal amount of the deb								×	
7	Has this partnership filed, or is it required to f									
	information on any reportable transaction?	<u></u> .	<u> </u>	<u></u>	<u>.</u> .	<u></u> . ´.	<u> </u>		×	
8	At any time during calendar year 2023, did the	oartnersh	ip have an in	terest in or	a signa	ture or other aut	hority over			
	a financial account in a foreign country (such a See instructions for exceptions and filing red	ıs a bank	account, se	curities acc	count, c	or other financial	account)?			
	Financial Accounts (FBAR). If "Yes," enter the n	ame of th	e foreian cou	intrv	14, nep	ort of Foreign	Darik anu		×	
9	At any time during the tax year, did the partners									
•	to, a foreign trust? If "Yes," the partnership may									
	Foreign Trusts and Receipt of Certain Foreign G								×	
10a	Is the partnership making, or had it previously									
	effective date of the election								×	
	See instructions for details regarding a section									
b	For this tax year, did the partnership make an op		sis adjustmen	t under sec	tion 743	B(b)? If "Yes," ent	er the total			
	aggregate net positive amount \$ of such section 743(b) adjustments for all partner	and anda ir	the total aggre	gate net net The partne	jative an Arshin m	nount \$ () statement			
	showing the computation and allocation of each					idot dioo dilaon a	. J.G.OHIGH		~	

Sch	edule B Other Information (continued)	Yes	No
С	For this tax year, did the partnership make an optional basis adjustment under section 734(b)? If "Yes," enter the total aggregate net positive amount \$ and the total aggregate net negative amount \$ ()		
	of such section 734(b) adjustments for all partnership property made in the tax year. The partnership must also attach a statement showing the computation and allocation of each basis adjustment. See instructions		×
d	For this tax year, is the partnership required to adjust the basis of partnership property under section 743(b) or 734(b)		
	because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under		
	section 734(d))? If "Yes," enter the total aggregate amount of such section 743(b) adjustments and/or section 734(b)		
	adjustments for all partners and/or partnership property made in the tax year \$ The partnership must also attach a statement showing the computation and allocation of the basis adjustment. See instructions		×
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-		
	kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year)		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		×
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		×
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16a	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions		×
17	If "Yes," did you or will you file required Form(s) 1099?		
	attached to this return		
18	Enter the number of partners that are foreign governments under section 892		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		×
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		×
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		×
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		×
	If "Yes," enter the total amount of the disallowed deductions		
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		×
24	Does the partnership satisfy one or more of the following? See instructions		×
a b	The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years		
-	preceding the current tax year are more than \$29 million and the partnership has business interest expense.		
С	The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		×
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an		
	interest in the partnership or of receiving a distribution from the partnership		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the		
	disclosure requirements of Regulations section 1.707-8?		×
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote: By value:		×
29	Is the partnership required to file Form 7208 relating to the excise tax on repurchase of corporate stock (see instructions):		
<u>a</u>	Under the applicable foreign corporation rules?		<u>×</u>

Page 4 Other Information (continued) Schedule B No Yes X If "Yes" to either (a) or (b), complete Form 7208, Excise Tax on Repurchase of Corporate Stock. See the Instructions for Form 7208. 30 At any time during this tax year, did the partnership (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or financial interest in a digital asset)? See × × 31 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes." the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2. Part III. If "No," complete Designation of Partnership Representative below. **Designation of Partnership Representative (see instructions)** Enter below the information for the partnership representative (PR) for the tax year covered by this return. Name of PR SHARMILA NATTE U.S. address 42375 ALDER FOREST TER STERLING VA 20166 U.S. phone number of PR (571)352-7749If the PR is an entity, name of the designated individual for the PR U.S. phone number of U.S. address of designated individual designated individual

Form 1065 (2023)

REV 03/07/24 PRO

Form 1065 (2023)

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Sche	dule	Partners' Distributive Share Items	Total amount
	1	Ordinary business income (loss) (page 1, line 23)	1
	2	Net rental real estate income (loss) (attach Form 8825)	2
	3a	Other gross rental income (loss)	
	b	Expenses from other rental activities (attach statement)	
	С	Other net rental income (loss). Subtract line 3b from line 3a	3c
_	4	Guaranteed payments: a Services 4a b Capital 4b	
SS		c Total. Add lines 4a and 4b	4c
ید	5	Interest income	5
e (6	Dividends and dividend equivalents: a Ordinary dividends	6a
Income (Loss)		b Qualified dividends 6b c Dividend equivalents 6c	
ဋ	7	Royalties	7
_	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8
	9a	Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a
	b	Collectibles (28%) gain (loss)	
	С	Unrecaptured section 1250 gain (attach statement) 9c	
	10	Net section 1231 gain (loss) (attach Form 4797)	10
	11	Other income (loss) (see instructions) Type:	11
· · · ·	12	Section 179 deduction (attach Form 4562)	12
ű	13a	Cash contributions	13a
Deductions	b	Noncash contributions	13b
ğ	С	Investment interest expense	13c
ě	d		13d(2)
	е	Other deductions (see instructions) Type:	13e
Self- Employ- ment	14a	Net earnings (loss) from self-employment	14a
ner per	b	Gross farming or fishing income	14b
<u> </u>	С	Gross nonfarm income	14c
	15a	Low-income housing credit (section 42(j)(5))	15a
ts	b	Low-income housing credit (other)	15b
Credits	С	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c
ວັ	d	Other rental real estate credits (see instructions) Type:	15d
•	e	Other rental credits (see instructions) Type:	15e
	f	Other credits (see instructions) Type:	15f
Inter- national	16	Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check	
nat na		this box to indicate that you are reporting items of international tax relevance	
× "	17a	Post-1986 depreciation adjustment	17a
ive Tax	b	Adjusted gain or loss	17b
돌필	С	Depletion (other than oil and gas)	17c
Jiğ	d	Oil, gas, and geothermal properties—gross income	17d
Alternativ Minimum T (AMT) Item	е	Oil, gas, and geothermal properties—deductions	17e
	f	Other AMT items (attach statement)	17f
_	18a	Tax-exempt interest income	18a
<u>.</u> 5	b	Other tax-exempt income	18b
ıat	С	Nondeductible expenses	18c
Other Information	19a	Distributions of cash and marketable securities	19a
nfo	b	Distributions of other property	19b
<u>-</u>	20a	Investment income	20a
He	b	Investment expenses	20b
Б	С	Other items and amounts (attach statement)	
	21	Total foreign taxes paid or accrued	21

