### IRS e-file Signature Authorization

OMB No. 1545-0074

Social accurity number

Department of the Treasury
Internal Revenue Service

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

Submission Identification Number (SID)

Taxpayer's name

Taxpaye	r's name	Social security number	
PRA	SHANTH REDDY BOLLA	380-51-0983	
Spouse's name Spouse's social security			
AAM	ANI GOGULA	664-47-2422	
Part	Tax Return Information – Tax Year Ending December 31, 2023 (Enter	r 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	<b>1</b> 187,151.	
2	Total tax		
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	· · · · <b>3</b> 32,195.	
4	Amount you want refunded to you	4 8,501.	
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 perjury, 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

ERO firm name	,	Er
X I authorize GLOBAL TAXES LLC to enter or ger	nerate my PIN	

	1	0	9	8	3				
Enter five digits, but don't enter all zeros									

2 2

4

Enter five digits, but don't enter all zeros

7 2

my

as mv

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 🕨

#### Spouse's PIN: check one box only

X I authorize <u>GLOBAL TAXES LLC</u> 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 E	Date 🕨									
Practitioner PIN Method Returns Only—continue below										
Part III Certification and Authentication – Practitioner PIN Method Only										
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN.	2	2				6 nter al			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 >		Date 🕨	
	RO Must Retain This Form — See mit This Form to the IRS Unless		
			F 0070 (D 01 0001)

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

Date

to enter or generate my PIN

<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn	202	3	OMB No. 1545	-0074	IRS Use Only	—Do not w	rite or sta	ple in this space.	
For the year Jan	. 1–Dec	. 31, 2023, or other tax year beginning			, 2023, end	ing	1		, 20	See se	See separate instructions.		
Your first name	and mi	 iddle initial	Last na	me						Your so	cial sec	urity number	
PRASHANT			BOLL									0983	
	me								security number				
If joint return, spouse's first name and middle initial Last name AAMANI GOGULA									•		2422		
	(numbe	er and street). If you have a P.O. box, see						A	pt. no.			ection Campaign	
5 LOS CA	•	, ,							•			ou, or your	
		ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	ite	ZIP c	ode	spouse	if filing j	jointly, want \$3	
ODESSA				-		ТХ	ζ	797	65			nd. Checking a not change	
Foreign country	name		F	oreign pr	ovince/state/	count	ty		n postal code	your tax		0	
											Yo	u 🗌 Spouse	
Filing Status		Single					Head of ho	ouseh	old (HOH)				
-		Married filing jointly (even if only o	ne had i	ncome)					· · ·				
Check only one box.		Married filing separately (MFS)		,			Qualifying	surviv	ving spouse	(QSS)			
	lf y	you checked the MFS box, enter the	name o	of your sp	oouse. If you	ı che	ecked the HOH	l or Q	SS box, ente	r the chi	ld's nai	me if the	
	qu	alifying person is a child but not you	ır depen	ident:									
