Form 8879
(Rev. January 2021)
Department of the Treasury

Internal Revenue Service

IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

ERO must obtain and retain completed Form 8879. ► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID)

Taxpayor'a pama

тахрау	ler s hame	Social security number					
ESW	IAR NAVEEN KUMAR CHERUKURI	446-71-8754					
Spouse	e's name	Spouse's social	security number				
Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)							
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		80,474.				
2	Total tax		2 9,965.				
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3 13,681.				
4	Amount you want refunded to you		4 3,716.				
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

		-	FBO firm name	5 ,	Er
X	l authorize	GLOBAL TAXES	LLC	to enter or generate my PIN	

1	8	7	5	4	
Ent don	as my				

signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature

Date

Spouse's PIN: check one box only

I authorize

to enter or generate my PIN

as mv Enter five digits, but don't enter all zeros

ERO firm name signature on the income tax return (original or amended) I am now authorizing.

I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature 🕨	Date ►				
Practitioner PIN Method Returns Only—continue below					
Part III Certification and Authentication – Practit	ioner PIN Method Only				
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your fi	ve-digit self-selected PIN. 2 2 2 4 9 6 0 8 2 7 1				

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 >		
-	Must Retain This Form — See Instructions This Form to the IRS Unless Requested To Do	o So
For Denemory Deduction Act Nation and Vous	DEV/ 02/02/04 DBO	Earm 8879 (Bay, 01 2021)

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

1040		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		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, ending , 20				See separate instructions.				
Your first name	and m	iddle initial	Last r	name						Your so	cial sec	urity number
ESWAR NA	VEEI	N KUMAR	СНЕ	RUKURI	г					446	71	8754
		s first name and middle initial	Last		-							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
8243 RAN								3	077			ou, or your
City, town, or post office. If you have a foreign address, also compl			mplete	spaces be	elow.	Sta	ate	ZIP c				jointly, want \$3
IRVING						TΣ	K	750	63			nd. Checking a not change
Foreign country	Foreign country name				rovince/state/	count	ty	Foreig	n postal code	your tax		•
											🗌 Yo	ou 🗌 Spouse
Filing Status		Single					Head of h	ouseh	old (HOH)			
-] Married filing jointly (even if only or	ne hao	d income)					· · ·			
Check only one box.		Married filing separately (MFS)					Qualifying	surviv	ing spouse	(QSS)		
	lf y	you checked the MFS box, enter the	name	of your s	pouse. If you	u che					ld's na	me if the
	qu	alifying person is a child but not you	ır dep	endent:								
Digital	At ar	ny time during 2023, did you: (a) rece	aivo (a	e a rowar	d award or	navr	ment for prope	rty or	services): or	(b) sell		
Digital Assets		hange, or otherwise dispose of a digi						-		. ,	XY	es 🗌 No
Standard		neone can claim: You as a de		·			a dependent					
Deduction	_	Spouse itemizes on a separate return	•		•		•					
		: Were born before January 2, 1		Are b			_	n hofe	ore January	2 1050		s blind
Dependents		• · · · · ·	939	$\overline{}$		ouse		14				see instructions):
-		irist name Last name	• •				(3) Relationsh to you	iip ('	Child tax c	· · ·		or other dependents
lf more than four	(.,.						,					
dependents,												
see instructions	s ——											
and check here												
Income	1a	Total amount from Form(s) W-2, be	ox 1 (s	see instruc	ctions) .					. 1a		97,653.
	b	Household employee wages not re								. 1b		
Attach Form(s) W-2 here. Also	С		•		nstructions)				. 1c			
attach Forms	d	Medicaid waiver payments not rep	•							. 1d	-	
W-2G and	е	Taxable dependent care benefits f			, ,		· · · ·			. 1e		
1099-R if tax was withheld.	f	Employer-provided adoption bene								. 1f		
lf you did not	g	Wages from Form 8919, line 6							. 1g			
get a Form	h	Other earned income (see instructi								. 1h		0.
W-2, see instructions.	i	Nontaxable combat pay election (s	see ins	structions))		1i					
	z	Add lines 1a through 1h								. 1z		97,653.
Attach Sch. B	2a	Tax-exempt interest	2a			bТ	axable interes	t.		. 2b		62.
if required.	3a	Qualified dividends	3a			bС	Ordinary divide	nds .		. 3 b		
	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	lectior	n method,	check here	(see	instructions)		[
\$13,850	7	Capital gain or (loss). Attach Schee	dule D	if require	d. If not requ	uired	, check here		[7		-11.
 Married filing jointly or 	8	Additional income from Schedule	1, line	10						. 8		-17,230.
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,	and 8	3. This is y	our total ind	com	e			. 9		80,474.
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1	, line 26						. 10		
household,	11	Subtract line 10 from line 9. This is	s your	adjusted	gross incor	ne				. 11		80,474.
 \$20,800 If you checked r 	12	Standard deduction or itemized	deduo	ctions (fro	om Schedule	A)				. 12		13,850.
any box under Standard	13	Qualified business income deducti	ion fro	m Form 8	995 or Form	899	95-A			. 13		
Deduction,	14	Add lines 12 and 13								. 14		13,850.
see instructions.	15	Subtract line 14 from line 11. If zer	o or le	ess, enter	-0 This is y	our	taxable incom	ne .		. 15		66,624.