Analy	sis of Net Income (Loss) per Retur	'n					
1	Net income (loss). Combine Schedule Schedule K, lines 12 through 13e, and 2						0.
2	Analysis by partner type: (i) Corporate	(ii) Individual (active)	(iii) Individ (passive)	lual (iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a	General partners Limited partners						
b Sob	edule L Balance Sheets per Bo	oks	Pagin	nning of	tov voor	End of	tov voor
JUI		UKS		ririirig oi	tax year		tax year
4	Assets		(a)		(b)	(c)	(d) 1,400.
1	Cash						1,400.
2a b	Less allowance for bad debts						
3	Inventories						
4	U.S. Government obligations						
5	Tax-exempt securities						
6	Other current assets (attach statement)						
7a	Loans to partners (or persons related to						
b	, , ,						
8	Other investments (attach statement) .						
9a	Buildings and other depreciable assets						
b	Less accumulated depreciation						
10a	Depletable assets						
b	Less accumulated depletion						
11	Land (net of any amortization)						
12a	Intangible assets (amortizable only) .						
b	Less accumulated amortization						
13	Other assets (attach statement)						
14	Total assets						1,400.
	Liabilities and Capital						
15	Accounts payable						
16	Mortgages, notes, bonds payable in les	s than 1 year					
17	Other current liabilities (attach statemen	nt)					
18	All nonrecourse loans						
19a	Loans from partners (or persons related	to partners) .					-50,600.
b	Mortgages, notes, bonds payable in 1 y	ear or more .					
20	Other liabilities (attach statement)						
21	Partners' capital accounts						52,000.
22	Total liabilities and capital						1,400.
Sche	Reconciliation of Incon Note: The partnership may					ome (Loss) pe	r Return
1	Net income (loss) per books		0. 6 Inc	come rec	orded on books this	s year not included	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):				ule K, lines 1 thro		
3	Guaranteed payments (other than health insurance)		lin	nes 1 th	ns included or rough 13e, and	21, not charged	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13e, and 21 (itemize):		a De	epreciat			
а	Depreciation \$ Travel and entertainment \$		1	dd lines	6 and 7		
b	Travel and entertainment \$				loss) (Analysis		
5	Add lines 1 through 4			.oss), lin	e 1). Subtract lin	e 8 from line 5	0.
	edule M-2 Analysis of Partners' C	apital Accour					ı
1	Balance at beginning of year			istributio	ons: a Cash .		
2	Capital contributed: a Cash	52,00			b Property		
_	b Property			ther dec	creases (itemize)	· 	
3	Net income (loss) (see instructions) .		0.	alal !!			
4	Other increases (itemize):	F0 00			6 and 7		F0 000
5	Add lines 1 through 4	52,00	00. 9 Ba	alance at	end of year. Subtra	ct line 8 from line 5	52,000.

		L		1 📙 Amen	ded K-1	OMB No. 1545-0123
	nedule K-1 20 23 mm 1065)	P		Partner's Share Deductions, Cro		rent Year Income, nd Other Items
	rtment of the Treasury nal Revenue Service For calendar year 2023, or tax year	r 1	Ordinary	business income (loss)	14	Self-employment earnings (loss)
D	beginning 10 / 16 / 2023 ending 12 / 31 / 2023	2	Net renta	ıl real estate income (lo	ss)	
	rtner's Share of Income, Deductions, edits, etc. See separate instructions	. 3	Other ne	t rental income (loss)	15	Credits
	Part I Information About the Partnership	4a	Guarante	eed payments for service	ces	
Α	Partnership's employer identification number					
	93-3826502	4b	Guarante	eed payments for capita	al 16	Schedule K-3 is attached if
В	Partnership's name, address, city, state, and ZIP code	4c	Total au	aranteed payments	17	checked
	SHIVA SAI INVESTMENTS LLC 42375 ALDER FOREST TER	140	Total gua	aranteed payments	''	Alternative minimum tax (Alvir) items
	STERLING, VA 20166	5	Interest i	ncome		
С	IRS center where partnership filed return: KANSAS CITY, MO					
D	Check if this is a publicly traded partnership (PTP)	6a	Ordinary	dividends		
P	art II Information About the Partner					
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions $636\!-\!55\!-\!1781$.) 6b	Qualified	dividends	18	Tax-exempt income and nondeductible expenses
F	Name, address, city, state, and ZIP code for partner entered in E. See instruction SHARMILA NATTE	s. 6c	Dividend	equivalents		
	42375 ALDER FOREST TER STERLING VA 20166	7	Royalties	S		
G	General partner or LLC Limited partner or other LLC member-manager member	8	Net shor	t-term capital gain (loss	19	Distributions
H1 H2	✓ Domestic partner ☐ Foreign partner ☐ If the partner is a disregarded entity (DE), enter the partner's:	9a	Net long	-term capital gain (loss)		
	TIN Name	9b	Collectib	les (28%) gain (loss)		
l1	What type of entity is this partner? PARTNERSHIP				20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here .] 9c	Unrecap	tured section 1250 gair	1	
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending	10	Net sect	ion 1231 gain (loss)		
	Profit 25.00000% 25.00000%					
	Loss 25.00000% 25.00000%	- 11	Other inc	come (loss)		
	Capital 25.00000% 25.00000%	-				
	Check if decrease is due to: Sale or Exchange of partnership interest. See instructions.					
K 1	Partner's share of liabilities:	12	Section	179 deduction	21	Foreign taxes paid or accrued
	Beginning Ending					
	Nonrecourse \$	13	Other de	ductions		
	Qualified nonrecourse				_	
	financing \$ \$ Recourse \$ \$ -12,650.	-				
K2	Recourse \$ -12,650. Check this box if item K1 includes liability amounts from lower-tier partnerships	ī			_	
K3	Check if any of the above liability is subject to guarantees or other	'				
	payment obligations by the partner. See instructions	22	More	than one activity for at	risk purpo	oses*
L	Partner's Capital Account Analysis	23		than one activity for pa		· · ·
	Beginning capital account \$		ee attacl	ned statement for	addition	al information.
	Capital contributed during the year \$ 13,000.					
	Current year net income (loss) \$0.	- >				
	Other increase (decrease) (attach explanation) \$	Only				
	Ending capital account \$ 13,000.	nse I				
м	Did the partner contribute property with a built-in gain (loss)?					
	Yes No If "Yes," attach statement. See instructions.	For IRS				
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)	요				
	Beginning \$	-				
	Ending \$	1				

		L		1	led K-1	OMB No. 1545-0123
	nedule K-1 20 23 rm 1065)	P		Partner's Share Deductions, Cre		rent Year Income, nd Other Items
	rtment of the Treasury nal Revenue Service For calendar year 2023, or tax	1 year	Ordinary	business income (loss)	14	Self-employment earnings (loss)
D	beginning 10 / 16 / 2023 ending 12 / 31 / 20	23 2	Net renta	ıl real estate income (los	s)	
	rtner's Share of Income, Deductions, edits, etc. See separate instruct	ions. 3	Other ne	t rental income (loss)	15	Credits
	Part I Information About the Partnership	4a	Guarante	eed payments for service	es	
Α	Partnership's employer identification number					
	93-3826502	4b	Guarante	eed payments for capital	16	Schedule K-3 is attached if checked
В	Partnership's name, address, city, state, and ZIP code	4c	Total qua	aranteed payments	17	Alternative minimum tax (AMT) items
	SHIVA SAI INVESTMENTS LLC 42375 ALDER FOREST TER	"	rotal gal	aramood paymonto	''	7 HOTTALIVO TIIIIITIATI LAX (1911) HOTTO
	STERLING, VA 20166	5	Interest i	ncome		
С	IRS center where partnership filed return: KANSAS CITY, MO					
D	Check if this is a publicly traded partnership (PTP)	6a	Ordinary	dividends		
P	art II Information About the Partner					
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instruc $218\!-\!79\!-\!4969$	tions.) 6b	Qualified	l dividends	18	Tax-exempt income and nondeductible expenses
F	Name, address, city, state, and ZIP code for partner entered in E. See instru SHIREESHA NATTE	ctions. 6c	Dividend	l equivalents		
	24465 LENAH TRAILS PL ALDIE VA 20105	7	Royalties	S		
G	General partner or LLC Limited partner or other LLC member-manager member	8	Net shor	t-term capital gain (loss)	19	Distributions
H1 H2	✓ Domestic partner☐ Foreign partner☐ If the partner is a disregarded entity (DE), enter the partner's:	9a	Net long	-term capital gain (loss)		
	TIN Name	9b	Collectib	oles (28%) gain (loss)		
l1	What type of entity is this partner? <u>INDIVIDUAL</u>				20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here .	☐ 9c	Unrecap	tured section 1250 gain		
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending	10	Net sect	ion 1231 gain (loss)		
	Profit 25.0000% 25.0000	0 %				
	Loss 25.00000% 25.0000		Other inc	come (loss)		
	Capital 25.00000	0 %				
	Check if decrease is due to:					
	Sale or Exchange of partnership interest. See instructions.	12	Continu	179 deduction	21	Foreign taxes paid or accrued
K1	Partner's share of liabilities: Beginning Ending	'2	Section	179 deduction	21	Foreign taxes paid or accrued
	. 1.	13	Other de	ductions		
		- -				
	Qualified nonrecourse financing \$					
	Recourse \$ -12,65	50.				
K2	Check this box if item K1 includes liability amounts from lower-tier partnerships	s 🗌				
КЗ	Check if any of the above liability is subject to guarantees or other	r				
	payment obligations by the partner. See instructions	22	More	than one activity for at-	risk purpo	oses*
L	Partner's Capital Account Analysis	23		than one activity for pas		* ' '
	Beginning capital account \$		ee attaci	ned statement for a	iddition	al information.
	Capital contributed during the year \$ 13,00					
		0.				
	Other increase (decrease) (attach explanation) \$	Only				
	Withdrawals and distributions \$(Ending capital account \$ 13,00	<u></u>				
M	Did the partner contribute property with a built-in gain (loss)?					
.*1	Yes No If "Yes," attach statement. See instructions.	For IRS				
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss	<u>,</u>				
-	Beginning	· -				
	Ending \$					