Divital	At or	ny time during 2023, did you: (a) rec		a roward	l award or	n	mont for propo	rtu or	convicos): or				
Digital Assets		ange, or otherwise dispose of a dig									×Υε	s 🗌 No	
Standard		eone can claim:  You as a de					a dependent	.). (O		101)			
Deduction	_	Spouse itemizes on a separate retur	•		•		•						
				_			_				<u> </u>		
		Were born before January 2, 1	959	Are bl	ind Spc	ouse	: 📋 Was bor		ore January 2	,		s blind	
Dependents		(see instructions):			Social security number		(3) Relationsh	ip <b>(4</b>	Check the b Child tax c	· · ·		see instructions): r other dependents	
If more	(1) First name Last name HANVIKA BOLLA			2.4.2		~	to you			euit	Cleuit IO		
than four dependents,	HAN	IVIKA BOLLA		343	-77-311	9	Daughter		<u> </u>				
see instructions	s ——												
and check here													
	1a	Total amount from Form(s) W-2, b	ov 1 (se	 e instruc	tions)					. 1a		209,312.	
Income	b	Household employee wages not re			,					. 1b		200,512.	
Attach Form(s)	c	Tip income not reported on line 1a								. 1c			
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep			•					. 1d	-		
W-2G and	e	Taxable dependent care benefits f								. 1e			
1099-R if tax was withheld.	f	Employer-provided adoption bene		,						. 1f	-		
If you did not	g	Wages from Form 8919, line 6 .			-					. 19			
get a Form	h	Other earned income (see instruct								. 1h		0.	
W-2, see instructions.	i	Nontaxable combat pay election (s	, see instr	uctions)			1i						
	z	Add lines 1a through 1h		· · ·						. 1z		209,312.	
Attach Sch. B	2a	Tax-exempt interest	2a			b Ta	axable interest	· .		. 2b			
if required.	3a	Qualified dividends	3a		10.	<b>b</b> 0	Ordinary divider	nds .		. 3b		10.	
	4a	IRA distributions	4a			b T	axable amount	t		. 4b			
Standard Deduction for—	5a	Pensions and annuities	5a			b Ta	axable amount	t		. 5b			
<ul> <li>Single or</li> </ul>	6a	Social security benefits	6a			b Ta	axable amount	t		. 6b			
Married filing separately,	с	If you elect to use the lump-sum e	lection r	nethod,	check here	(see	instructions)		[				
\$13,850	7	Capital gain or (loss). Attach Schee	dule D if	<sup>;</sup> required	d. If not requ	ired,	, check here		[	7		-3,000.	
<ul> <li>Married filing jointly or</li> </ul>	8	Additional income from Schedule	1, line 10	0						. 8		-19,171.	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8. <sup>-</sup>	This is y	our <b>total inc</b>	ome	e			. 9		187,151.	
\$27,700 • Head of	10	Adjustments to income from Sche	dule 1, l	ine 26						. 10			
household,	11	Subtract line 10 from line 9. This is	s your <b>ac</b>	djusted	gross incor	ne				. 11		187,151.	
\$20,800 • If you checked г	12	Standard deduction or itemized	deducti	i <b>ons</b> (fro	m Schedule	A)				. 12		27,700.	
any box under Standard	13	Qualified business income deduct	ion from	Form 8	995 or Form	899	5-A			. 13			
Deduction,	14	Add lines 12 and 13								. 14		27,700.	
see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -	0 This is y	our <b>t</b>	taxable incom	e.		. 15		159,451.	