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	9,965.
Credits	17	Amount from Schedule 2, line 3				17	
	18	Add lines 16 and 17				18	9,965.
	19	Child tax credit or credit for other dependent	ts from Sched	ule 8812		19	
	20	Amount from Schedule 3, line 8				20	
	21	Add lines 19 and 20				21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0			22	9,965.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21 .		23	0.
	24	Add lines 22 and 23. This is your total tax				24	
Payments	25	Federal income tax withheld from:					
	а	Form(s) W-2			25a 13	,681.	
	b	Form(s) 1099			25b		
	с	Other forms (see instructions)			25c		
	d	Add lines 25a through 25c				25d	13,681.
If you have a	26	2023 estimated tax payments 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 Schedule 8812			28		
	29	American opportunity credit from Form 8863	, line 8		29		
	30	Reserved for future use			30		
	31	Amount from Schedule 3, line 15			31		
	32	Add lines 27, 28, 29, and 31. These are your			undable credits	32	
	33	Add lines 25d, 26, and 32. These are your to	•	•			13,681.
Refund	34	If line 33 is more than line 24, subtract line 24				34	
lioiuliu	35a	Amount of line 34 you want refunded to you			, ,	. 🗌 35a	3,716.
Direct deposit?	b	Routing number 1 0 3 0 0 0 0				Savings	
See instructions.	d	Account number 3 0 5 0 0 6 0				3	
	36	Amount of line 34 you want applied to your			36		
Amount	37	Subtract line 33 from line 24. This is the amo					
You Owe	0,	For details on how to pay, go to www.irs.gov				37	
	38	Estimated tax penalty (see instructions) .			38		
Third Party	Do	you want to allow another person to disc					
Designee		tructions				mplete below	. 🔀 No
	De	signee's	Phone		Perso	nal identification	
	na	ne	no.		numb	er (PIN)	
Sign		der penalties of perjury, I declare that I have examined ief, they are true, correct, and complete. Declaration of					, ,
Here				,			, ,
	Yo	ur signature	Date	Your occupation			ent you an Identity PIN, enter it here
Joint return?				SOFTWARE 1	ENGINEER	(see inst.)	
See instructions.	Sp	ouse's signature. If a joint return, both must sign.	Date	Spouse's occupat		If the IRS s	ent your spouse an
Keep a copy for						Identity Pro	otection PIN, enter it here
your records.						(see inst.)	
		one no. (469)542-0453	Email address	ESWARNAVEE	N@OUTLOOK.CO		1
Paid	Pre	parer's name Preparer's signat	ure		Date	PTIN	Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA	RAM SAGAR	GUPTA TALLAM	03/07/2024	P02082703	Self-employed
Use Only	Fir	n's name GLOBAL TAXES LLC				Phone no.	(678)965-9522
	Fir	n's address 245 ROONEY CT E BRU	NSWICK N	J 08816		Firm's EIN	84-3171965
Go to www.irs.go	ov/Form	1040 for instructions and the latest information.		BAA	REV 02/23/24 PRO		Form 1040 (2023)

SCHE	DULE	1
(Form	1040)	

Department of the Treasury

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 20 23

Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1040 for instructions and the latest information.		Attachment Sequence No. 01
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR	Your soc	ial security number
ESWAR NAVEEN K	UMAR CHERUKURI	446-71	-8754

Par	t Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	0.
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Att	ach S	Schedule E .	5	-18,180.
6	Farm income or (loss). Attach Schedule F.			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a	()	
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	()	
е	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8 i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
I	Income from the rental of personal property if you engaged in the rental				
	for profit but were not in the business of renting such property	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80			
р	Section 461(I) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8 q			
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	<u>8u</u>		_	
z	Other income. List type and amount:		0.50		
~	Other Income from box 3 of 1099-Misc 950.	8z			050
9	Total other income. Add lines 8a through 8z			9	950.
10	Combine lines 1 through 7 and 9. This is your additional income . Enter 1040, 1040, SP, or 1040, NP, line 8.	r ner	e and on Form		17 000
	1040, 1040-SR, or 1040-NR, line 8	•	<u></u>	10	-17,230.
For Pa	perwork Reduction Act Notice, see your tax return instructions.			Schedul	e 1 (Form 1040) 2023

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			
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:			
	24z			
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter			
	Form 1040, 1040-SR, or 1040-NR, line 10		26	
	BAA REV 02/	/23/24 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.