REV 03/07/24 PRO

				Final K-1	☐ Am	ended K-1	OMB No. 1545-0123
	nedule K-1 20 2 mm 1065)	3 🍱	ar				rrent Year Income, and Other Items
	rtment of the Treasury nal Revenue Service For calendar year 2023, or	tax year	(usiness income (los		
.	beginning 10 / 16 / 2023 ending 12 / 31 / 2	2023 2	N	let rental r	eal estate income	loss)	
	rtner's Share of Income, Deductions, edits, etc. See separate instru	uctions.	(Other net r	ental income (loss)	15	Credits
	art I Information About the Partnership	4a	1 (Guarantee	d payments for ser	vices	
Α	Partnership's employer identification number						
В	93-3826502 Partnership's name, address, city, state, and ZIP code	4b)	Guarantee	d payments for cap	oital 16	Schedule K-3 is attached if checked
_	SHIVA SAI INVESTMENTS LLC	40	; 7	Total guara	inteed payments	17	Alternative minimum tax (AMT) items
	42375 ALDER FOREST TER STERLING, VA 20166	5		nterest inc	ome		
С	IRS center where partnership filed return: KANSAS CITY, MO		'				
D	Check if this is a publicly traded partnership (PTP)	6a	1 (Ordinary di	vidends		
P	art II Information About the Partner						
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See insta $496\!-\!25\!-\!7843$	ructions.) 6b) (Qualified d	ividends	18	Tax-exempt income and nondeductible expenses
F	Name, address, city, state, and ZIP code for partner entered in E. See ins LAXMI TEJA GOTTIMUKKULA	structions. 60	: [Dividend e	quivalents		
	301 FLAX LANE SAN RAMON CA 94582	7	F	Royalties			
G	☐ Limited partner or other LL member-manager member	_C 8	١	Net short-t	erm capital gain (lo	19	Distributions
H1 H2	 ✓ Domestic partner ☐ Foreign partner ☐ If the partner is a disregarded entity (DE), enter the partner's: 	9a	1 1	Net long-te	erm capital gain (lo	ss)	
	TIN Name	9b	, (Collectible	s (28%) gain (loss)		
l1	What type of entity is this partner? INDIVIDUAL					20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	. 🗌 90	; \	Jnrecaptu	red section 1250 g	ain	
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending	10	1 (Net section	n 1231 gain (loss)		
	Profit 25.0000% 25.000	000%					
	Loss 25.00000% 25.000			Other inco	me (loss)		
	Capital 25.00000 % 25.000	000%					
	Check if decrease is due to:						
	☐ Sale or ☐ Exchange of partnership interest. See instructions.	12	, ,	Section 17	9 deduction	21	Foreign taxes paid or accrued
K1	Partner's share of liabilities: Beginning Ending	"2	,	Section 17	3 deduction	-	Toreign taxes paid or accrued
	Nonrecourse \$	13	3 (Other dedu	ıctions		
	Qualified nonrecourse financing \$						
	Recourse \$ -12,	650.					
K2	Check this box if item K1 includes liability amounts from lower-tier partners	hips					
K3	Check if any of the above liability is subject to guarantees or or			_			
	payment obligations by the partner. See instructions	———————————————————————————————————————	=	Ξ	nan one activity for		
L	Partner's Capital Account Analysis	23	_=		nan one activity for	<u> </u>	* ' '
	Beginning capital account \$		see	allache	a statement ic	r addition	nal information.
		0.00.					
	Current year net income (loss) \$	≥	,				
	Withdrawals and distributions \$ (7 0					
	Ending capital account \$ 13,0	ıΨ					
м	Did the partner contribute property with a built-in gain (loss)?						
	Yes No If "Yes," attach statement. See instructions.	oss) P					
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (L	oss)					
	Beginning \$						
	Ending						

.

				Final K-1	ı	Amended	K-1	OMB No. 1545-0123
	rm 1065)	23	Pa					rent Year Income, nd Other Items
	rtment of the Treasury nal Revenue Service For calendar year 2023		1		business inco		14	Self-employment earnings (loss)
_	beginning 10 / 16 / 2023 ending 12 / 31	/ 2023	2	Net renta	l real estate in	ncome (loss)		
	rtner's Share of Income, Deductions, edits, etc. See separate i		3	Other net	t rental incom	e (loss)	15	Credits
	Part I Information About the Partnership		4a	Guarante	ed payments	for services		
Α	Partnership's employer identification number							
	93-3826502		4b	Guarante	ed payments	for capital	16	Schedule K-3 is attached if checked
В	Partnership's name, address, city, state, and ZIP code		4c	Total qua	aranteed payr	nents	17	Alternative minimum tax (AMT) items
	SHIVA SAI INVESTMENTS LLC 42375 ALDER FOREST TER			Total gaa	a a nood payr		''	7 itomative miniman tax (ivi) itome
	STERLING, VA 20166		5	Interest in	ncome			
С	IRS center where partnership filed return: KANSAS CITY,	MO						
D	Check if this is a publicly traded partnership (PTP)		6a	Ordinary	dividends			
P	art II Information About the Partner							
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See $144-23-4978$	instructions.)	6b	Qualified	dividends		18	Tax-exempt income and nondeductible expenses
F	Name, address, city, state, and ZIP code for partner entered in E. Se KARTHIK DEVULAPALLI	ee instructions.	6c	Dividend	equivalents			
	3116 WIER DR E WARRINGTON PA 18976		7	Royalties	i			
G	General partner or LLC Limited partner or other member-manager member	er LLC	8	Net short	t-term capital	gain (loss)	19	Distributions
H1 H2	✓ Domestic partner☐ Foreign partner☐ If the partner is a disregarded entity (DE), enter the partner's:	,	9a	Net long-	term capital	gain (loss)		
	TIN Name	:	9b	Collectibl	les (28%) gai	n (loss)	<u></u>	
l1	What type of entity is this partner? <u>INDIVIDUAL</u>						20	Other information
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check her	re . 🗌 !	9с	Unrecapt	tured section	1250 gain		
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending	-	10	Net section	on 1231 gain	(loss)		
		00000%_						
		30000 /0	11	Other inc	ome (loss)			
	Capital 25.00000% 25.0	00000%						
	Check if decrease is due to:							
	Sale or Exchange of partnership interest. See instruction		12	Section 1	79 deduction	1	21	Foreign taxes paid or accrued
K1	Partner's share of liabilities: Beginning End		-	Cootion	TO GOGGOTO			Toroigh taxoo para or acciraca
	Nonrecourse \$	_	13	Other dec	ductions			
	Qualified nonrecourse	-						
	financing \$							
	Recourse \$ -1	2,650.						
K2	Check this box if item K1 includes liability amounts from lower-tier part	nerships						
КЗ	Check if any of the above liability is subject to guarantees of payment obligations by the partner. See instructions							
			22	=		ivity for at-risl		
L	Partner's Capital Account Analysis		23 * C c					vity purposes* al information.
	Beginning capital account \$	3,000.	36	e allaci	ieu stateri	ient for auc	JILIOH	ai iiiioiiiialioii.
	Capital contributed during the year \$1 Current year net income (loss) \$	_						
	Other increase (decrease) (attach explanation) \$		<u>~</u>					
	Withdrawals and distributions \$ ((Only					
		3,000.	Use					
М	Did the partner contribute property with a built-in gain (loss)?							
	Yes No If "Yes," attach statement. See instruction	ons.	For IRS					
N	Partner's Share of Net Unrecognized Section 704(c) Gain of	or (Loss)	ß					
	Beginning							
	Ending \$							