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

Form **1040** (2023)

Form 1040 (2023	3)								Page <b>2</b>
Tax and	16	Tax (see instructions). Check	if any from Form	(s): <b>1</b> 🗌 881	4 <b>2</b> 4972	3 🗌		16	25,694.
Credits	17	Amount from Schedule 2, lir	ne3					17	
	18	Add lines 16 and 17					[	18	25,694.
	19	Child tax credit or credit for	other dependen	ts from Sched	ule 8812			19	2,000.
	20	Amount from Schedule 3, lir	ne8					20	
	21	Add lines 19 and 20						21	2,000.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0				22	23,694.
	23	Other taxes, including self-e						23	0.
	24	Add lines 22 and 23. This is						24	23,694.
Payments	25	Federal income tax withheld							
, <b>,</b>	а	Form(s) W-2				<b>25a</b> 32	,195.		
	b	Form(s) 1099				25b			
	с	Other forms (see instruction	s)			25c			
	d	Add lines 25a through 25c	<i>.</i>					25d	32,195.
If you have a	26	2023 estimated tax payment	ts and amount a	pplied from 20	22 return .			26	
qualifying child,	27	Earned income credit (EIC)			No	27			
attach Sch. EIC.	28	Additional child tax credit from				28			
	29	American opportunity credit	from Form 8863	8, line 8		29			
	30	Reserved for future use .		-		30			
	31	Amount from Schedule 3. lir				31			
	32	Add lines 27, 28, 29, and 31	. These are vour	total other pa	avments and ref	undable credits		32	
	33	Add lines 25d, 26, and 32. T			-			33	32,195.
Refund	34	If line 33 is more than line 24						34	8,501.
lioiana	35a	Amount of line 34 you want	-					35a	8,501.
Direct deposit?	b	Routing number 1 1 1					Savings		
See instructions.	d	Account number 4 8 8					Ű		
	36	Amount of line 34 you want a				36			
Amount	37	Subtract line 33 from line 24							
You Owe	0.	For details on how to pay, g						37	
	38	Estimated tax penalty (see in				38			
Third Party	Do	you want to allow another	,			See			
Designee		structions	•				omplete be	elow.	🗙 No
U	De	signee's		Phone			onal identifie	cation	
	nai			no.			per (PIN)		
Sign		der penalties of perjury, I declare the ief, they are true, correct, and com							
Here			piete. Deciaration	、	,			• •	, .
	YO	ur signature		Date	Your occupation				nt you an Identity IN, enter it here
Joint return?					CIVIL ENG	INEER	(see ir		,
See instructions.	Sp	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupat		If the I	RS ser	nt your spouse an
Keep a copy for your records.									ection PIN, enter it here
your records.		SOFTWARE ENGINEER (See		(see ir	ist.)				
		one no. (432)557-264		Email address	PRASHANTH.	BPR@GMAIL.CC			
Paid		eparer's name	Preparer's signat			Date	PTIN		Check if:
Preparer	SYA	M PRIYA RAM SAGAR GUPTA		A RAM SAC	GAR GUPTA	03/16/2024	P02082		Self-employed
Use Only	Fir	m's name GLOBAL TA					Phone	∍no. (	678)965-9522
	Fir	m's address 245 ROONE	Y CT E BRU	NSWICK N	J 08816		Firm's	EIN	
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		BAA	REV 03/07/24 PRO			Form <b>1040</b> (2023)

SCHEDULE	1
(Form 1040)	

Department of the Treasury

## Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074 2023

Attachment Sequence No. **01** Your social security number 380-51-0983

Internal Revenue Service	Go to www.irs.gov/Fo
Name(s) shown on Fo	rm 1040, 1040-SR, or 1040-NR

( )		,		,	
PRASHANTH	REDDY	BOLLA	&	AAMANI	GOGULA

Par	t Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-19,171.
6	Farm income or (loss). Attach Schedule F.	6	
7	Unemployment compensation	7	
8	Other income:		
а	Net operating loss	)	
b	Gambling		
С	Cancellation of debt		
d	Foreign earned income exclusion from Form 2555    .    .    8d	)	
е	Income from Form 8853		
f	Income from Form 8889		
g	Alaska Permanent Fund dividends		
h	Jury duty pay		
i	Prizes and awards         8i		
j	Activity not engaged in for profit income	_	
k	Stock options	_	
	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)	_	
n	Section 951(a) inclusion (see instructions)	_	
0	Section 951A(a) inclusion (see instructions)	_	
р	Section 461(I) excess business loss adjustment	_	
q	Taxable distributions from an ABLE account (see instructions)   8q	_	
r	Scholarship and fellowship grants not reported on Form W-2 8r	_	
S	Nontaxable amount of Medicaid waiver payments included on Form		
	1040, line 1a or 1d	<u> </u>	
t	Pension or annuity from a nonqualifed deferred compensation plan or		
	a nongovernmental section 457 plan	-	
u -		-	
z	Other income. List type and amount: 8z		
9	Total other income. Add lines 8a through 8z	9	
9 10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form		
10	1040, 1040-SR, or 1040-NR, line 8	10	-19,171.
or Pa	nerwork Beduction Act Notice, see your tax return instructions.		Le 1 (Form 1040) 2023

F ice, see your ta etu

Schedule 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	s 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:			
 a	Jury duty pay (see instructions)			
b	Deductible expenses related to income reported on line 8I from the		-	
D	rental of personal property engaged in for profit			
с	Nontaxable amount of the value of Olympic and Paralympic medals		-	
C	and USOC prize money reported on line 8m			
d			-	
	Repayment of supplemental unemployment benefits under the Trade		-	
е	Act of 1974			
			-	
f			-	
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	er here and on		
	Form 1040, 1040-SR, or 1040-NR, line 10	<u></u>	26	
	BAA REVO	)3/07/24 PRO	Schedule 1 (F	orm 1040) 202

SCHEDULE	D
(Form 1040)	

## **Capital Gains and Losses**

OMB No. 1545-0074

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.