Your social security number

446-71-8754

20

Attachment

Name(s) shown on return

Department of the Treasury

Internal Revenue Service

ESWAR NAVEEN KUMAR CHERUKURI

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?
Yes 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) Adjustment to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and	
	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, Part I, line 2, column (g)		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	Totals for all transactions reported on Form(s) 8949 with Box B checked						
3	Totals for all transactions reported on Form(s) 8949 with Box C checked						
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4		
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5		
6	Short-term capital loss carryover. Enter the amount, if 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. Otherwis		7				

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) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		(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	3.	14.			-11.	
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		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	15	-11.					

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16		-11.
	 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? Yes. Go to line 18.			
	\Box 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	(11.
	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.			

X No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

BAA REV 02/23/24 PRO

Schedule D (Form 1040) 2023

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side ESWAR NAVEEN KUMAR CHERUKURI

Social security number or taxpayer identification number 446-71-8754

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

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

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

[] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or		(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).	
BAKKT	11/02/22	12/31/23	3.	14.			-11.	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked).			3.	14.			-11.	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE E		Supplemental Income and Loss							OMB No. 1545-0074					
(Form 1040) (From rental real estate, royalties, partnersh				nips, S	corporat	ions, es	tates,	trusts, REMICs	, etc.)	20	93			
	Dopartment of the frequency					40-SR, 1040-NR, or 1041.						Attachment		
	Revenue Service		Go to www.	irs.gov/ScheduleE for	r instru	uctions an	d the la	itest in				ce No. 13		
.,										al security	number			
ESWAR NAVEEN KUMAR CHERUKURI 446-71-8 Part I Income or Loss From Rental Real Estate and Royalties									1-8754					
Part				tal Real Estate an renting personal proper			C Coo	inotrus	tione If you are	on indi	idual rep	out forms		
	rental inco	ome or los	ss from Form 48	335 on page 2, line 40.	ty, use	Schedule	e C. See	Instruc	ctions. If you are	an indi	viduai, rep	ort farm		
Α				at would require you	to file	Form(s)	1099? 5	See ins	tructions		. 🗌 Ye	s 🛛 No		
				d Form(s) 1099?										
1a				street, city, state, ZIF										
	, ,			AR, PALONCHA BH		,	T E 0 7	1 = 1						
 	Н 10 05-0	4-10 G	ANDRI NAG	AR, PALONCHA DE	IADRA	ADKI II	0 507	104						
<u>с</u>														
 1b	Type of Prope	erty 2		tal raal aatata propa	ntu liai	had		Fai	in Dontol	Davaar				
1D	(from list below			ntal real estate prope rt the number of fair				га	ir Rental Days	Person Da	nal Use	QJV		
Α	3	,		e days. Check the Q.					365	0				
B				the requirements to f			B				0			
			qualified joir	nt venture. See instru	ctions	6.	C							
	of Property:													
	Single Family R	esidence	e 3 Vaca	tion/Short-Term Ren	tal	5 Lanc	ł	7	Self-Rental					
	Multi-Family Re			mercial		6 Roya	alties	8	Other (describ	be)				
	-					-								
Incom							Α		Properties	5.		С		
Incom 3		4			3			10.	D			C		
4					4		0	10.						
Expen		iveu			-									
5					5									
6	0				6		7	50.						
7					7		1,9							
8	-				8		= / 2							
9					9									
10					10									
11	-				11		1,1	50.						
12	-			. (see instructions)	12									
13	Other interest				13									
14	Repairs				14		5,0	30.						
15	Supplies .				15		5,3	10.						
16	Taxes				16									
17					17		4,5	70.						
18	•	expense	or depletion .		18									
19	Other (list)				19									
20	-		-	19	20		18,7	90.						
21				nd/or 4 (royalties). If										
				find out if you must	0.1		-18,1	00						
00					21		-10,1	80.						
22				er limitation, if any,	22	(10 10		,)	(
23a		-		3 for all rental prope		1	18,18	23a) 610.	(
zsa b				4 for all royalty prop			•	23a 23b		<u>.</u>				
c D				12 for all properties				230 23c						
d				18 for all properties				23d						
e				20 for all properties				23e	18.	790.				
24				vn on line 21. Do not						24				
25				1 and rental real estate		-			al losses here	25	(18,180.		
26				/ income or (loss).							· · ·	,		

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.

26

.

-18,180.