REV 03/07/24 PRO

Pass-through entities are required to submit returns and payments electronically.

Use this voucher only if you have been granted a waiver.

For details, visit the Department's website at www.tax.virginia.gov.

How to Make Tax Payments Electronically

To make payments electronically, use the **eForms** application on the Department's website, www.tax.virginia.gov. Select the 502V from the eForms list and complete the form and payment information online. You can schedule your payment for a future date.

A PTE may also make its tax payments using an ACH credit transaction through its bank. Some banks may charge a fee for this service. For information on how to submit ACH credit payments to the Department, see the Electronic Payment Guide available at www.tax.virginia.gov.

Purpose of Form

Use Form 502V:

- To make a withholding payment when a PTE has an approved waiver to file on paper rather than electronically.
- To pay withholding tax, penalties, and interest when payment is made with Form 502.

Form 502V should only be used when sending a payment with the return (Forms 502). Do not use Pass-Through Entity Payment Vouchers (Form 502V and Form 502W) to make payments with the Unified Nonresident Individual Income Tax Return, Form 765.

When to File

Form 502 Filers: The withholding tax payment is due on the due date of the PTE's return, regardless of whether the extension to file Form 502 is used. For calendar year filers, the withholding tax payment is due on April 15, 2024. When the last day on which a tax return may be filed or a tax may be paid falls on a Saturday, Sunday, or legal holiday, you may file and make payment without penalty or interest on the next succeeding business day.

Where to File

If you have an approved waiver, mail returns and payments to:

Virginia Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

Questions

If you have any questions about this return, call (804) 367-8037 or write to the Virginia Department of Taxation, P.O. Box 1115, Richmond, Virginia 23218-1115.

Preparation of Voucher

Complete the pass-through entity's federal employer identification number (FEIN), entity type, ending month and year, and name and address information. Enter the date and telephone number.

Compute the total income amount (including additions and subtractions) on all nonresident owners based on the best available information of their expected share of Virginia source income for the year. Multiply the total income amount by 5% to determine the withholding tax due. Apply any tax credits available to the nonresident owners' withholding tax.

Detach at dotted line below, DO NOT SEND ENTIRE PAGE.

FORM 502V VIRGINIA PASS-THROUGH ENTITY TAX PAYMENT VOUCHER

REV 02/22/24 PRO

(DOC ID 532)

Rev.

VIRGINIA DEPARTMENT OF TAXATION P.O. BOX 1500, RICHMOND, VA 23218-1500 FOR INFORMATION CALL (804) 367-8037

Payment must be made electronically. Use this voucher only if you have an approved waiver.

6793382650210011 5321030 123129

	FEIN	Entity Type				
93-3826502 PL						
	Name of Pass-Through Entity SHIVA SA	I INVESTMENTS LLC				
	Address (Number and Street)					
	42375 ALDER FOREST TER					
	Address Continued					
5						
	City, State, and ZIP Code					
5	STERLING VA 20166					
2	Date	Telephone Number				
į		(571)352-7749				

To receive credit for your payment in the correct taxable year, please enter the ending month (numerical) and year.

	Month Ending	Year Ending	
Calendar year:	12		OR;
Fiscal year:			OR;
Short taxable year:	12	2023	

Enclose this voucher with Form 502, with a check or money order made payable to Virginia Department of Taxation.

Amount of this payment



2023 Virginia Form 502

Pass-Through Entity Return of Income and Return of Nonresident Withholding Tax



Official Use Only

Virginia Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

FISCAL or SHORT Year Filer: Beginning Date 10/16 2023; Ending Date	12/31 , 20 23	
Check if Schedules VK-1 were filed by Web Upload By checking the box to the right, I (we) authorize the Department to discuss this return		
	_	ame change
☐ Change in fiscal year ☐ Unified nonresident return filed ☐ Sub	oject to Bank Franchise Tax	ertified Company Apportionment
FEIN	Date of Formation	Entity Type (see instructions)
93-3826502	10/16/2023	PL
Entity Name	Date Operations Began in Virginia	NAICS Code
SHIVA SAI INVESTMENTS LLC	10/16/2023	519200
Number and Street	State or Country Where Incorporated or Organized	Description of Business Activity
42375 ALDER FOREST TER	-	
City or Town, State, and ZIP Code		
STERLING VA 20166	VA	INVESTMENTS
Number and Types of Owners (See instructions)		
Count all of the owners who were issued a federal Schedule K-1 for the taxable year		
a. The total number of owners (include individuals and any other entity types) \ldots .		
b. The total number of nonresident owners		
c. Total amount withheld for nonresident owners (total of Line e from all Schedules	-	-
d. If the entity is exempt from withholding, enter the exemption code	d	
Distributive or Pro Rata Income and Deductions (See instructions)		
1. Total taxable income amounts		
2. Total deductions		
3. Tax-exempt interest income		.00
Allocation and Apportionment: Check if electing the manufacturer's alternative manufacturer's alternat	nethod of apportionment	
4. Income allocated to Virginia from Schedule 502A, Section C, Line 2	· · · · · · · · · 4. ₋	.00
5. Income allocated outside of Virginia from Schedule 502A, Section C, Line 3(e) .	5	.00
6. Apportionable income from Schedule 502A, Section C, Line 4	6	0 .00
7. Virginia apportionment percentage from Schedule 502A, Section B, percent from L	ine 1 or Line 2(f) or 100% 7	100.00 %
Virginia Additions – See Schedule 502ADJ for Other Additions		
8. Conformity – depreciation		.00
9. Conformity – other		.00
10. Net income tax or other tax used as a deduction in determining taxable income (s		
11. Interest on municipal or state obligations other than from Virginia		
12. Total additions from enclosed Schedule 502ADJ, Section A , Line 5		
13. Total additions. Add Lines 8 through 12		
Virginia Subtractions - See Schedule 502ADJ for Other Subtrac		
14. Conformity – depreciation		.00
15. Conformity – other		
16. Income from obligations of the United States		
17. Total subtractions from enclosed Schedule 502ADJ, Section B, Line 5		
18. Total subtractions. Add Lines 14 through 17		
Virginia Tax Credits Passed Through to Owners	10	
19. Total nonrefundable credits from enclosed Schedule 502ADJ, Section C, Part II,	Line 1	.00
20. Total refundable credits from enclosed Schedule 502ADJ. Section C. Part IV. Lin		.00