20**23** Attachment Sequence No. **12** 

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

PRASHANTH REDDY BOLLA & AAMANI GOGULA

Your social security number

380-51-0983

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? 
Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	115,113.	133,321.	5,3	19.	-12,889.
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term gain from Form 6252 and short-term gain or (	oss) from Forms 4	684, 6781, and 88	324	4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1			usts from	5	
6	Short-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	6	( 38,275.)		
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise				7	-51,164.

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

lines	instructions for how to figure the amounts to enter on the below.			<b>(g)</b> Adjustmen to gain or loss		(h) Gain or (loss) Subtract column (e) from column (d) and
This who	form may be easier to complete if you round off cents to e dollars.	(sales price)	(or other basis)	Form(s) 8949, I line 2, colum	Part II,	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 <b>Box D</b> checked	1,812.	8,527.			-6,715.
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> 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	dule(s) K-1	12			
13	Capital gain distributions. See the instructions	13				
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	14	( 4,006.)			
15	Net long-term capital gain or (loss). Combine lines 8a on the back .	•			15	-10,721.

Part	III Summary			
16	Combine lines 7 and 15 and enter the result	16		-61,885.
	• If line 16 is a <b>gain</b> , 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , 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 <b>both</b> gains? <b>Yes.</b> Go to line 18.			
	<b>No.</b> Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	<ul> <li>Are lines 18 and 19 both zero or blank and you are not filing Form 4952?</li> <li>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.</li> </ul>			
	□ 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:			
	<ul> <li>The loss on line 16; or</li> <li>(\$3,000), or if married filing separately, (\$1,500)</li> </ul>	21	(	3,000.)
	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.			
	<b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

BAA REV 03/07/24 PRO

Schedule D (Form 1040) 2023

Department of the Treasury

Internal Revenue Service

## Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return	Social security number or taxpayer identification number			
PRASHANTH REDDY BOLLA & AAMANI GOGULA	380-51-0983			

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

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

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

C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property		<b>(b)</b> Date acquired	<b>(c)</b> Date sold or	<b>(d)</b> Proceeds	<b>(e)</b> Cost or other basis See the <b>Note</b> below	If you enter an enter a co See the sep	f any, to gain or loss amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss) Subtract column (e)	
	imple: 100 sh. XYZ Co.)		disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) (g) Code(s) from instructions Amount of adjustment		from column (d) and combine the result with column (g).	
Robinhood Securiti	es LLC.	06/17/23	12/31/23	112,813.	128,093.	W	5,269.	-10,011.	
Robinhood Securiti	es LLC	08/11/23	12/31/23	2,300.	5,228.	W	50.	-2,878.	
2 Totals. Add the amounts negative amounts). Ente Schedule D, line 1b (if Bo above is checked), or line	lude on your <b>1e 2</b> (if <b>Box B</b>	115,113.	133,321.		5,319.	-12,889.			

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

Form 8949 (2023)	Attachment Sequence No. 12A	Page <b>2</b>
Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side	Social security number or taxpayer identification num	ber

PRASHANTH REDDY BOLLA & AAMANI GOGULA

Social security number or taxpayer identification number 380-51-0983

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>(b)</b> Date acquired	<b>(c)</b> Date sold or disposed of	<b>(d)</b> Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e)	Adjustment, i If you enter an enter a c See the sep	(h) Gain or (loss) Subtract column (e) from column (d) and		
(Example: 100 sh. XYZ Ćo.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g).	
Robinhood Securities LLC	10/18/22	12/31/23	1,311.	6,140.			-4,829.	
Robinhood Securities LLC	10/17/22	12/31/23	501.	2,387.			-1,886.	
2 Totals Add the amounts in columns								
<b>2</b> 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).			1,812.	8,527.			-6,715.	

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.

	DULE E		Supplemental Income and Loss OMB No. 1545-0074									
(Form 1040) (From rental real estate, royalties, p					ships, S corporations, estates, trusts, REMICs, etc.)						20	23
	ent of the Treasury			ttach to Form 1040,							Attachm	ent 10
	Revenue Service		Go to www.ir	s.gov/ScheduleE for	rinstru	ictions an	d the la	itest in				ce No. <b>13</b>
	shown on return			COCTT A							al security r	number
	HANTH REDD									380-5	1-0983	
Part	Note: If yo	ou are in th	ne business of re	Il Real Estate an nting personal proper 5 on page 2, line 40.			<b>C</b> . See	instru	ctions. If you ar	e an indi <sup>,</sup>	vidual, repo	ort farm
A D				t would require you	to file	Form(s) 1	099? 5	See ins	structions		. 🗌 Ye	s 🛛 No
												_
<b>1</b> a	If "Yes," did you or will you file required Form(s) 1099?											
A	1-66/1 KU	PPIRED	DY GUDEM S	URYAPET TELAN	IGANA	A IN 50	8213					
B												
C								1				
1b	Type of Prope (from list below			al real estate prope				Fa	ir Rental		nal Use	QJV
-	1 `	<i>w</i> )		the number of fair days. Check the Q			•		Days	Da	iys	
 	3			e requirements to f			A B		365		0	
- C			qualified joint	venture. See instru	ictions	3.	C					
	of Property:						0					
	Single Family R	esidence	3 Vacatio	on/Short-Term Ren	tal	5 Land		7	Self-Rental			
	Multi-Family Re		4 Comm		lai	6 Roya		-	Other (descril	ne)		
				orolar								
									Propertie	s:		
Incom							A		В			C
3					3		6	80.				
4		ived			4							
Expen					-							
5	0				5			<u> </u>				
6		-	-		6 7			60.				
7 8	•				8		1,7	40.				
o 9					0 9							
9 10					10							
11	•				11		1,5	10				
12	-			(see instructions)	12		1,5	10.				
13		•		,	13							
14					14		5,1	26.				
15					15		5,4					
16	Taxes				16							
17	Utilities				17		5,7	50.				
18	Depreciation e	xpense o	or depletion .		18							
19	Other (list)				19							
20	Total expenses	s. Add lin	es 5 through 1	9	20		19,8	51.				
21			( /	l/or 4 (royalties). If								
				nd out if you must								
	file Form 6198				21	-	-19,1	71.				
22				r limitation, if any,			10 15		,	,		,
<b>6</b> 0		-			22	(	19,17	· · ·	(	)	(	)
23a	Total of all amounts reported on line 3 for all rental properties23a680.Total of all amounts reported on line 4 for all royalty properties23b									680.		
b								23b				
	c       Total of all amounts reported on line 12 for all properties       23c         d       Total of all amounts reported on line 18 for all properties       23d											
d				0 for all properties				23d 23e	10	851.		
е 24				on line 21. <b>Do not</b>		 de anv los		236	, Tà	<b>24</b>		
24 25				and rental real estat		•		•••• nter to	tal losses here		( 1	L9,171.)
26				income or (loss).								
				0 on page 2 do no								
				wise, include this a					on page 2 .	26	-	-19,171.
For Pa				enarate instructions		NF			-19,171.			orm 1040) 2023