2023 Virginia **Form 502**

Name SHIVA SAI INVESTMENTS LLC Page 2

FEIN 93-3826502

VENKATA SAI PAVAN KUMAR DUDIPALLI

Se	ection 1 – Withholding Payment Reconciliation				
1.	Total withholding tax due for nonresident owners		1	0	.00
2.	Total withholding tax paid (Entity's own payments only – see instructions)				.00
	Overpayment. If Line 2 is greater than Line 1, subtract Line 1 from Line 2				.00
	Withholding tax due. If Line 2 is less than Line 1, subtract Line 2 from Line 1				.00
Se	ction 2 – Penalty and Interest Charges on Withholding Tax				
5.	Extension penalty (may apply to returns filed within extension period if 90% of Line 1 is not	paid timely)	5		.00
6.	Late payment penalty on tax due (will apply if there is a balance due on Line 4 and Form 5				0.0
_	more than 6 months after the original due date). Enter 30% of the amount on Line 4				.00
	Interest (may apply if there is a balance due on Line 4)				.00
	Penalty and interest charges due. Add Line 5 or Line 6 (whichever applies) to Line 7		8		.00
	ction 3 – Penalty for Late Filing of Form 502	00 days after the			
9.	If Form 502 is being filed more than 6 months after the original due date, or more than 3 federal extended due date, enter \$1,200		0		.00
Se	ction 4 – Withholding Overpayment		9		
	Net overpayment. If Line 8 or Line 9 exceeds Line 3, go to Line 13 below to compute the to Compare Line 6 and Line 9. If Line 6 is greater than Line 9, subtract Line 8 from Line 3. If than Line 6, subtract Line 7 plus Line 9 from Line 3. Otherwise, enter overpayment amount	Line 9 is greater			00
11	Amount of withholding overpayment to be credited to 2024				.00
	Amount of withholding overpayment to be refunded				.00
	ction 5 – Tax, Penalty, and Interest Due		12		.00
	Balance of tax due plus extension penalty, if applicable. If there is an amount due on Line 4, enter I If there is an overpayment on Line 3 and Line 8 or Line 9 is greater than Line 3, enter Line 5 minutes.		12	0	.00
14.	Interest charges on withholding tax from Line 7				.00
	Late filing penalty. Enter the greater of Line 6 or Line 9				.00
16.	Total payment due. Add Line 13, Line 14, and Line 15			0	.00
Se	ction 6 – Amount Due or Refund		10		
17.	Motion Picture Production Tax Credit to be refunded directly to PTE (see instructions)		17		.00
18.	Research and Development Expenses Tax Credit to be refunded directly to PTE (see instru	ictions)			.00
19.	Credit to be refunded directly to PTE. Add Line 17 and Line 18				.00
20.	Amount Due. If there is an amount due on Line 16 and the amount exceeds the amount on	- /			
04	Amount of Refund. If there is an amount due on Line 16 and the amount is less than the am		20		.00
21.	subtract Line 16 from Line 19. If there is an amount on Line 12, add Line 12 and Line 19	- ,	21		.00
lav an A	he undersigned owner and authorized representative of the pass-through entity for which this verthat this return (including any accompanying schedules, statements, and enclosures) has been delief, a true, correct, and complete return, made in good faith, for the taxable year stated, proreparer other than the authorized representative declares the same, and such declaration owledge.	een examined by noursuant to the tax i	ne and is laws of th	, to the best of my knowle te Commonwealth of Virg	edge ginia.
Sig	nature of Owner or Authorized Representative Tit	tle		Date	
	Li	mited Liability Compa	anv Member	10/16/2023	
Pri		none	1	, ., .,	
SF	HARMILA NATTE	571)352-774	19		
	ividual or Firm, Signature of Preparer, Phone Number, and Address VENKATA SAI PAVAN KUMAR DUDIPA			Date	
	LOBAL TAXES LLC 245 ROONEY CT E BRUNSWICK NJ 08816	, ===-		A 11/4 1 0 1	
Pri	nted Name of Individual or Firm	eparer's FEIN, PTIN	, or SSN	Approved Vendor Code	

Include a copy of your federal return with Form 502. Important: do not include a federal Schedule K-1 for each owner. If you filed a Schedule VK-1 for each owner online using Web Upload, do not include copies of Schedules VK-1 with the Form 502.

P02470833

2023 Schedule VK-1 Consolidated							
PTE's Name:	PTE's FEIN:						
SHIVA SAI INVESTMENTS LLC	93	-3826502					
Check Box if Owner Amended Return and/or is Participating in an Individual Unified Nonresident Return Name, Address, City, State, Zip Code	FEIN or SSN (No Dashes)	Date Acquired Interest In The PTE (MM/DD/YYYY) Line a.	Owner's Entity Type Line b.	Owner's Part. Type Line c.	Owner's Part. % (Enter Decimal Point) Line d.	Amount Withheld by PTE for Owner Line e.	Owner Entity WH Exemp. Code Line f.
Amended Reason Code Nonresident							
SHARMILA NATTE 42375 ALDER FOREST TER	636551781	10/16/2023	PG	GPT	25.00		
STERLING VA 20166							
Amended Reason Code Nonresident SHIREESHA NATTE 24465 LENAH TRAILS PL ALDIE VA 20105	218794969	10/16/2023	RES	GPT	25.00		
Amended Reason Code Nonresident							
LAXMI TEJA GOTTIMUKKULA 301 FLAX LANE SAN RAMON CA 94582	496257843	10/16/2023	NON	GPT	25.00	0.	
Amended Reason Code Nonresident							
KARTHIK DEVULAPALLI 3116 WIER DR E WARRINGTON PA 18976	144234978	10/16/2023	NON	GPT	25.00	0.	
Amended Reason Code Nonresident							
Amended Reason Code Nonresident							
Amended Reason Code Nonresident							
Amended Reason Code Nonresident							
Amended Reason Code Nonresident							

PTE's FEIN: PTE's Name:

93-3826502 SHIVA SAI INVESTMENTS LLC



93-3826502		SHIVA SAI INVE	STMENTS LLC								
FEIN or SSN (No Dashes)	Total Taxable Income Amounts Line 1.	Total Deductions Line 2.	Tax-Exempt Interest Income Line 3.	Income Allocated to Virginia Line 4.	Income Allocated Outside of Virginia Line 5.	Apportionable Income Line 6.	Virginia Apport. % (Enter Decimal Point) Line 7.	Total Add. Line 13.	Total Sub. Line 18.	Total Refund. Credits Part IV Line 1.	
636551781	0.					0.	100.00				
218794969	0.					0.	100.00				
496257843	0.					0.	100.00				
144234978	0.					0.	100.00				