Schedule E (Form 1040) 2023

#### SCHEDULE 8812 (Form 1040)

Department of the Treasury

# Credits for Qualifying Children and Other Dependents

OMB No. 1545-0074

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

20 Attachment Sequence No. 47

Internal							
Name(s	s) shown on return		Your so	ocial s	ecurity number		
PRAS	HANTH REDDY BOLLA & AAMANI GOGULA		380-	51-0	0983		
Pa	rt I Child Tax Credit and Credit for Other Dependents						
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR			1	187,151.		
2a	Enter income from Puerto Rico that you excluded						
b	Enter the amounts from lines 45 and 50 of your Form 2555		0.				
c	Enter the amount from line 15 of your Form 4563						
d	Add lines 2a through 2c			2d	0.		
3	Add lines 1 and 2d			3	187,151.		
4	Number of qualifying children under age 17 with the required social security number 4		1				
5	Multiply line 4 by \$2,000		· [	5	2,000.		
6	Number of other dependents, including any qualifying children who are not under age						
	17 or who do not have the required social security number		0				
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national	l, or U.S. resid	ent				
	alien. Also, do not include anyone you included on line 4.						
7	Multiply line 6 by \$500			7			
8	Add lines 5 and 7		· [	8	2,000.		
9	Enter the amount shown below for your filing status.						
	• Married filing jointly—\$400,000						
	• All other filing statuses— $$200,000 \int \dots $		· L	9	400,000.		
10	Subtract line 9 from line 3.						
	• If zero or less, enter -0						
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For						
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.			10	0.		
11	Multiply line 10 by 5% (0.05)			11	0.		
12	Is the amount on line 8 more than the amount on line 11?			12	2,000.		
	<b>No. STOP.</b> You cannot take the child tax credit, credit for other dependents, or additionation	l child tax cre	dit.				
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.						
	Yes. Subtract line 11 from line 8. Enter the result.			10			
13	Enter the amount from <b>Credit Limit Worksheet A</b>			13	25,694.		
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependent of the smaller of line 12 or line 13. This is your child tax credit and credit for other dependent of the smaller of line 13.	idents	·	14	2,000.		
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.						
	If the amount on line 12 is more than the amount on line 14, you may be able to take						
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27						

(also complete Schedule 3, line 11) before completing Part II-A.

For Paperwork Reduction Act Notice, see your tax return instructions. REV 03/07/24 PRO Schedule 8812 (Form 1040) 2023 BAA

Schedu	ıle 8812 (Form 1040) 2023		Page <b>2</b>
Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lin	e 27	🔲
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,600.		
	Enter the result. If zero, stop here; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	<b>TIP:</b> The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	<b>No.</b> Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result       19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots$	20	
	Next. On line 16b, is the amount \$4,800 or more?		
	<b>No.</b> If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part		IS OT H	vuerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or		
	if you are a bona fide resident of Puerto Rico, see instructions	-	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22	-	
23	Add lines 21 and 22	-	
24	<b>1040 and</b> <b>1040-SR filers:</b> Enter the total of the amounts from Form 1040 or 1040-SR, line 27, )		
	and Schedule 3 (Form 1040), line 11.		
	<b>1040-NR filers:</b> Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
23 26	Enter the <b>larger</b> of line 20 or line 25	23	
<b>_</b> U	Next, enter the smaller of line 17 or line 26 on line 27.	20	
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	
	•		812 (Form 1040) 2023

Form	8867	Paid Preparer's Due Dilig				F	No. 1545	ar
(Rev. N	Form         Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),           Rev. November 2023)         Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and           Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status				20 _ 23	3		
	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8867 for instructions and the latest information.			Attachment Sequence No. <b>70</b>				
	er name(s) shown or				Taxpayer identifica			
PRA	SHANTH REDI	Y BOLLA & AAMANI GOGULA			380-51-09	83		
Prepare	er's name				Preparer tax identi	fication num	ıber	
SYA	M PRIYA RAM	I SAGAR GUPTA			P02082703			
Par	Due Dili	gence Requirements						
		ropriate box for the credit(s) and/or HOH filing state ed (check all that apply).	us claim ] EIC	ed on the re	•			arts I–\ HOH
1	Did you comp	ete the return based on information for the applicat	ole tax y	ear provided	by the taxpaye	r Yes	No	N/A
		bbtained by you?				×		
2	worksheets fo 1040) instruct	claimed on the return, did you complete the app und in the Form 1040, 1040-SR, 1040-NR, 1040-PF ons, and/or the AOTC worksheet found in the Fo nat provides the same information, and all related	R, 1040- orm 886	SS, or Sche	dule 8812 (Form ns, or your owr	ו ו		
3	<ul><li>the following.</li><li>Interview the determine the</li><li>Review information</li></ul>	taxpayer, ask questions, and contemporaneously d at the taxpayer is eligible to claim the credit(s) and/o mation to determine that the taxpayer is eligible to figure the amount(s) of any credit(s)	ocumen r HOH fi claim tł	t the taxpaye iling status. ne credit(s) a	er's responses to nd/or HOH filing			
4	information rea	nation provided by the taxpayer or a third party asonably known to you, appear to be incorrect, in ons 4a and 4b. If " <b>No</b> ," go to question 5.)	complet	e, or inconsi	stent? (If "Yes,"		X	
а	Did you make	reasonable inquiries to determine the correct, compl	ete, and	l consistent i	nformation? .			
b	you asked, wh	mporaneously document your inquiries? (Documer om you asked, when you asked, the information th d on your preparation of the return.)	at was	provided, and	d the impact the			
5	keep a copy of applicable wor 8867 and any taxpayer that the amount(s)	w the record retention requirement? To meet the record f your documentation referenced in question 4b, a c ksheet(s), a record of how, when, and from whom t applicable worksheet(s) was obtained, and a copy you relied on to determine eligibility for the credit(s) of the credit(s)	opy of t he infor of any and/or	his Form 886 mation used document(s) HOH filing st	7, a copy of any to prepare Form provided by the tatus or to figure	/ 1 2		
6		e taxpayer whether he/she could provide document r HOH filing status and the amount(s) of any crec						
		ed for audit?				' ×		
7		e taxpayer if any of these credits were disallowed or				X	+	
-	•	e disallowed or reduced, go to question 7a; if not			- ,			
а		ete the required recertification Form 8862?						
8		is reporting self-employment income, did you ask				4 <u> </u>		
		ule C (Form 1040)?						

For Paperwork Reduction Act Notice, see separate instructions.

REV 03/07/24 PRO

Form 8867 (Rev. 11-2023)

Form 88	367 (Rev. 11-2023)			Page <b>2</b>
Part	II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go	to Part	III.)	
9a	Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	Yes	No	N/A
b	Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?			
с 	Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?			
Part	<b>Due Diligence Questions for Returns Claiming CTC/ACTC/ODC</b> (If the return does not or ODC, go to Part IV.)	claim C	CTC, A	CTC,
10	Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	Yes X	No	N/A
11	Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	X		
12	Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	X		
Part		, go to	Part \	/.)
13	Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qu tuition and related expenses for the claimed AOTC?	alified	Yes	No
Part		s, go to	o Part	VI.)
14	Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the ta and provided more than half of the cost of keeping up a home for the year for a qualifying person?	k year	Yes	No
Part	<ul> <li>Eligibility Certification</li> <li>You will have complied with all due diligence requirements for claiming the applicable credit(s) and on the return of the taxpayer identified above if you:</li> <li>A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's response.</li> </ul>		•	
	in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit( status and to figure the amount(s) of the credit(s);	s) and/c	or HOH	filing
	B. Complete this Form 8867 truthfully and accurately and complete the actions described in this check credit(s) claimed and HOH filing status, if claimed;	list for a	iny app	licable
	C. Submit Form 8867 in the manner required; and			
	D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 88 Document Retention.	67 instri	uctions	under
	1. A copy of this Form 8867.			
	2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.			

- 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
- 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
- 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

## If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).

15	Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and	Yes	No
	complete?	×	

REV 03/07/24 PRO

Form 8867 (Rev. 11-2023)