Virginia Pass-Through Entity Owner's Share of Income and



\sim		01 /		
CH	-	ľ·K	- 11-	

_	virginia Mod						
Final/Close Account If SH		_		, 2023; Ending Da			
Amended Return: Enter R	leason Code		Owner is Pa	articipating in a Unified Nonre	sident	Individual Income	Tax Returr
Owner	r Information			Pass-Through Entity	(PTE)	Information	
Name	FEIN or SSN	E01	Name		~	FEIN	
SHARMILA NATTE	636-55-1	.781	_	AI INVESTMENTS LI	iC	93-3826502	
Address 42375 ALDER FOREST	TER		Address 42375 Z	ALDER FOREST TER		Taxable Year End Date 12/31/2023	
Address Continued			Address Contin			12/31/2023	<u>'</u>
City or Town, State, and ZIP Code			City or Town, S	tate, and ZIP Code			
STERLING VA 20166			STERLIN	NG VA 20166			
Additional Owner Informat	•	,					
a. Date owner acquired interest	est in the PTE (MM/DD/)	/YYY)			a	10 / 16	/2023
b. Owner's entity type (Enter	code)				b. _	PG	
c. Owner's participation type	(Enter code)				c. _	GPT	
d. Owner's participation perce					_		25.00 %
e. Amount withheld by PTE for	or the owner				e		.0
f. If owner or entity is exempt					f		
DISTRIBUTIVE OR PRO RATA IN		- •	,				
1. Total taxable income amou					_		0.0
2. Total deductions							.0
3. Tax-exempt interest income					3		.0
ALLOCATION AND APPORTIONS		TC'a Cabadul	a EOOA Castian	C Line 2)	4		0
4. Income allocated to Virginia					_		0.
5. Income allocated outside of							0.0
6. Apportionable income (own							0.0
7. Virginia apportionment percei VIRGINIA ADDITIONS – OWNER		ile 502A, Secti	on B – percent fror	n Line Tor Line 2(1), or 100%)	/		00.00 %
8. Conformity – depreciation.					8.		.00
9. Conformity – other							.00
10. Net income tax or other tax							.0
11. Interest on municipal or sta					_		.00
12. Other additions (see Form							.00
Code	Amount	,	Code	Amount	- 1		
12a.	.00	12b.		.00	0		
12c.	.00	12d.		.0.)		
13. Total Additions (add Lines	s 8-11 and 12a-12d)				13		.00
VIRGINIA SUBTRACTIONS - OW							
14. Conformity – depreciation.					_		.00
15. Conformity – other					15		.0
16. Income from obligations of	the United States				16		.0
17. Other subtractions (see Fo		subtraction co	des.)				
	umber (if applicable)		Code	Amount	- 1		
Certification N				.00	<u> </u>		
17a.				0.0	١ .		
				.00			
17a.				.00.			
17a. 17b.					0		

Owner FEIN or SSN 636-55-1781

PTE FEIN

93-3826502



Page 2

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VIRGINIA TAX CREDITS

- See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations).
- Individual owners with taxes paid to other states, see Schedule OSC Instructions.

Part I – Nonrefundable Credits 1. State Income Tax Paid		22. Research and Development Expenses Tax Credit (Use this line if the taxpayer does not qualify for a	
(see Form 502 Instructions)	.00	refundable credit.)	.00
Neighborhood Assistance Act Tax Credit	.00	23. Education Improvement Scholarships Tax Credit	.00
3. Biodiesel and Green Diesel Fuels Tax Credit		24. Major Research and Development Expenses Tax Credit	.00
Recyclable Materials Processing Equipment Tax Credit		25. Food Donation Tax Credit	.00
5. Vehicle Emissions Testing Equipment Tax Credit	.00	Worker Training Tax Credit Yirginia Housing Opportunity	.00
6. Major Business Facility Job Tax Credit	.00	Tax Credit	.00
7. Waste Motor Oil Burning Equipment		Part II – Total Nonrefundable Credits	
Tax Credit	.00	Total Nonrefundable Credits. Add Part I, Lines 1-8, and 12-27	.00
Waterways Tax Credit	.00	Part III – Refundable Credits	
9. Reserved for Future Use	>	Agricultural Best Management	
10. Reserved for Future Use		Practices Tax Credit	.00
11. Reserved for Future Use	\sim	100% Coalfield Employment Enhancement Tax Credit from 2023	
12. Historic Rehabilitation Tax Credit	.00	Form 306D, Part II, Section 1, Line 1 3. Full Credit: Enter amount from 2023	.00
13. Land Preservation Tax Credit	.00	Form 306D, Part II, Section 2, Line 3	.00
14. Qualified Equity and Subordinated Debt Investments Tax Credit		4. 85% Credit: Enter amount from 2023 Form 306D, Part II, Section 3, Line 5	.00
15. Communities of Opportunity Tax Credit		5. Total Coalfield Employment Enhancement Tax Credit allowable	
16. Green and Alternative Energy Job Creation Tax Credit	.00	this year (Add Lines 3 and 4)	.00
17. Farm Wineries and Vineyards Tax Credit	.00	Reserved for Future Use Motion Picture Production	
18. International Trade Facility Tax Credit	.00	Tax Credit 8. Research and Development	.00
19. Port Volume Increase Tax Credit			.00
		Conservation Tillage and Precision Agricultural Equipment Tax Credit	.00
20. Barge and Rail Usage Tax Credit 21. Livable Home Tax Credit		10. Pass-Through Entity Elective Tax Payment Credit	.00
		Part IV – Total Refundable Credits	
		Total Refundable Credits. Add Part III, Lines 1, 5, and 7-10	.00

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Virginia Pass-Through Entity Owner's Share of Income and



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CHECK IF— VIRGI	nia Modii	icatio	ons	and (∪rea	IITS					
Final/Close Account If SHORT Per	iod Return: Be	ginning [Date C	ot 16		, 2023;	Ending Dat	e <u>De</u>	c 31	,	20 <u>23</u>
Amended Return: Enter Reason C	ode			Owner is	s Particip	pating in a L	nified Nonre	sident	Individual	ncome	Tax Return
Owner Inform	ation				Р	Pass-Throu	igh Entity	(PTE)	Informat	ion	
Name	FEIN or SSN			Name					FEIN		
SHIREESHA NATTE	218-79-49	969			SAI	INVEST	IENTS LL	C	93-38		
Address 24465 LENAH TRAILS PL				Address	וח.דע	ER FORES	מער ענ		Taxable Yea 12/31		
Address Continued				Address Co		ER PORE	71 1110		12/51	7 2 0 2	<u> </u>
City or Town, State, and ZIP Code				1 '		and ZIP Code	_				
ALDIE VA 20105				STERL	ING V	VA 2016					
ADDITIONAL OWNER INFORMATION (SEE	,								,		,
a. Date owner acquired interest in the								_		16	/2023
b. Owner's entity type (Enter code)								_			
c. Owner's participation type (Enter co								_			
d. Owner's participation percentage (E								_			25.00 %
e. Amount withheld by PTE for the ow											.00
f. If owner or entity is exempt from with	_							. f			
1. Total taxable income amounts				•				1			0.00
Total deductions								_			.00.
Tax-exempt interest income											
ALLOCATION AND APPORTIONMENT								· •			.00
4. Income allocated to Virginia (owner	's share from PT	E's Sche	dule 5	02A, Section	on C, Lii	ne 2)		. 4			.00
5. Income allocated outside of Virginia	(owner's share	from PTE	's Sch	edule 502	A, Secti	on C, Line 3	(e))	. 5			.00
6. Apportionable income (owner's sha	re from PTE's So	hedule 5	02A, S	Section C,	Line 4) .			. 6.			0.00
7. Virginia apportionment percentage (fro	m PTE's Schedule	502A, Se	ction E	– percent t	from Line	e 1 or Line 2(1), or 100%)	. 7		1	00.00 %
VIRGINIA ADDITIONS - OWNER'S SHARE											
8. Conformity – depreciation											.00
9. Conformity – other								_			.00
10. Net income tax or other tax used as								_			.00
11. Interest on municipal or state obliga								. 11.			.00
12. Other additions (see Form 502 instr	uctions for additi ount	on codes	.) Co			Amoui		-			
12a.	.00	12b.	CO	ue		Allioui	.00				
12c.	.00	12d.					.00				
13. Total Additions (add Lines 8-11 an	d 12a-12d)	_						_ = . 13.			.00
VIRGINIA SUBTRACTIONS - OWNER'S S	,							_			
14. Conformity – depreciation								. 14			.00
15. Conformity – other								. 15			.00
16. Income from obligations of the United	ed States							. 16			.00
17. Other subtractions (see Form 502 in		btraction	codes	.)							
Certification Number (if	f applicable)		Co	de		Amoui	nt	- 1			
17a.		_					.00.	_			
17b.							.00.	_			
17c.							.00.	_			
17d.							.00.	<u> </u>			
18. Total Subtractions. (add Lines 14-	,							. 18			.00
Use Schedule SVK-1 if you are claiming Refer to the Form 502 Instructions for add							dule SVK-1				

Owner FEIN or SSN 218-79-4969

PTE FEIN

93-3826502



VIRGINIA TAX CREDITS

Page 2

- See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations).
- Individual owners with taxes paid to other states, see Schedule OSC Instructions.

Part	I – Nonrefundable Credits		22. Research and Development	
1.	State Income Tax Paid (see Form 502 Instructions)	.00	Expenses Tax Credit (Use this line if the taxpayer does not qualify for a refundable credit.)	.00
2.	Neighborhood Assistance Act Tax Credit	.00	23. Education Improvement Scholarships Tax Credit	.00
3.	Biodiesel and Green Diesel Fuels Tax Credit		24. Major Research and Development Expenses Tax Credit	.00
	Recyclable Materials Processing Equipment Tax Credit		25 Food Donation Tay Cradit	.00
	Vehicle Emissions Testing Equipment Tax Credit	00	26. Worker Training Tax Credit	.00
	Major Business Facility Job Tax Credit	.00	Tax Credit	.00
7.	Waste Motor Oil Burning Equipment Tax Credit	•	art II – Total Nonrefundable Credits 1. Total Nonrefundable Credits.	
8.	Riparian Forest Buffer Protection for Waterways Tax Credit	00	Add Part I, Lines 1-8, and 12-27	.00
9.	Reserved for Future Use		art III - Refundable Credits 1. Agricultural Best Management	
10.	Reserved for Future Use		Practices Tax Credit 2. 100% Coalfield Employment	.00
	Reserved for Future Use		Enhancement Tax Credit from 2023 Form 306D, Part II, Section 1, Line 1	.00
	Historic Rehabilitation Tax Credit Land Preservation Tax Credit		3. Full Credit: Enter amount from 2023 Form 306D, Part II, Section 2, Line 3	.00
	Qualified Equity and Subordinated Debt Investments Tax Credit		4. 85% Credit: Enter amount from 2023 Form 306D, Part II, Section 3, Line 5	.00
15.	Communities of Opportunity Tax Credit		Total Coalfield Employment Enhancement Tax Credit allowable	
16.	Green and Alternative Energy Job Creation Tax Credit	.00	this year (Add Lines 3 and 4)	.00.
17.	Farm Wineries and Vineyards Tax Credit		6. Reserved for Future Use7. Motion Picture Production	
18.	International Trade Facility Tax Credit		Tax Credit	.00
19.	Port Volume Increase Tax Credit		Expenses Tax Credit 9. Conservation Tillage and Precision	.00
	Barge and Rail Usage Tax Credit	.00	Agricultural Equipment Tax Credit	.00
21.	Livable Home Tax Credit	.00	Pass-Through Entity Elective Tax Payment Credit —	.00
		Р	art IV – Total Refundable Credits	
			1. Total Refundable Credits.	

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Add Part III, Lines 1, 5, and 7-10.....

.00

Virginia Pass-Through Entity Owner's Share of Income and



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Final/Close Account If SHORT Perio	d Return: Be	ginning D	ate <u>Oct 16</u>	, 2023; Ending Da	te <u>De</u>	2 31	,	20 <u>23</u>
Amended Return: Enter Reason Cod	le		Owner is	Participating in a Unified Nonre	sident	Individual I	ncome	Tax Returi
Owner Informati	tion			Pass-Through Entity	(PTE)	Informat	ion	
	FEIN or SSN		Name			FEIN		
	496-25-78	343	-	SAI INVESTMENTS LL	C	93-382		
Address 301 FLAX LANE			Address 42375	ALDER FOREST TER		Taxable Yea 12/31		
Address Continued			Address Co			12/31	/ 202	<u> </u>
City or Town, State, and ZIP Code SAN RAMON CA 94582				i, State, and ZIP Code ING VA 20166				
Additional Owner Information (SEE IN	NSTRUCTIONS)							
a. Date owner acquired interest in the P	TE (MM/DD/Y)	YYY)			. a	10 /	16	/2023
b. Owner's entity type (Enter code)					. b	NON		
c. Owner's participation type (Enter code	e)				. с	GPT		
d. Owner's participation percentage (Exa	ample: 47.35%	o)			. d.			25.00 9
e. Amount withheld by PTE for the owner	r				е.			0.0
f. If owner or entity is exempt from withh	nolding, enter a	an exempt	ion code		. f			
DISTRIBUTIVE OR PRO RATA INCOME AND		•	,					
Total taxable income amounts					_			0.0
2. Total deductions								.0
3. Tax-exempt interest income					. 3			.0
4. Income allocated to Virginia (owner's	share from PT	E's Sched	lule 502A. Section	n C. Line 2)	. 4.			.0
5. Income allocated outside of Virginia (o					_			.0
6. Apportionable income (owner's share								0.0
7. Virginia apportionment percentage (from								00.00 9
VIRGINIA ADDITIONS – OWNER'S SHARE		,	'	()	_			
8. Conformity – depreciation					. 8. _			.0
9. Conformity – other					. 9. _			.0
10. Net income tax or other tax used as a	deduction in c	determinin	g taxable income	(see instructions)	. 10			.0
11. Interest on municipal or state obligation					. 11			.0
12. Other additions (see Form 502 instruc		ion codes.						
Code Amou		401-	Code	Amount				
12a 12c.	.00	12b. 12d.		.00.	_			
13. Total Additions (add Lines 8-11 and					_			.0
VIRGINIA SUBTRACTIONS – OWNER'S SHA	,				. 13			.0
14. Conformity – depreciation					. 14.			.0
15. Conformity – other					. 15.			.0
16. Income from obligations of the United	States				. 16.			.0
17. Other subtractions (see Form 502 inst		btraction	codes.)					
Certification Number (if a	pplicable)		Code	Amount	- 1			
17a.		-		.00	- 1			
17b.		4		.00)			
17c.				.00				
17d.				.00)			
18. Total Subtractions. (add Lines 14-16								

Owner FEIN or SSN 496-25-7843

PTE FEIN

93-3826502



Page 2

VIRGINIA TAX CREDITS

- See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations).
- Individual owners with taxes paid to other states, see Schedule OSC Instructions.

Part	I – Nonrefundable Credits		22. Research and Development	
1.	State Income Tax Paid (see Form 502 Instructions)	.00	Expenses Tax Credit (Use this line if the taxpayer does not qualify for a refundable credit.)	.00
2.	Neighborhood Assistance Act Tax Credit		23. Education Improvement Scholarships Tax Credit	.00
3.	Biodiesel and Green Diesel Fuels Tax Credit	.00	24. Major Research and Development Expenses Tax Credit	.00
4.	Recyclable Materials Processing Equipment Tax Credit	.00	25. Food Donation Tax Credit	.00
5.	Vehicle Emissions Testing Equipment		26. Worker Training Tax Credit	.00
6.	Tax Credit	.00	27. Virginia Housing Opportunity Tax Credit	.00
	Waste Motor Oil Burning Equipment		Part II - Total Nonrefundable Credits	
8	Tax Credit	.00	1. Total Nonrefundable Credits. Add Part I, Lines 1-8, and 12-27	.00
0.	Waterways Tax Credit	.00	Part III – Refundable Credits	.00
	Reserved for Future Use		Agricultural Best Management Practices Tax Credit	00
10.	Reserved for Future Use		2. 100% Coalfield Employment	.00
11.	Reserved for Future Use	><	Enhancement Tax Credit from 2023 Form 306D, Part II, Section 1, Line 1	.00
12.	Historic Rehabilitation Tax Credit	.00	3. Full Credit: Enter amount from 2023	.00
13.	Land Preservation Tax Credit	.00	Form 306D, Part II, Section 2, Line 3	.00
14.	Qualified Equity and Subordinated Debt Investments Tax Credit	.00	4. 85% Credit: Enter amount from 2023 Form 306D, Part II, Section 3, Line 5	.00
15.	Communities of Opportunity Tax Credit	.00	Total Coalfield Employment Enhancement Tax Credit allowable	
16.	Green and Alternative Energy Job Creation Tax Credit	.00	this year (Add Lines 3 and 4)	.00
17.	Farm Wineries and Vineyards Tax		6. Reserved for Future Use	
	Credit	.00	7. Motion Picture Production Tax Credit	.00
18.	International Trade Facility Tax Credit	.00	8. Research and Development Expenses Tax Credit	.00
19.	Port Volume Increase Tax Credit	.00	Conservation Tillage and Precision	
20.	Barge and Rail Usage Tax Credit	.00	Agricultural Equipment Tax Credit	.00
	Livable Home Tax Credit		Pass-Through Entity Elective Tax Payment Credit	.00
			Part IV – Total Refundable Credits	
			Total Refundable Credits. Add Part III, Lines 1, 5, and 7-10	.00
				

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Virginia Pass-Through Entity Owner's Share of Income and



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CHECK IF—	virginia iliod								
=	f SHORT Period Return: B	_			_, 2023; Ending Da				
Amended Return: Enter Reason Code			Owner is	Participa	ting in a Unified Nonre	esident	Individual I	ncome	Tax Returr
Ov	vner Information			Pa	ss-Through Entity	(PTE)	Informat	ion	
Name	FEIN or SSN	4050	Name	~		~	FEIN	26506	,
KARTHIK DEVULAPA	LLI 144-23-4	1978		SAI I	NVESTMENTS LI	ıC	93-382		
Address 3116 WIER DR E			Address 42375	ALDEI	R FOREST TER		Taxable Year 12/31		
Address Continued			Address Cor		t TOREDT TER		12731	, 202	
City or Town, State, and ZIP Code	0.7.6		City or Town						
WARRINGTON PA 18	976		STERL.	ING VA	A 20166				
	RMATION (SEE INSTRUCTIONS	,					,		,
	nterest in the PTE (MM/DD/					_	10 /	16	/2023
	nter code)					_	NON		
	ype (Enter code)					_			
	percentage (Example: 47.35								25.00 %
	TE for the owner								0.0
	empt from withholding, ente					f			
	TA INCOME AND DEDUCTIONS TO INCOME AND DEDUCTIONS					1			0.00
						_			.0.
	come								
ALLOCATION AND APPORT									.01
•	rginia (owner's share from F	TE's Schedu	le 502A, Sectio	n C, Line	2)	4.			.00
5. Income allocated outsi	de of Virginia (owner's shar	e from PTE's	Schedule 502A	A, Section	n C, Line 3(e))	5.			.0
	(owner's share from PTE's								0.00
7. Virginia apportionment p	ercentage (from PTE's Schedu	ule 502A, Secti	on B – percent fr	om Line 1	or Line 2(f), or 100%)	7.		1	00.00 %
VIRGINIA ADDITIONS - OW									
	tion								.00
						_			.00
	er tax used as a deduction in					_			.00
	or state obligations other tha					11. ₌			.00
	orm 502 instructions for add	lition codes.)				- 1			
Code 12a.	Amount .00	12b.	Code		Amount .00	n			
12c.	.00	12d.			.00				
	 Lines 8-11 and 12a-12d)					_			.00
VIRGINIA SUBTRACTIONS -	,								
14. Conformity – deprecia	tion					14			.00
15. Conformity – other						15			.00
16. Income from obligation	ns of the United States					16			.0
17. Other subtractions (se	e Form 502 instructions for	subtraction co	odes.)						
Certification	n Number (if applicable)		Code		Amount	- 1			
17a.					.00	0			
					.00	0			
17b.		1 1	1						
17b. 17c.					.00	0			
					.00				

Va. Dept. of Taxation 2601024-W Rev. 09/23

Owner FEIN OF S

Owner FEIN or SSN 144-23-4978

PTE FEIN

93-3826502



Page 2

VIRGINIA TAX CREDITS

- See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations).
- Individual owners with taxes paid to other states, see Schedule OSC Instructions.

Part	I – Nonrefundable Credits	2	2. Research and Development	
1.	State Income Tax Paid (see Form 502 Instructions)	.00	Expenses Tax Credit (Use this line if the taxpayer does not qualify for a refundable credit.)	.00
2.	Neighborhood Assistance Act Tax Credit		3. Education Improvement Scholarships Tax Credit	.00
3.	Biodiesel and Green Diesel Fuels Tax Credit	2	4. Major Research and Development Expenses Tax Credit	.00
4.	Recyclable Materials Processing Equipment Tax Credit	.00	5. Food Donation Tax Credit	.00
5.	Vehicle Emissions Testing Equipment Tax Credit	2	6. Worker Training Tax Credit	.00
6.	Major Business Facility Job Tax Credit	.00	7. Virginia Housing Opportunity Tax Credit	.00
	Waste Motor Oil Burning Equipment		rt II – Total Nonrefundable Credits	
8.	Tax Credit Priparian Forest Buffer Protection for		Total Nonrefundable Credits. Add Part I, Lines 1-8, and 12-27	.00
	Waterways Tax Credit		rt III – Refundable Credits	
	Reserved for Future Use		Agricultural Best Management Practices Tax Credit	.00
10.	Reserved for Future Use		2. 100% Coalfield Employment	.00
	Reserved for Future Use		Enhancement Tax Credit from 2023 Form 306D, Part II, Section 1, Line 1	.00
	Historic Rehabilitation Tax Credit Land Preservation Tax Credit		3. Full Credit: Enter amount from 2023 Form 306D, Part II, Section 2, Line 3	.00
	Qualified Equity and Subordinated Debt Investments Tax Credit		4. 85% Credit: Enter amount from 2023 Form 306D, Part II, Section 3, Line 5	.00
	Communities of Opportunity Tax Credit		5. Total Coalfield Employment Enhancement Tax Credit allowable	
16.	Green and Alternative Energy Job Creation Tax Credit	.00	this year (Add Lines 3 and 4)	.00
17.	Farm Wineries and Vineyards Tax Credit	'	Reserved for Future Use Motion Picture Production	
18.	International Trade Facility Tax		Tax Credit	.00
	Credit		Research and Development Expenses Tax Credit	.00
	Port Volume Increase Tax Credit		9. Conservation Tillage and Precision	00
20.	Barge and Rail Usage Tax Credit	.00_	Agricultural Equipment Tax Credit D. Pass-Through Entity Elective Tax	.00
21.	Livable Home Tax Credit	.00	Payment Credit	.00
		Pa	rt IV – Total Refundable Credits	
			1. Total Refundable Credits.	00

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Add Part III, Lines 1, 5, and 7-10.....